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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: \_\_\_\_\_

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. 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		
Cement Bond Log		
Tracer Survey		
Temperature Survey		
Inspection Number		

OGCC Operator Number: 51065  
Name of Operator: LOEB LLC HERMAN L Contact Name and Telephone: Shane Pelton  
Address: P O BOX 838 No: (620) 617-5870  
City: LAWRENCEVILLE State: IL Zip: 62439 Email: shane@loeboil.com  
API Number: 06-017-06960 OGCC Facility ID Number: 208025  
Well/Facility Name: TEAGUE 34-13 Well/Facility Number: 2  
Location QtrQtr: SWSE Section: 13 Township: 16S Range: 42W Meridian: 6

☒ SHUT-IN PRODUCTION WELL ☐ INJECTION WELL

Last MIT Date: 01/13/2016

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 Use when perforations or open hole is isolated by bridge plug or cement plug; use if cased-hole only with plug back total depth.	
Injection/Producing Zone(s) <b>MRRW</b>	Perforated Interval: <b>5158'-5182'</b>	Open Hole Interval:	Bridge Plug or Cement Plug Depth	
Tubing Casing/Annulus Test				
Tubing Size: <b>2-7/8</b>	Tubing Depth: <b>NA</b>	Top Packer Depth: <b>5110'</b>	Multiple Packers? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Test Data				
Test Date <b>04/09/2021</b>	Well Status During Test <b>TA</b>	Casing Pressure Before Test <b>0 PSI</b>	Initial Tubing Pressure <b>NA</b>	Final Tubing Pressure <b>NA</b>
Casing Pressure Start Test <b>380 PSI</b>	Casing Pressure - 5 Min. <b>380 PSI</b>	Casing Pressure - 10 Min. <b>380 PSI</b>	Casing Pressure Final Test <b>380 PSI</b>	Pressure Loss or Gain During Test <b>0 PSI</b>
Test Witnessed by State Representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			OGCC Field Representative (Print Name): <b>BRIAN WELSH</b>	

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

Print Name: **SHANE PELTON**

Signed: [Signature] Title: Area Production Supervisor Date: 04/09/2021

OGCC Approval: [Signature] Title: FIELD INSPECTOR Date: 04/09/2021

Conditions of Approval, if any:

Form 42 # 4081422516  
Insp Doc # 701032750