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FD-008

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Rev. 04/00

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109



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 data 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 formation 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 true flow or submergible 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: 100163

Name of Operator: Encana Oil & Gas (USA) Inc.

Address: 370 17th Street, Suite 1700

City: Denver State: CO Zip: 80202

API Number: 05-045-13404 Field Name: Grand Valley

Well Name: N Parachute

Field Number: 11280

Location (Strat. Sec, Twp Rng, Meridian): SWSW Sec. 14 T5S R96W

☐ SHUT-IN PRODUCTION WELL ☒ INJECTION WELL

Facility No.:

Part I Pressure Test

- ☐ 5-Year UIC Test ☐ Test to Maintain SITA Status ☐ Reset Packer
- ☐ Verification of Repairs ☐ Tubing/Packer Leak ☐ Casing Leak ☒ Other (specify) Convert to injection

Describe Repairs:

Complete this Attachment Checklist

Inspected	Date
Pressure Test	✓
Leak Test	
Temperature Survey	

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	

NA - Not Applicable	Wellbore Data at Time Test
Injection/Producing Zone(s)	Perforated Interval: <input type="checkbox"/> NA Open Hole Interval: <input checked="" type="checkbox"/> NA
Williams Fork	5954-8089

Tubing Casing/Annulus Test

Tubing Size:	Tubing Depth:	Top Packer Depth:	Multiple Packers?
3 1/2	5926	5912	<input type="checkbox"/> YES <input checked="" 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
09/10/2010	SI	NA	440	1460	1460
Starting Casing Test Pressure	Casing Pressure - 5 Min.	Casing Pressure - 10 Min.	Final Casing Test Pressure	Pressure Loss or Gain During Test	
2496			2491	-5	

Test Witnessed by State Representative?

☒ YES ☐ NO

OGCC Field Representative:

Shantell Chude 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.

☐ Tracer Survey Run Date:☐ CBL or Equivalent Run Date:☐ Temperature Survey 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: Mitchell Jay Steink

Signed

M. J. Steink

Title: Manager / DOE Coordinator

Date: 9/10/2010

OGCC Approval:

Title: NW Insp

Date: 9/10/10

Conditions of Approval: If any:

