



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

RECEIVED

DEC 31 2012

COGCC**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.

Complete the Attachment Checklist

	Oper	OGCC
Pressure Chart		
Cement Band Log		
Tracer Survey		
Temperature Survey		

OGCC Operator Number: 10160		Contact Name and Telephone	
Name of Operator: Energy Investment Partners, LLC		Bob Flournoy	
Address: PO Box 225878		No: (214) 978-2500	
City: Dallas	State: TX	Zip: 75222	Fax:
API Number: 05-075-09347		Field Name: Beall Creek	Field Number: 5890
Well Name: Giacomini		Number: 1	
Location (QtrQtr, Sec, Twp, Rng, Meridian): SE/4 SE/4 Section 23-T10N-R53W			

☒ **SHUT-IN PRODUCTION WELL**
☐ **INJECTION WELL**
Facility No.: 312326
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: Waiting for spring thaw. Surface location pits recently renovated and waiting of ground to firm up before moving equipment and vehicles. Trying to prevent erosion. Test to be completed in a couple of months.

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	Open Hole Interval: <input type="checkbox"/> NA	

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	
Starting Casing Test Pressure	Casing Pressure - 5 Min.	Casing Pressure - 10 Min.	Final Casing Test Pressure	Pressure Loss or Gain During Test		

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

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: Bob Flournoy

Signed: _____ Title: President Date: 12/31/2012

OGCC Approval: _____ Title: _____ Date: _____

Conditions of Approval, if any: