

Inspection Photos
Location Name: MSSU 17-1
API #069-06312



Wellhead sign

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, injector well tests must be witnessed by an OGCC representative.
 3. For production wells, test pressures must be at least 300 psi or average injection pressure, whichever is greater.
 4. For injection wells, test pressures must be at least 300 psi or average 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 328 x (1) B, or C.
 7. OGCC wellhead tests must be performed 30 days prior to the test via Form 10.
 8. Packers or bridge plugs, etc., must be set within 100 feet of the perforating interval to be considered a valid test.

OGCC Operator Number: 10312 Contact Name and Telephone: Cameron Gracey
 Name of Operator: Prospect Energy, LLC No: 970-567-6871
 Address: 1229 E. Douglas St City: Fort Collins State: CO Zip: 80524 Email: gracey@prospectenergy.com
 API Number: 05-069-06312 OGCC Facility ID Number: MSSU Well/Facility Number: 17-1 Inspection Number: 1700784
 Location On: SWSE Section: 17 Township: 8N Range: 68W N. 1/4: 6 Last MIT Date: 3/24/2018

☐ SHUT-IN PRODUCTION WELL ☒ INJECTION WELL ☐ Reset Pack

Test Type:
☒ Test to Maintain SUTA status ☐ 5-year UIC
☐ Verification of Repairs ☐ Annual UIC Test

Describe Repairs or Other Well Activities:

Wellbore Data at Time of Test
 (Injecting/Producing Interval): Muddy Perforated Interval: 5042-5077 Open Hole Interval: 3505'-CIRB to 5000'
 Tubing Casing Annulus Test
 Tubing Size: 400 Tubing Depth: 400 Top Casing Depth: 400 Multiple Packers? ☒ Yes ☐ No
 Test Data
 Casing Pressure Before Test: SI Casing Pressure After Test: 400 Pressure Loss or Gain During Test: 0
 Casing Pressure 15 Min: 400 OGCC Field Reps (Name): Tam Peterson

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.
 Print Name: Cameron Gracey Title: Operator
 Signature: [Signature] Date: 3/23/2023
 OGCC Approval: [Signature] Title: OGCC Representative
 Conditions of Approval, if any:

Colorado Oil & Gas Conservation Commission
 40.65413, -105.03396, 1554.3m, 1°
 03/23/2023 14:08:14

Form 21

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Initial casing pressure

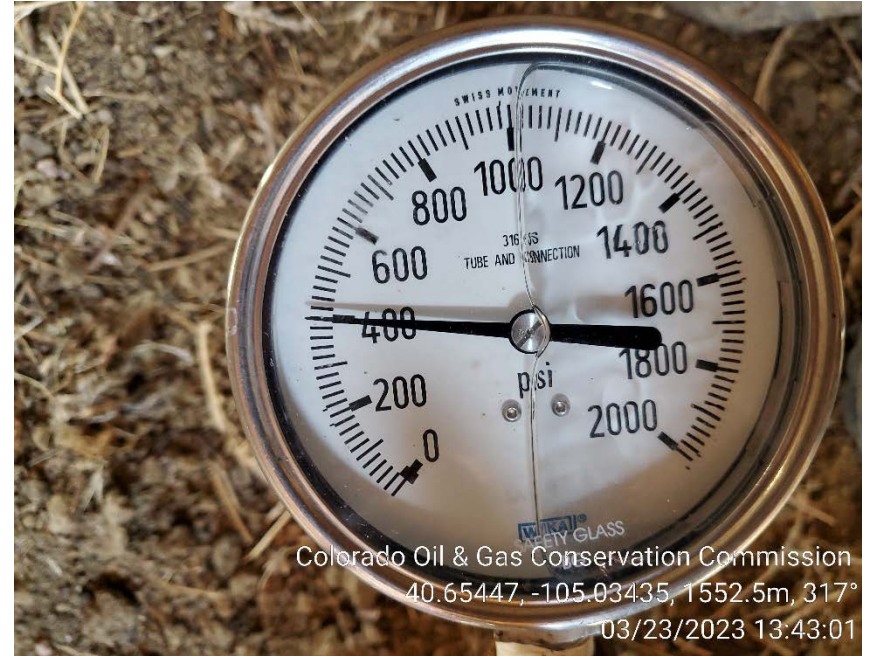


Initial Bradenhead pressure

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Starting test casing pressure



15 minute casing pressure

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10 minute casing pressure



15 minute casing pressure