

FORM

21

Rev 08/14

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402428345

Date Received:

MECHANICAL INTEGRITY TEST

- 1. Duration of the pressure test must be a minimum of 15 minutes.
2. An original pressure chart must accompany this report if this test was not witnessed by an OGCC representative.
3. For production wells, test pressures must be at a minimum of 300 psig.
4. New injection wells must be tested to maximum requested injection pressure.
5. For injection wells, test pressures must be at least 300 psig or average injection pressure, whichever is greater.
6. A minimum 300 psi differential pressure must be maintained between the tubing and tubing/casing annulus pressure.
7. Do not use this form if submitting under provisions of Rule 326.a(1)B. or C.
8. Written OGCC notification must be provided 10 days prior to the test via Form 42, Field Operations Notice
9. Packers or bridge plugs, etc., must be set within 100 feet of the perforated interval to be considered a valid test.

Complete the Attachment

Checklist

OP OGCC

OGCC Operator Number: 47120 Contact Name D.J. ANDERSON
Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP Phone: (970) 515-1263
Address: P O BOX 173779
City: DENVER State: CO Zip: 80217-3779 Email: DJ_ANDERSON@OXY.COM
API Number: 05-123-45496 OGCC Facility ID Number: 452262
Well/Facility Name: PAPA JO 2-25 Well/Facility Number: 36N-17HZ
Location QtrQtr: NESW Section: 8 Township: 1N Range: 68W Meridian: 6

[X] SHUT-IN PRODUCTION WELL [] INJECTION WELL Last MIT Date:

Test Type:

[X] Test to Maintain SI/TA status [] 5-Year UIC [] Reset Packer
[] Verification of Repairs [] Annual UIC TEST

[] Describe Repairs or Other Well Activities: THE WELL HAS NOT YET BEEN COMPLETED. THIS MIT IS FOR THE 2 YEAR ANNUAL MECHANICAL INTEGRITY TEST. 13,437 IS THE PBD.

Wellbore Data at Time of Test

Table with 3 columns: Injection Producing Zone(s), Perforated Interval, Open Hole Interval. Values: N/A

Tubing Casing/Annulus Test

Table with 4 columns: Tubing Size, Tubing Depth, Top Packer Depth, Multiple Packers? Value: []

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.

Bridge Plug or Cement Plug Depth

13437

Test Data (Use -1 for a vacuum)

Table with 5 columns: Test Date, Well Status During Test, Casing Pressure Before Test, Initial Tubing Pressure, Final Tubing Pressure. Values: 06-13-2020, SHUT-IN, 0, 359, 359, 359, 358, -1

Test Witnessed by State Representative? [] OGCC Field Representative

OPERATOR COMMENTS:

[Empty box for operator comments]

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

Signed: _____ Print Name: KRISTINA GENO

Title: REGULATORY ANALYST Email: kristina_geno@oxy.com Date: _____

Based on the information provided herein, this Notice (Form 21) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____

Date: _____

CONDITIONS OF APPROVAL, IF ANY:

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402428347	FORM 21 ORIGINAL
402428348	PRESSURE CHART
402428350	OTHER

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)