

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:

402887721

Date Received:

12/06/2021

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.
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. Written OGCC notification must be provided 10 days prior to the test via Form 42, Field Operations Notice
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

OP OGCC

OGCC Operator Number: 10112 Contact Name Wes Wickersham
Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC Phone: (307) 389-0073
Address: 5057 KELLER SPRINGS RD STE 650
City: ADDISON State: TX Zip: 75001 Email: wwickersham@foundationenergy.
API Number: 05-125-07972 OGCC Facility ID Number: 254094
Well/Facility Name: ALLEN Well/Facility Number: 23-24
Location QtrQtr: NESW Section: 24 Township: 4S Range: 44W Meridian: 6

SHUT-IN PRODUCTION WELL INJECTION WELL Last MIT Date:
Test Type:
[X] 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 Injection Producing Zone(s) Perforated Interval Open Hole Interval
NBRR 1642-1677
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 1590

Table with 5 columns: Test Date, Well Status During Test, Casing Pressure Before Test, Initial Tubing Pressure, Final Tubing Pressure. Row 1: 12-02-2021, SHUT-IN, 0, [], [].

Test Witnessed by State Representative? [X] OGCC Field Representative Welsh, Brian

OPERATOR COMMENTS:

[Empty box for operator comments]

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

Signed: [Signature] Print Name: Afton Iiams
Title: HSE/Regulatory Technician Email: regulatory@foundationenergy.com Date: 12/6/2021

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

COGCC Approved: Wolfe, Stephen Date: 3/3/2022

CONDITIONS OF APPROVAL, IF ANY:

[Empty box for conditions of approval]

Attachment List

Att Doc Num

Name

402887721	FORM 21 SUBMITTED
402887753	MECHANICAL INTEGRITY TEST

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)