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FORM 21 Rev 9/14

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

Document Number: _____

Date Received: _____

MECHANICAL INTEGRITY TEST

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

Complete the Attachment Checklist

OGCC Operator Number: 10112	Contact Name and Telephone: Alyssa Beard
Name of Operator: Foundation Energy Management	No: (303) 244-8114
Address: 1801 Broadway Suite 1500	Email: abeard@foundationenergy.com
City: Denver State: Co Zip: 80202	
API Number: 103-10436 OGCC Facility ID Number: 272008	
Well/Facility Name: CSE 15C-23-4-104 Well/Facility Number: 15C-23	
Location Qtr: NWN Section: 23 Township: 4S Range: 104W Meridian: 6	

	Oper	OGCC
Pressure Chart	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Cement Bond Log	<input type="checkbox"/>	<input type="checkbox"/>
Tracer Survey	<input type="checkbox"/>	<input type="checkbox"/>
Temperature Survey	<input type="checkbox"/>	<input type="checkbox"/>
Inspection Number		

SHUT-IN PRODUCTION WELL INJECTION WELL

Last MIT Date: _____

Test Type:

- 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): Mesaverde Coal	Perforated Interval: 1604'-1722'	Open Hole Interval:

Casing Test
Use when perforations or open hole is isolated by bridge plug or cement plug; use if cased-hole only with plug back total depth.
Bridge Plug or Cement Plug Depth: CIBP@ 1550'

Tubing Casing/Annulus Test			
Tubing Size: NA	Tubing Depth: NA	Top Packer Depth: NA	Multiple Packers? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Test Data				
Test Date: 9/28/18	Well Status During Test: SI	Casing Pressure Before Test: 0	Initial Tubing Pressure: NA	Final Tubing Pressure: NA
Casing Pressure Start Test: 510	Casing Pressure - 5 Min.: 506	Casing Pressure - 10 Min.: 504	Casing Pressure Final Test: 503	Pressure Loss or Gain During Test: -7

Test Witnessed by State Representative? Yes No

OGCC Field Representative (Print Name): _____

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

Print Name: Daniel Lapp

Signed: *Daniel Lapp* Title: Ops Foreman Date: 9/28/18

OGCC Approval: _____ Title: _____ Date: _____

Conditions of Approval, if any: