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FORM 21 Rev 9/14

State of Colorado Oil and Gas Conservation Commission



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FOR OGCC USE ONLY
Document Number:
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 a OGCC representative.
3. For production wells, test pressures must be a at minimum of 300 psig.
4. New injection wells must be tested to maximum requested injection pressure.
5. For injection wells, test pressurees 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. OGCC notification must be provided 10 days prior to the test via Form 42.
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

OGCC Operator Number: 100322
Name of Operator: NOBLE ENERGY INC
Address: 1001 NOBLE ENERGY WAY
City: HOUSTON State: TX Zip: 77070
API Number: 05-123-16704 OGCC Facility ID Number:
Well/Facility Name: Rothe State Well/Facility Number: B35-07
Location QtrQtr: SWNE Section: 36 Township: 5N Range: 64W Meridian:

Table with 3 columns: Oper, OGCC, and various test types (Pressure Chart, Cement Bond Log, Tracer Survey, Temperature Survey, Inspection Number).

[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:

Wellbore Data at Time of Test
Injection/Producing Zone(s): COD
Perforated Interval: 6646'-6658'
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.
Bridge Plug or Cement Plug Depth: 6595'

Tubing Casing/Annulus Test
Tubing Size: 1.9
Tubing Depth:
Top Packer Depth: N/A
Multiple Packers? [] Yes [X] No

Test Data
Test Date: 04/21/2020
Well Status During Test: TA
Casing Pressure Before Test: 0
Initial Tubing Pressure:
Final Tubing Pressure:
Casing Pressure Start Test: 304
Casing Pressure - 5 Min.: 289
Casing Pressure - 10 Min.: 280
Casing Pressure Final Test: 273
Pressure Loss or Gain During Test: -31
Test Witnessed by State Representative? [] Yes [X] No
OGCC Field Representative (Print Name):

Initial Surface Casing Psi 5 min 10 min 15 min
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: CARL SWIFT

Signed: Title: COMPLETIONS FOREMAN Date:

OGCC Approval: Title: Date:

Conditions of Approval, if any: