

Magpie Operating INC, Little Beaver Unit 42
121-06204

Inspection #688307996

6/26/2020

SI/TA Status MIT Inspection



Colorado Oil and Gas Conservation Commission
39.91292, -103.67637, 4570.2ft, 259°
06/26/2020 08:21:30 AM



Colorado Oil and Gas Conservation Commission
39.91294, -103.67636, 4563.6ft, 246°
06/26/2020 08:21:34 AM

Colorado Oil and Gas Conservation Commission
39.9091, -103.68568, 4576.06/26/2020 10:12

FORM 21 Rev 9/14

Click here to reset the form
State of Colorado
Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109

MECHANICAL INTEGRITY TEST

1. Duration of the pressure test must be a minimum of 30 minutes.
2. An original pressure report must accompany this report if this test was not witnessed by a OGCC representative.
3. For production wells, test pressures must be witnessed by an OGCC representative.
4. New injection wells must be tested to maintain requested injection pressure.
5. For injection wells, test pressures must be at least 300 psi 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 326.4(1) & 8. 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 300 feet of the perforated interval to be considered a valid test.

FOR OGCC USE ONLY

Document Number: _____
Date Received: _____

Complete the Attachment Checklist

	Operator	OGCC
Pressure Chart		
Cement Bond Log		
Tracer Survey		
Temperature Survey		
Inspection Number	638347716	

OGCC Operator Number: 52530

Name of Operator: McQuip Operating Inc.
Address: 2707 S. County Road 11
City: Loveland State: CO Zip: 80538
API Number: 05-01-06204 OGCC Facility ID Number: 23405-01101-001
Well/Facility Name: Little Beaver
Location Qtr/Sec: 11W/6E Section: 5 Township: 25 Range: 56 Meridian: 6

Contact Name and Telephone: No: 970-669-6309 Email: russ.mcquip@mcquip.com

Well/Facility Number: 42

☒ SHUT-IN PRODUCTION WELL ☐ INJECTION WELL

Test Type:
☐ Test to Maintain SI/TA status
☐ Verification of Repairs
☐ 5-year UIC
☐ Annual UIC Test

Describe Repairs or Other Well Activities: _____

Last MIT Date: _____

Wellbore Data at Time of Test

Perforated Interval:	Open Hole Interval:
5160-5204	

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: 5110

Tubing Casing/Annulus Test

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:	Casing Pressure Before Test:	Initial Tubing Pressure:	Final Tubing Pressure:
2-26-20	SI			
Casing Pressure Start Test:	Casing Pressure - 5 Min:	Casing Pressure - 10 Min:	Casing Pressure Final Test:	Pressure Lost or Gain During Test:
360	355	350	350	10

Test Witnessed by State Representative?
☒ Yes ☐ No

OGCC Field Representative (Print Name): Susan Sherman

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

Print Name: Ross Warner
Signature: _____ Title: Compliance Date: 6-8-20
OGCC Approval: _____ Title: Field Inspector Date: 6/26/2020
Conditions of Approval, if any: _____