

Inspection Photos
Location Name: Peterson #1
API #123-08607



Colorado Oil And Gas Conservation Commission
40.34765, -105.03531, 1534.0m
05/05/2020 10:02:28 AM

Wellhead



Colorado Oil And Gas Conservation Commission
40.34759, -105.03531, 1534.0m
05/05/2020 10:02:32 AM

HZ safety prep sign

Inspection Photos
Location Name: Peterson #1
API #123-08607



Initial casing pressure



5 minute casing pressure

Inspection Photos
Location Name: Peterson #1
API #123-08607



10 minute casing pressure



15 minute casing pressure

Inspection Photos

Location Name: Peterson #1

API #123-08607

Click here to reset this form

FORM 17
Rev 9/14

State of Colorado
Oil and Gas Conservation Commission

2100 Lincoln Avenue, Suite 801, Denver, Colorado 80202 | (303) 656-2100 | Fax: (303) 894-2104

FOR OCC USE ONLY

Discovery Number: _____

Date Received: _____

MECHANICAL INTEGRITY TEST

The user of this document must read and understand the instructions on the front of this form and use only authorized OGC representatives.
 1. This form is intended to be used by OGC representatives only.
 2. For production wells, well operators must file a copy of this form with the OGC representative.
 3. This form is intended to be used for inspection purposes only.
 4. For inspection wells, well operators must file a copy of this form with the OGC representative.
 5. A separate OGC representative must be present for the inspection.
 6. The OGC representative must be present for the inspection.
 7. The OGC representative must be present for the inspection.
 8. The OGC representative must be present for the inspection.

OCGC Representative Information		Contact Name and Telephone		Production Date	Open	OCGC
OCGC Representative Number: <u>229330</u>		Contact Name: <u>Margie Opendick</u>	Telephone: <u>9706790093</u>			
Name of Operator: <u>2012 A. Leasing LLC</u>		Address: <u>2012 A. Leasing LLC</u>				
City: <u>Longmont</u>	State: <u>CO</u>	County: <u>Weld</u>	OCGC Representative Name: <u>Margie Opendick</u>			
API Number: <u>05-0113-08607</u>	OCGC Facility ID Number: <u>13414</u>	Well Number: <u>124330</u>	Well Name: <u>124330</u>			
Wellhead Name: <u>124330</u>	Wellhead ID: <u>124330</u>	Wellhead Type: <u>1</u>	Wellhead Status: <u>1</u>			

SHUT-IN PRODUCTION WELL INJECTION WELL Well MT Date: _____

TEST TYPE: PER TO Maintain SITA status 3-year LIC Reset Packer
 Verification of Repairs Airflow LIC Test

Describe Repairs or Other Well Activities: _____

Wellbore Data at Time of Test	Production Interval	Depth (feet)	Wellbore Diameter	Wellbore Diameter	Wellbore Diameter
Wellbore Diameter: <u>4 1/2" TM</u>	Production Interval: <u>4836-4857</u>	Depth (feet): _____	Wellbore Diameter: _____	Wellbore Diameter: _____	Wellbore Diameter: _____

See when performed in report file is related by change plug, in current plug, and if sealed hole only with plug and seal cement.

Wellbore Data at Time of Test	Production Interval	Depth (feet)	Wellbore Diameter	Wellbore Diameter	Wellbore Diameter
Wellbore Diameter: <u>4 1/2" TM</u>	Production Interval: <u>4836-4857</u>	Depth (feet): _____	Wellbore Diameter: _____	Wellbore Diameter: _____	Wellbore Diameter: _____

I hereby certify that the statements made in this form are to the best of my knowledge, true, correct, and complete.

Operator Name: _____ Title: _____ Date: _____
 OGC Representative Name: _____ Title: _____ Date: _____

Colorado Oil And Gas Conservation Commission
 40.34758, -105.03523, 1539.0m
 05/05/2020 10:37:39 AM

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