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FORM
21
Rev 9/14

State of Colorado
Oil and Gas Conservation Commission



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

FOR OGCC USE ONLY

Document Number:
402363918

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. Injection wells tests must be 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. 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**

Oper OGCC

Pressure Chart	<input checked="" type="checkbox"/>	
Cement Bond Log		
Tracer Survey		
Temperature Survey		
Inspection Number		

OGCC Operator Number: **74165**
Name of Operator: **Renegade Oil and Gas Company, LLC**
Address: **6155 S Main Street, Suite 225**
City: **Aurora** State: **CO** Zip: **80016**
API Number: **0500107208** OGCC Facility ID Number: **201804**
Well/Facility Name: **Champlin 67 Amoco E** Well/Facility Number: **#1**
Location QtrQtr: **SESE** Section: **17** Township: **2S** Range: **63W** Meridian: **6th**

Contact Name and Telephone

Edward Ingve

No: **(303) 829-2354**

Email: **ed@renegadeoilandgas.com**

☒ **SHUT-IN PRODUCTION WELL**

☐ **INJECTION WELL**

Last MIT Date: **10/31/2014**

Test Type:

☒ Test to Maintain SI/TA status

☐ 5- year UIC

☐ Reset Packer

☐ Verification of Repairs

☐ Annual UIC Test

Describe Repairs or Other Well Activities: _____

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
7500

Wellbore Data at Time of Test

Injection/Producing Zone(s)

J Sand

Perforated Interval:

7606-7700

Open Hole Interval:

Tubing Casing/Annulus Test

Tubing Size:

Tubing Depth:

Top Packer Depth:

Multiple Packers?

☐ Yes ☐ No

Test Data

Test Date
03/17/2020

Well Status During Test
TA

Casing Pressure Before Test
0

Initial Tubing Pressure

Final Tubing Pressure

Casing Pressure Start Test
358

Casing Pressure - 5 Min.
355

Casing Pressure - 10 Min.
353

Casing Pressure Final Test
352

Pressure Loss or Gain During Test
-6

Test Witnessed by State Representative?

☐ Yes

☒ No

OGCC Field Representative (Print Name):

Justin Medina

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

Print Name: **Edward Ingve**

Signed: _____

Title: **Manager/Owner**

Date: **03/17/2020**

OGCC Approval: _____

Title: _____

Date: _____

Conditions of Approval, if any: _____