



STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES



MECHANICAL INTEGRITY REPORT



Facility Number 288	API Number 075-05291	Well Name and Number State A-2
Field Atwood	Location (1/4 1/4, Sec., Twp., Rng.) NENE 29-7N-53W	
Operator Walsh Walsh Production, Inc.		
Operator Address P.O. Box 30 City Sterling State CO Zip Code 80751		
Operator's Representative at Test Randy Barton		Area Code Phone Number (970) 522-1839

- If both Part I and Part II are not completed, the mechanical integrity test cannot be approved and will be returned to the operator.
- Prior to performing any required pressure test, notice must be given to the Commission.
- A pressure chart must accompany this report, if the pressure test was not witnessed by a state representative.
- Facility numbers and API numbers are available at the Commission upon request.

PART I (Choose one of the following options)

1. Pressure test- (Pressure tests should be a minimum of 15 minutes, at 300 psi or minimum injection pressure whichever is greater. A minimum 300 psi differential pressure must be maintained between tubing and tubing/casing annulus pressures.)

A. Well Data at Time of Test

Tubing Size None	Tubing Depth N/A	Top Packer Depth N/A	Multiple Packers <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Bridge Plug Depth 4600	Injection Zone(s), name J Sand		Injection Interval (gross) 4688-4701'
Injected Thru <input type="checkbox"/> Perforations <input checked="" type="checkbox"/> Open Hole	Test Witnessed by State Rep. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

B. Casing Test Data

Test Date 5-29-96	Well Status During Pressure Test <input type="checkbox"/> Injecting <input checked="" type="checkbox"/> Shut-in <input type="checkbox"/> Open	Date of Last Approved MIT 3/29/90	
Starting Casing Press. 420	Final Casing Press. 400	Pressure Loss or Gain During Test -20	
Initial Tubing Press. 0	Tubing Press.-5 min NA	Tubing Press.-10 min	Tubing Press.-15 min

2. Monitoring Tubing - Casing Annulus Pressure Procedure must be approved prior to initiation and only after satisfactorily passing an initial pressure test.

Date of Pressure Test	Test Pressure	Date Pressure Test Approved	Monitoring to start (Month, Year)
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3. Alternate Test Approved by Director (See Rule 327) Attach procedures and logs with report. Procedures subject to review by EPA.

PART II (Choose one of the following options) Attach records, charts, logs where appropriate.

1. Cementing Records - (valid only for injection wells in existence prior to July 1, 1986)

	Casing Size	Hole Size	Depth Set	No. Sacks Cement	Calculated Cement Tops
Surface Casing	10 3/4"	17"	140'	150	Surface
Production Casing	5 1/2"	8 3/4"	4688'	150	3940'
Stage Tool					

2. Tracer Survey Test Date

3. CBL or equiv. Test Date

4. Temperature Survey Test Date

5. Alternate Test Approved by Director (See Rule 327) Attach procedures and logs with report. Procedures subject to review by EPA.

I hereby certify that the statements herein made are true and correct.

Signed *Randy Barton* Title Operator Date 5/29/96

For State Use:

Approved by *DK Deacon* Title SR. PETROLEUM ENGINEER Date JUL 29 1996
Conditions of approval, if any: O & G Cons. Comm.