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FORM
21
Rev. 9/00State 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		Contact Name and Telephone	
Name of Operator: Chevron USA Inc		Diane L Peterson	
Address: 100 Chevron Road		No: 970-675-3842	
City: Rangely State: CO Zip: 81648		Fax: 970-675-3800	
API Number: 05-103-05874		Field Name: WILSON CREEK UNIT Field Number: 93352	
Well Name: WILSON CREEK UNIT		Number: 20	
Location (Ctr, Sec, Twp, Rng, Meridian): SWNE 34 3N 94W 6 PM			

☒ SHUT-IN PRODUCTION WELL

INJECTION WELL

Facility No.: 150143

Part I Pressure Test

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

Describe Repairs:

Complete the
Attachment Checklist

Pressure Chart	✓	OGCC
Cement Bond Log		
Tracer Survey		
Temperature Survey		

well only

NA - Not Applicable		Wellbore Data at Time Test	
Injection/Producing Zone(s)		Perforated Interval: <input type="checkbox"/> NA <input checked="" type="checkbox"/> NA	Open Hole Interval: <input checked="" type="checkbox"/> NA
SUNDANCE Formation			
Tubing Casing/Annulus Test			
Tubing Size: 2.7/8"	Tubing Depth: 6579.7'	Top Packer Depth: 6540'	Multiple Packers? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Test Data			
Test Date 8-26-10	Well Status During Test SHUT IN	Date of Last Approved MIT N/A	Casing Pressure Before Test Initial Tubing Pressure Final Tubing Pressure
Starting Casing Test Pressure 490	Casing Pressure - 5 Min.	Casing Pressure - 10 Min. 470	Final Casing Test Pressure Pressure Loss or Gain During Test -2.0
Test Witnessed by State Representative? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO OGCC Field Representative: Charles Brown			

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.

- ☐ Tracer Survey ☐ CBL or Equivalent ☐ 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: FRANK E. TOLLEY

Signed: F. E. Tolley

Title: Prod Spec

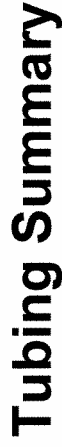
Date: 8-26-10

OGCC Approval:

Title: NUT Insp

Date: 8-26-10

Conditions of Approval, if any:

Prod Tree Loc. - Original Hole, 5/15/2009 12:00:00 PM[illegible][illegible]

Jts	Item Description	OD (in)	Len (ft)	Btm (ftKB)