

**Inspection Photos**  
**Location Name: McCallum Unit 63**  
**Location ID: 324622**

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**State of Colorado**  
**Oil and Gas Conservation Commission**  
1120 Lincoln Street, Suite 801, Denver, Colorado 80202 (303) 866-7100 Fax: (303) 866-1100

**MECHANICAL INTEGRITY TEST**

**FOR OGC USE ONLY**

Document Number: \_\_\_\_\_  
 Date Rec'd: \_\_\_\_\_

Complete the Attachment Checklist

OCGC Operator Number: **4808**

Name of Operator: **KIP KAUFMAN COMPANY INC.** (General Name and Address)  
 Address: **1675 BROADWAY, STE 2800** No. **(303) 855-4802**  
 City: **DENVER** State: **CO** Zip: **80202** (For all wellheads @ P.F. - O.P.A.)

Well/Tract Name: **MC CALLUM UNIT** OGC Facility ID Number: **29708**  
 Operator Number: **4808** Well ID: **63** Well Type: **Oil** Well Status: **Producing**

SPLIT-IN PRODUCTION WELL  INJECTION WELL Last MIT Date: **2/28/20**

Test Type:  
 Test to Maintain S/I A status  1-1/4" UC  Head Packer  
 Verification of Resins  Annual UC Test

Discontinuation or Other Well Activities: \_\_\_\_\_

Wellbore Data at Time of Test

Wellbore/Production Interval	Production Interval	Case Hole Interval	casing Test
<b>PRREB</b>	<b>1594-1608</b>		Use an air performance log or other log tool to determine casing test results. If no log tool is available, use a pressure gauge to determine casing test results.

Tubing Casing/Annulus Test

Tubing Size	Tubing Depth	Case Depth	Variable Pressure
<b>2.375</b>	<b>1560'</b>	<b>1560'</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Test Data

Well ID	Wellbore/Production Interval	Wellbore/Production Interval	Wellbore/Production Interval
<b>7130120</b>	<b>52</b>	<b>0 ps</b>	<b>0 ps</b>
<b>800 ps</b>	<b>800 ps</b>	<b>800 ps</b>	<b>0 ps</b>

Test performed by State Representative?  Yes  No

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

Well Name: **Jacques Bailey** Title: **Production Supervisor** Date: **7-30-2020**  
 Operator: **John Bailey** Title: **Field Inspector** Date: **7/30/20**

OCGC Approval: **W. A. M. N.** Title: **Field Inspector**

07-30-2020 11:57

**Photo 1. Photo of Form 21 as filled out and signed in the field.**