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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

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. Injection wells tests must be witnessed by an OGCC representative.
3. For production wells, test pressures must be at 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.

Complete the
Attachment Checklist

OGCC Operator Number: <u>66190</u>	Contact Name and Telephone <u>JEREMY FISHER</u>
Name of Operator: <u>OMIMEX</u>	No: <u>(970) 630-1272</u>
Address: <u>56056 HWY 385</u>	Email: <u>JEREMY_FISHER@OMIMEXGROUP.COM</u>
City: <u>HOLYOKE</u> State: <u>CO</u> Zip: <u>80734</u>	
API Number: <u>05125095180000</u> OGCC Facility ID Number: _____	
Well/Facility Name: <u>BOWMAN</u> Well/Facility Number: <u>14-21-5-44</u>	
Location QtrQtr: <u>SESW</u> Section: <u>21</u> Township: <u>5N</u> Range: <u>44W</u> Meridian: _____	

	Oper	OGCC
Pressure Chart		
Cement Bond Log		
Tracer Survey		
Temperature Survey		
Inspection Number		

☐ SHUT-IN PRODUCTION WELL

☒ INJECTION WELL

Last MIT Date: 3/14/2014

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			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.	
Injection/Producing Zone(s) NIOBRARA	Perforated Interval: 2351-2371	Open Hole Interval:	Bridge Plug or Cement Plug Depth 2300	
Tubing Casing/Annulus Test				
Tubing Size: 2 3/8"	Tubing Depth: 2300	Top Packer Depth:	Multiple Packers? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Test Data				
Test Date 04/03/2019	Well Status During Test Active	Casing Pressure Before Test Ø	Initial Tubing Pressure Vacuum	Final Tubing Pressure Vacuum
Casing Pressure Start Test 725	Casing Pressure - 5 Min. 725	Casing Pressure - 10 Min. 725	Casing Pressure Final Test 725	Pressure Loss or Gain During Test Ø
Test Witnessed by State Representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		OGCC Field Representative (Print Name): Kym Schura		

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

Print Name: **JEREMY FISHER**

Signed: _____

Title: _____

Date: **4/3/19**

OGCC Approval: _____

Title: **COGCC**

Date: **4/3/19**

Conditions of Approval, if any: _____