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FORM 21 Rev 3/13

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

OGCC Operator Number: 46290
Name of Operator: K.P. Kauffman Co INC
Address: 1675 Broadway, Suite 2800
City: Denver State: CO Zip: 80202
Contact Name and Telephone: Susana Lara-Mesa
No: (303) 825-4822
Email: slaramesa@kpk.com
API Number: # 05-123-09014 Field Name: SPINDLE Field Number: # 77900
Well Name: 1415 CORP Number: UNIT F-1
Location (QtrQtr, Sec, Twp, Rng, Meridian): NWWSE 30 11N 55W 6

Complete the Attachment Checklist

Table with columns: Oper, OGCC. Rows: Pressure Chart, Cement Bond Log, Tracer Survey, Temperature Survey, Other Report 1, Other Report 2.

[X] SHUT-IN PRODUCTION WELL

[ ] INJECTION WELL

Facility No.:

Part I. Pressure Test

[X] 5-Year UIC Test

[X] Test to Maintain SI/TA Status

[ ] Reset Packer

[ ] Verification of Repairs

[ ] Tubing/Packer Leak

[ ] Casing Leak

[ ] Other (Describe):

Describe Repairs: cut casing off at 1865' run new casing with casing patch casing patch at 1870'

Wellbore Data at Time of Test: Injection/Producing Zone(s) SUSSEX, Perforated Interval: 4528'-4580, Open Hole Interval: NA. Casing Test: NA. Tubing Casing/Annulus Test: NA. Test Data: Test Date 12/23/2014, Well Status During Test shut in, Casing Pressure Before Test 0, Initial Tubing Pressure 0, Final Tubing Pressure 0. Starting Casing Test Pressure 360, Casing Pressure - 5 Min. 360, Casing Pressure - 10 Min. 360, Final Casing Pressure 360, Pressure Loss or Gain During Test -0-

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

[ ] CBL or Equivalent

[ ] 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: Nick Pagan

Signed: [Signature]

Title: Workover Supervisor

Date: 12/23/2014

OGCC Approval: [Signature]

Title: Inspector

Date: 12/23/2014

Conditions of Approval, if any:

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10. 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

Oper OGCC

OGCC Operator Number: 46290
Name of Operator: K.P. Kauffman Co INC
Address: 1675 Broadway, Suite 2800
City: Denver State: CO Zip: 80202
API Number: # 05-123-09014 Field Name: SPINDLE Field Number: # 77900
Well Name: 1415 CORP Number: UNIT F-1
Location (QtrQtr, Sec, Twp, Rng, Meridian): NWWSE 30 11N 55W 6

Attachment Checklist table with columns for Oper and OGCC, and rows for Pressure Chart, Cement Bond Log, Tracer Survey, Temperature Survey, Other Report 1, Other Report 2.

[X] SHUT-IN PRODUCTION WELL [ ] INJECTION WELL Facility No.:

Part I. Pressure Test

- [X] 5-Year UIC Test [X] Test to Maintain SI/TA Status [ ] Reset Packer
[ ] Verification of Repairs [ ] Tubing/Packer Leak [ ] Casing Leak [ ] Other (Describe):

Describe Repairs: cut casing off at 1865' run new casing with casing patch casing patch at 1870'

Wellbore Data at Time of Test
Injection/Producing Zone(s): sussex
Perforated Interval: 4528'-4580
Open Hole Interval: [X] NA
Casing Test [ ] NA
Use when perforations or open hole is isolated by bridge plug or cement plug
Bridge Plug or Cement Plug Depth: CIBP 4475' 2 sks cement

Tubing Casing/Annulus Test [ ] NA
Tubing Size: 2 3/8 Tubing Depth: 640' Top Packer Depth: Multiple Packers? [ ] Yes [X] No

Test Data
Test Date: 12/23/2014 Well Status During Test: shut in.
Casing Pressure Before Test: 0 Initial Tubing Pressure: 0 Final Tubing Pressure: 0
Starting Casing Test Pressure: 360 Casing Pressure - 5 Min.: 360 Casing Pressure - 10 Min.: 360 Final Casing Pressure: 360 Pressure Loss or Gain During Test: -0-
Test Witnessed by State Representative? [X] Yes [ ] No OGCC Field Representative (Print Name): John A. Montoya

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 [ ] CBL or Equivalent [ ] 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: Nick Eagan

Signed: [Signature] Title: Workover Supervisor Date: 12/23/2014

OGCC Approval: [Signature] Title: Inspector Date: 12/23/2014

Conditions of Approval, if any: