



FORM 21 Rev 8/99

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 326.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 Bond Log		
Tracer Survey		
Temperature Survey		

OGCC Operator Number: 16700	Contact Name and Telephone Diane L Peterson
Name of Operator: Chevron USA Inc	No: 970-675-3842
Address: 100 Chevron Road	Fax: 970-675-3800
City: Rangely State: CO Zip: 81648	
API Number: 05-103-08773 Field Name: Rangely Weber Sand Unit Field Number: 72370	
Well Name: EMERALD Number: 87X	
Location (QtrQtr, Sec, Twp, Rng, Meridian): SESW Section 25, T2N, R103W, 6TH P.M.	

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

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 Use when perforations or open hole is isolated by bridge plug or cement plug Bridge Plug or Cement Plug Depth
Injection/Producing Zone(s) Weber Formation	Perforated Interval: <input type="checkbox"/> NA 5838-6502'	Open Hole Interval: <input checked="" type="checkbox"/> NA	

Tubing Casing/Annulus Test <input type="checkbox"/> NA			
Tubing Size: 2 7/8"	Tubing Depth: 5825	Top Packer Depth: 5787'	Multiple Packers? <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
1/28/2014	SHUT IN	2/13/2009			
Starting Casing Test Pressure 350 350	Casing Pressure - 5 Min. 350	Casing Pressure - 10 Min. 350	Final Casing Test Pressure 350	Pressure Loss or Gain During Test -0	

Test Witnessed by State Representative? <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO	OGCC Field Representative: <i>David Livingston</i>
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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 Run Date: _____	<input type="checkbox"/> CBL or Equivalent Run Date: _____	<input type="checkbox"/> Temperature Survey Run Date: _____
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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: *Diane L Peterson* Title: Regulatory Specialist Date: 1/28/14

OGCC Approval: *David Livingston* Title: Field Inspector Date: 1-28-14

Conditions of Approval, if any: