

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

Complete the
Attachment Checklist

- 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.

OGCC Operator Number: _____		Contact Name and Telephone	
Name of Operator: <u>PCR Operating</u>		<u>Gene Wehrer</u>	
Address: _____		No: _____	
City: _____	State: _____	Zip: _____	Email: <u>gwehrer1961@outlook.com</u>
API Number: <u>087-60024</u>	OGCC Facility ID Number: <u>10657</u>		
Well/Facility Name: <u>AJU</u>	Well/Facility Number: <u>W-22</u>		
Location QtrQtr: _____	Section: _____	Township: _____	Range: _____
		Meridian: _____	

	Oper	OGCC
Pressure Chart		
Cement Bond Log		
Tracer Survey		
Temperature Survey		
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			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) <u>55ND</u>	Perforated Interval: <u>5568-5595</u>	Open Hole Interval:	Bridge Plug or Cement Plug Depth <u>5038</u>	
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 <u>4-21-21</u>	Well Status During Test <u>SI</u>	Casing Pressure Before Test <u>0</u>	Initial Tubing Pressure	Final Tubing Pressure
Casing Pressure Start Test <u>340</u>	Casing Pressure - 5 Min. <u>340</u>	Casing Pressure - 10 Min. <u>340</u>	Casing Pressure Final Test <u>340</u>	Pressure Loss or Gain During Test <u>0</u>
Test Witnessed by State Representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			OGCC Field Representative (Print Name): <u>Kymberly</u>	

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

Print Name: Gene Wehrer

Signed: [Signature] Title: Pumper

Date: _____

OGCC Approval: [Signature] Title: OGCC

Date: 4/21/21

Conditions of Approval, if any: _____