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FORM  
21

Rev 8/00

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.

OGCC Operator Number: 16700

Name of Operator: Chevron USA Inc

Address: 100 Chevron Road

City: Rangely State: CO Zip: 81648

Contact Name and Telephone

Diane L Peterson

No: 970-675-3842

Fax: 970-675-3800

API Number: 05-103-06219

Field Name: Rangely Weber Sand Unit Field Number: 72370

Well Name: UNION PACIFIC

Number: 19-28

Location (QtrQtr, Sec, Twp, Rng, Meridian): SWNW Section 28, T2N, R102W, 6TH P.M.

☐ SHUT-IN PRODUCTION WELL ☒ INJECTION WELL Facility No.: 150200

## Part I Pressure Test

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

Describe Repairs: CONVERTED PRODUCING WELL TO INJECTION WELL

Complete the  
Attachment Checklist

Pressure Chart	✓	Over	OGCC
Cement Bond Log			
Tracer Survey			
Temperature Survey			

NA - Not Applicable		Wellbore Data at Time Test		Casing Test <input type="checkbox"/> NA Use when perforations or open hole is isolated by bridge plug or cement plug Bridge Plug or Cement Plug Depth	
Injection/Producing Zone(s)	Perforated Interval: <input type="checkbox"/> NA <input checked="" type="checkbox"/> NA	Open Hole Interval: <input checked="" type="checkbox"/> NA			
Weber Formation		5697-6329'			
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		
2 7/8"	5687.9'	5429.8'			
Test Data					
Test Date	Well Status During Test	Date of Last Approved MIT	Casing Pressure Before Test	Initial Tubing Pressure	Final Tubing Pressure
6-10-10	ACTIVE	N/A			
Starting Casing Test Pressure	Casing Pressure - 5 Min.	Casing Pressure - 10 Min.	Final Casing Test Pressure	Pressure Loss or Gain During Test	
800			800	-0	
Test Witnessed by State Representative? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO OGCC Field Representative: CHUCK BROWING					
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: _____					
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.					
Print Name: Diane L Peterson					
Signed: <u>Diane L Peterson</u> Title: <u>Regulatory Specialist</u> Date: <u>6-10-10</u>					
OGCC Approval: <u>Chuck Browning</u> Title: <u>OGCC Insp</u> Date: <u>8/10/10</u>					
Conditions of Approval, if any:					