



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

MECHANICAL INTEGRITY TEST

Fill out Part II of this form if well tested is a permitted or pending injection well. Send original plus one copy.

1. Duration of the pressure test must be a minimum of 15 minutes.
2. A pressure chart must accompany this report if this test was not witnessed by a OGCC representative.
3. For production wells, test pressures must be at a minimum of 300 psig.
4. For injection wells, test pressures must be at 300 psig or minimum 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.a. (1) B. or C.
7. OGCC notification must be provided prior to the test.
8. Packers or bridge plugs, etc., must be set within 250 feet of the perforated interval to be considered a valid test.

RECEIVED

JUN 09 2010

COGCC/Rifle Office

Complete the  
Attachment Checklist

Oper OGCC

Pressure Chart		
Cement Bond Log		
Tracer Survey		
Temperature Survey		

OGCC Operator Number: 10310		Contact Name and Telephone	
Name of Operator: FRAM OPERATING LLC		HAROLD MAYLAND	
Address: 30 E. PIKE PEAK AVE. STE 283		No: 303-550-1098	
City: COLORADO SPRINGS	State: CO	Zip: 80903	Fax:
API Number: 05-077-08738		Field Name: WHITEWATER	Field Number: 92840
Well Name: FEDERAL 12-1A		Number:	
Location (QtrQtr, Sec, Twp, Rng, Meridian): SWNW 12 12S 98W 6 PM			

☒ SHUT-IN PRODUCTION WELL ☐ INJECTION WELL Facility No.: \_\_\_\_\_

Part I Pressure Test

- ☐ 5-Year UIC Test ☒ Test to Maintain SI/TA Status ☐ Reset Packer  
☐ Verification of Repairs ☐ Tubing/Packer Leak ☐ Casing Leak ☐ Other (Describe): \_\_\_\_\_

Describe Repairs: \_\_\_\_\_

NA - Not Applicable	Wellbore Data at Time Test		Casing Test <input type="checkbox"/> NA
Injection/Producing Zone(s)	Perforated Interval: <input checked="" type="checkbox"/> NA	Open Hole Interval: <input type="checkbox"/> NA	Use when perforations or open hole is isolated by bridge plug or cement plug
DAKOTA		3285-3422	Bridge Plug or Cement Plug Depth
			3250

Tubing Casing/Annulus Test <input type="checkbox"/> NA			
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	Date of Last Approved MIT	Casing Pressure Before Test	Initial Tubing Pressure	Final Tubing Pressure
06/08/2010	SI		0		
Starting Casing Test Pressure	Casing Pressure - 5 Min.	Casing Pressure - 10 Min.	Final Casing Test Pressure	Pressure Loss or Gain During Test	
1100	1100	1100	1100	0	

Test Witnessed by State Representative?	OGCC Field Representative:
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	CHUCK BROWNING

Part II Wellbore Channel Test

Complete only if well is or will be an injection well.

Indicate method used for cement integrity test, attach appropriate records, charts, or logs unless previously submitted.

<input type="checkbox"/> Tracer Survey	<input type="checkbox"/> CBL or Equivalent	<input type="checkbox"/> Temperature Survey
Run Date: _____	Run Date: _____	Run Date: _____

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

Print Name: LAWRENCE HARTNETT

Signed: Lawrence Hartnett Title: CONSULTANT Date: 06/08/2010

OGCC Approval: Chuck Browning Title: NW Insp Date: 06/08/2010

Conditions of Approval, if any: