

Click here to reset the form

FOR OGCC USE ONLY

Document Number:

Date Received:

Complete the Attachment Checklist

	Oper	OGCC
Pressure Chart		
Cement Bond Log		
Tracer Survey		
Temperature Survey		
Inspection Number		

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

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 a OGCC representative. Injection wells tests must be witnessed by an OGCC representative.
- For production wells, test pressures must be a at 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.
- OGCC notification must be provided 10 days prior to the test via Form 42.
- Packers or bridge plugs, etc., must be set within 100 feet of the perforated interval to be considered a valid test.

OGCC Operator Number: 10657 Contact Name and Telephone: _____

Name of Operator: PCR Operating No: _____

Address: 5 City: _____ State: _____ Zip: _____ Email: _____

API Number: 087-05487 OGCC Facility ID Number: _____

Well/Facility Name: State of Colo B-2 Well/Facility Number: _____

Location QtrQtr: _____ Section: _____ Township: _____ Range: _____ Meridian: _____

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:	Use when perforations or open hole is isolated by bridge plug or cement plug; use if cased-hole only with plug back total depth.
<u>J</u>	<u>5636-5642</u>		Bridge Plug or Cement Plug Depth
			<u>5570</u>

Tubing Casing/Annulus Test			
Tubing Size:	Tubing Depth:	Top Packer Depth:	Multiple Packers? <input type="checkbox"/> Yes <input type="checkbox"/> No

Test Data				
Test Date	Well Status During Test	Casing Pressure Before Test	Initial Tubing Pressure	Final Tubing Pressure
<u>10-24-22</u>	<u>SI</u>	<u>0</u>		
Casing Pressure Start Test	Casing Pressure - 5 Min.	Casing Pressure - 10 Min.	Casing Pressure Final Test	Pressure Loss or Gain During Test
<u>350</u>	<u>350</u>	<u>350</u>	<u>350</u>	<u>-0</u>
Test Witnessed by State Representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		OGCC Field Representative (Print Name): <u>Schure</u>		

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

Print Name: Gene Wehr

Signed: [Signature] Title: Pumper Date: _____

OGCC Approval: [Signature] Title: OGCC Date: 10-24-22

Conditions of Approval, if any: