

Inspection Photos
Location Name: Saulcy-Gentry #1
API # 069-06236



Wellhead

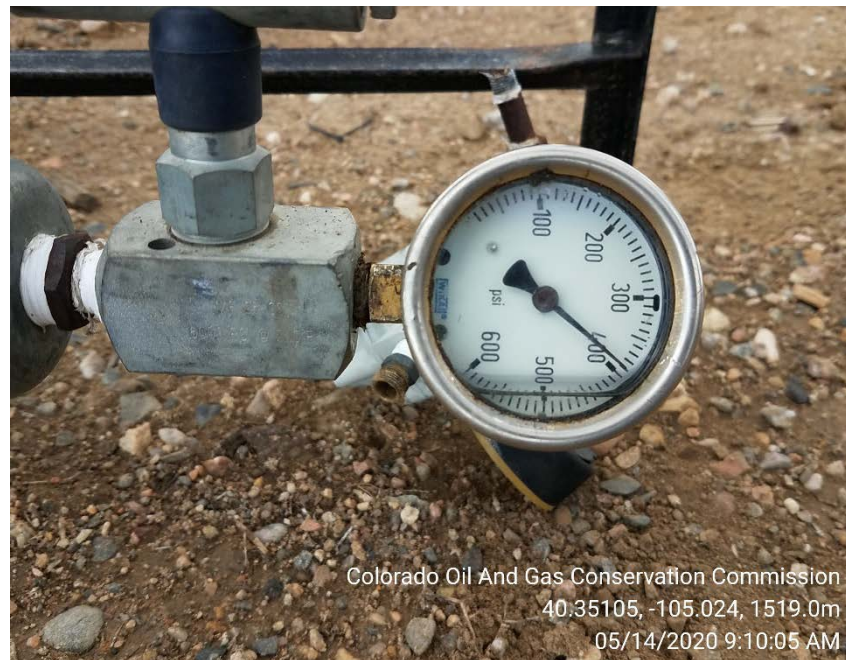


HZ safety prep sign

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Starting MIT casing pressure

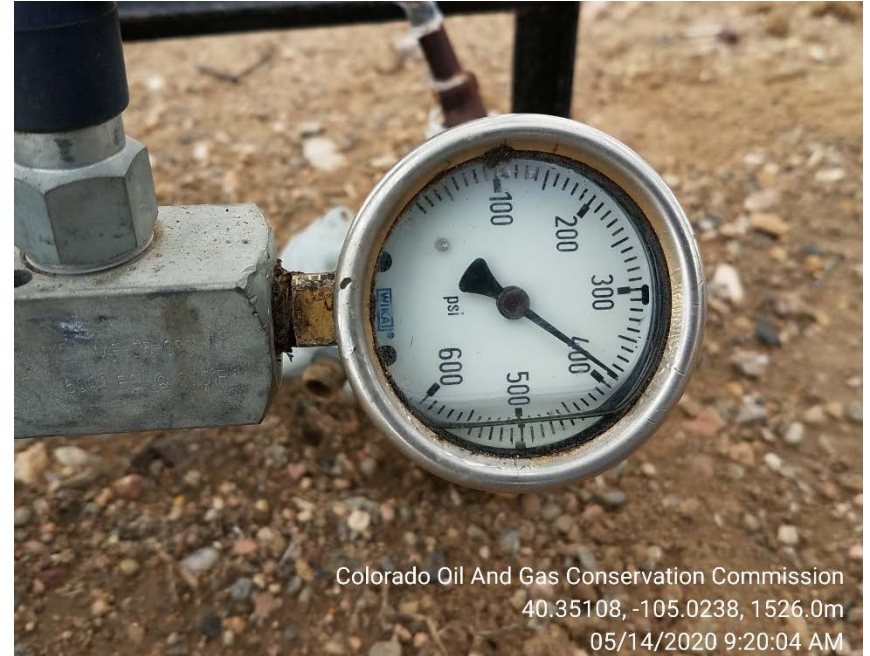


5 minute casing pressure

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10 minute casing pressure



15 minute casing pressure

Inspection Photos

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Form 91
Rev 3/14

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State of Colorado
Oil and Gas Conservation Commission

12-20 Lincoln Street, Suite 300, Denver, Colorado 80202 (303) 858-2100 Fax: (303) 858-2109

MECHANICAL INTEGRITY TEST

1. Duration of the pressure test must be a minimum of 15 minutes.
2. All pressure tests must be conducted by a licensed OGC representative.
3. For production wells, test pressure shall not be less than the maximum allowable working pressure (MAWP) or the design pressure, whichever is greater.
4. For injection wells, test pressure shall not be less than the maximum allowable working pressure (MAWP) or the design pressure, whichever is greater.
5. For wells with a casing or tubing head pressure (THP) of 100 psi or less, the test pressure shall be 100 psi or the design pressure, whichever is greater.
6. OGC representative must be provided 20 days prior to the test to allow for scheduling and necessary permits.
7. The test shall be conducted in accordance with the requirements of the Colorado Oil and Gas Conservation Act and the rules promulgated thereunder.

OSCC Operator Number: 52530

Name of Operator: Alvord Operating Inc

Address: 2707 S. County Road 7

City: Leadville State: CO Zip: 80471 No: 7706416303

APN Number: 05-067-001 Well/Facility ID Number: 21049

Well/Facility Name: Saulcy-Gentry

Location OGRN: 556 Section: 7 Township: 10N Range: 1E Meridian: 10N

☐ SHUT-IN PRODUCTION WELL ☐ INJECTION WELL ☐ Reset Packer

Test Type:
☐ Test to Maintain S/TA status
☐ Verification of Repairs
Describe Repairs or Other Well Activities: _____

Last MIT Date: _____

Wellbore Data at Time of Test

Inspection/Producing Zone(s): NB11A

Perforated Interval: 5278-5273

Open Hole Interval: _____

Casing Test: Use when perforations or open hole is isolated by bridge plug or cement plug; use if cased hole only with plug back total depth.

Tubing Casing/Annulus Test

Tubing Size: _____ Tubing Depth: _____ Top Packer Depth: _____

Multiple Packers? ☐ Yes ☐ No

Test Data

Test Date: 5-14-20 Well Status During Test: SL

Casing Pressure Start Test: 380 Casing Pressure - 1 Min: 380 Casing Pressure Failure Test: 0 Initial Tubing Pressure: 0

Test Withstood by State Representative? ☒ Yes ☐ No

OSCC Field Representative (Print Name): Tam Peterson

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

Print Name: Ross Warner

Signed: [Signature]

OSCC Approval: _____

Conditions of Approval, if any: _____ Title: _____ Date: _____

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Form 21