

FORM

21

Rev
11/20

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:

402548963

Date Received:

MECHANICAL INTEGRITY TEST

- Duration of the pressure test must be a minimum of 15 minutes.
- An original pressure chart must accompany this report if this test was not witnessed by an OGCC representative. Injection well tests must be witnessed by an OGCC representative.
- For production wells, test pressures must be at a minimum of 300 psig.
- New injection wells must be tested to maximum requested injection pressure.
- For injection wells, test pressures must be at least 300 psig or average injection pressure, whichever is greater.
- A minimum 300 psi differential pressure must be maintained between the tubing and tubing/casing annulus pressure.
- Do not use this form if submitting under provisions of Rule 326.a(1)B. or C.
- Written OGCC notification must be provided 10 days prior to the test via Form 42, Field Operations Notice
- 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: <u>10112</u>	Contact Name <u>Kelly Sharp</u>	Pressure Chart		
Name of Operator: <u>FOUNDATION ENERGY MANAGEMENT LLC</u>	Phone: <u>(970) 630-6880</u>	Cement Bond Log		
Address: <u>5057 KELLER SPRINGS RD STE 650</u>		Tracer Survey		
City: <u>ADDISON</u> State: <u>TX</u> Zip: <u>75001</u> Email: <u>ksharp@foundationenergy.com</u>		Temperature Survey		
API Number : 05- <u>125-10623</u>	OGCC Facility ID Number: <u>288748</u>	Inspection Number		
Well/Facility Name: <u>JT FARMS</u>	Well/Facility Number: <u>34-6</u>			
Location QtrQtr: <u>SWSE</u> Section: <u>6</u> Township: <u>1N</u> Range: <u>45W</u> Meridian: <u>6</u>				

SHUT-IN PRODUCTION WELL INJECTION WELL Last MIT Date: _____

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: _____

Wellbore Data at Time of Test				Casing Test
Injection Producing Zone(s)	Perforated Interval	Open Hole Interval		
NBRR	2470 - 2484			
Tubing Casing/Annulus 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 Size:	Tubing Depth:	Top Packer Depth:	Multiple Packers?	
2 3/8	2409.20	2409.20'	<input type="checkbox"/>	Bridge Plug or Cement Plug Depth <input type="text"/>

Test Data (Use -1 for a vacuum)

Test Date	Well Status During Test	Casing Pressure Before Test	Initial Tubing Pressure	Final Tubing Pressure
12-09-2020		0	0	0
Casing Pressure Start Test	Casing Pressure - 5 Min.	Casing Pressure - 10 Min.	Casing Pressure Final Test	Pressure Loss or Gain
350	350	350	350	0

Test Witnessed by State Representative? OGCC Field Representative Susan Surman

OPERATOR COMMENTS:

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

Signed: Kelly Sharp Print Name: Kelly Sharp
Title: Production Foreman Email: Ksharp@foundationenergy.com Date: 12-9-2020

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

COGCC Approved: /s/ Susan Surman Date: 12-9-2020

CONDITIONS OF APPROVAL, IF ANY:

Attachment Check List

Att Doc Num **Name**

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Total Attach: 0 Files

General Comments

User Group **Comment**

Comment Date

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

Total: 0 comment(s)