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State of Colorado **Conservation Commission**  
DEPARTMENT OF NATURAL RESOURCES

FOR OGCC USE ONLY

**MECHANICAL INTEGRITY TEST**

Fill out Part II of this form if well tested is a permitted or pending injection well.

1. Duration of the pressure test must be a minimum of 15 minutes.
2. A pressure chart must accompany this report if this test was not witnessed by a OGCC representative.
3. For production wells, test pressures must be at a minimum of 300 psig.
4. For injection wells, test pressures must be at 300 psig or minimum injection pressure whichever is greater.
5. A minimum 300 psi differential pressure must be maintained between the tubing and tubing/casing annulus pressure.
6. Do not use this form if submitting under provisions of Rule 326.a. (1) B. or C.
7. OGCC notification must be provided prior to the test.
8. Packers or bridge plugs, etc., must be set within 250 feet of the perforated interval to be considered a valid test.

OGCC Operator Number: 59100 Contact Name & Phone  
Name of Operator: Rex Monahan James Rowland  
Address: P.O. Box 1231 No: (970) 522-0774  
City: Sterling State: CO Zip: 80751 Fax: (970) 522-8744  
API Number: 05- 075072950 Field Name: Pebble Field No: 68200  
Well Name: Elenz Number: 1  
Location (Qtr, Sec, Twp, Rng, Meridian): SE SE Sec. 21-T12N-R52W

RECEIVED  
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OGCC

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Checklist

	Oper	OGCC
Pressure Chart		
Cement Bond Log		
Tracer Survey		
Temperature Survey		

☒ SHUT-IN PRODUCTION WELL ☐ INJECTION WELL FACILITY NO: \_\_\_\_\_

**Part I Pressure Test**

☐ 5-Year Test ☒ Test to Maintain SI/TA Status ☐ Reset Packer  
☐ Verification of Repairs (describe repairs): \_\_\_\_\_

NA - Not Applicable	Wellbore Data at Time Test	
Injection/Producing Zone(s) D Sandstone	Perforated Interval <input type="checkbox"/> NA 5064'-5070' KB	Open Hole Interval <input type="checkbox"/> NA

Casing Test <input type="checkbox"/> NA
Use when perforations or open hole is isolated by bridge plug or cement plug
Bridge Plug or Cement Plug Depth

Tubing Casing/Annulus Test <input type="checkbox"/> NA			
Tubing Size 2-7/8" O.D.	Tubing Depth 5031' KB	Top Packer Depth 5031' KB	Multiple Packers <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

Test Data (Test Medium is Gas)					
Test Date 3/6/1998	Well Status During Test Shut In	Date of Last Approved MIT	Casing Pressure Before Test 0 psig	Initial Tubing Pressure 860 psig	Final Tubing Pressure 860 psig
Starting Casing Test Pressure 320 psig	Casing Pressure - 5 Min. 320 psig	Casing Pressure - 10 Min. 320 psig	Final Casing Test Pressure 320 psig	Pressure Loss or Gain During Test 0 psi	

Test Witnessed by State Representative <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES	OGCC Field Representative: <u>BB</u>
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**Part II Wellbore Channel Test**

Complete only if well is or will be an injection well.

Indicate method used for cement integrity test, attach appropriate records, charts, or logs unless previously submitted.

☐ Tracer Survey Run Date \_\_\_\_\_ ☐ CBL or Equiv. Run Date \_\_\_\_\_ ☐ Temperature Survey Run Date \_\_\_\_\_

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

Print Name: James RowlandSigned: James W. Rowland Title: Engineer Date: March 6, 1998OGCC Approval: EB Bailey Title: Inspector Date: 3-6-98

Conditions of Approval, if any:

-PM-