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FORM 21 Rev 9/14

State of Colorado Oil and Gas Conservation Commission



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FOR OGCC USE ONLY

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Date Received:

MECHANICAL INTEGRITY TEST

Complete the Attachment Checklist

Attachment Checklist table with columns for Oper and OGCC, and rows for Pressure Chart, Cement Bond Log, Tracer Survey, Temperature Survey, and Inspection Number.

- 1. Duration of the pressure test must be a minimum of 15 minutes.
2. An original pressure chart must accompany this report if this test was not witnessed by a OGCC representative.
3. For production wells, test pressures must be a minimum of 300 psig.
4. New injection wells must be tested to maximum requested injection pressure.
5. For injection wells, test pressures must be at least 300 psig or average injection pressure, whichever is greater.
6. A minimum 300 psi differential pressure must be maintained between the tubing and tubing/casing annulus pressure.
7. Do not use this form if submitting under provisions of Rule 326.a.(1) B. or C.
8. OGCC notification must be provided 10 days prior to the test via Form 42.
9. Packers or bridge plugs, etc., must be set within 100 feet of the perforated interval to be considered a valid test.

OGCC Operator Number: 10110
Name of Operator: Great Western Operating
Address: 1801 Broadway #500
City: Denver State: CO Zip: 80202
API Number: 05-001-06991
Well/Facility Name: Champlin 67 Amoco
Location QtrQtr: NWNW Section: 15 Township: 2S Range: 63W Meridian: 6 PM

SHUT-IN PRODUCTION WELL [checked] INJECTION WELL [] Last MIT Date:

Test Type:
[checked] Test to Maintain SI/TA status [] 5- year UIC [] Reset Packer
[] Verification of Repairs [] Annual UIC Test

Describe Repairs or Other Well Activities:

Wellbore Data at Time of Test
Injection/Producing Zone(s): J Sand
Perforated Interval: 7501-7544
Open Hole Interval: NA
Casing Test: Bridge Plug or Cement Plug Depth: 7412'

Tubing Casing/Annulus Test
Tubing Size: 2.375"
Tubing Depth: 7412
Top Packer Depth: NA
Multiple Packers? [] Yes [x] No

Test Data
Test Date: 7/18/16
Well Status During Test: SI
Casing Pressure Before Test: 0
Initial Tubing Pressure: 0
Final Tubing Pressure: N/A
Casing Pressure Start Test: 420
Casing Pressure - 5 Min.: 420
Casing Pressure - 10 Min.: 420
Casing Pressure Final Test: 410
Pressure Loss or Gain During Test: -10 PSI

Test Witnessed by State Representative? [] Yes [] No
OGCC Field Representative (Print Name): [Signature]

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: [Signature] Title: CONSULTANT Date: 7/18/16

OGCC Approval: Title: Date:

Conditions of Approval, if any: