

Click here to reset the form

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 a OGCC representative.
3. For production wells, test pressures must be a at 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

Table with columns for Oper and OGCC, and rows for Pressure Chart, Cement Bond Log, Tracer Survey, Temperature Survey, and Inspection Number.

OGCC Operator Number: 17180
Name of Operator: Citation Oil & Gas Corp
Address: 14077 Cutten RD
City: Houston State: TX Zip: 77069
API Number: 05-017-7397 OGCC Facility ID Number:
Well/Facility Name: Christopher 32-1 6 Well/Facility Number: 208462
Location QtrQtr: SWNE Section: 1 Township: 12S Range: 51W Meridian: 06

SHUT-IN PRODUCTION WELL
Test Type:
Test to Maintain SI/TA status
Verification of Repairs
Describe Repairs or Other Well Activities: Shut in well returning to production

Acidized & Swabbed

Wellbore Data at Time of Test
Injection/Producing Zone(s): MRRW
Perforated Interval: 6631-38
Open Hole Interval:
Casing Test: NA

Tubing Casing/Annulus Test
Tubing Size: 2.875
Tubing Depth: 6603'
Top Packer Depth: 6611'
Multiple Packers? No

Test Data
Test Date: 7-5-22
Well Status During Test: SI
Casing Pressure Before Test: 0 psig
Initial Tubing Pressure: 0 PSI
Final Tubing Pressure: 0 PSI
Casing Pressure Start Test: 380 PSI
Casing Pressure - 5 Min: 380 PSI
Casing Pressure - 10 Min: 380 PSI
Casing Pressure Final Test: 380 PSI
Pressure Loss or Gain During Test: 0 PSI

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

Print Name: Bob Rogers
Signed: Bob Rogers Title: Sr. Production Foreman Date: 7-5-22
OGCC Approval: Brian Welsh Title: Field Inspector Date: 7/5/22

Form 42 # 403094716
Insp Doc # 701005348