



STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

00511701
SEP 24 1996
SOUTHEAST COLO. OFFICE
OIL & GAS CONS. COMM.

MECHANICAL INTEGRITY REPORT

Facility Number	API Number <u>6315-1</u> 05-017-063151	Well Name and Number	<u>Pelton Trust #1</u>	
Field	Location (1/4 1/4, Sec., Twp., Rng.)		<u>SE-NE- Sec. 30-125-44W</u>	
Operator	<u>Mull Drilling Co., Inc.</u>			
Operator Address	City	State	Zip Code	
<u>Cheyenne Wells, Colo.</u>	<u>80810</u>			
Operator's Representative at Test	Area Code		Phone Number	
<u>Michael Polley</u>	<u>(719)</u>		<u>767-8805</u>	

1. If both Part I and Part II are not completed, the mechanical integrity test cannot be approved and will be returned to the operator.
2. Prior to performing any required pressure test, notice must be given to the Commission.
3. A pressure chart must accompany this report, if the pressure test was not witnessed by a state representative.
4. Facility numbers and API numbers are available at the Commission upon request.

PART I (Choose one of the following options)

- 1. Pressure test** - (Pressure tests should be a minimum of 15 minutes, at 300 psi or minimum injection pressure whichever is greater. A minimum 300 psi differential pressure must be maintained between tubing and tubing/casing annulus pressures.)

A. Well Data at Time of Test

Tubing Size	Tubing Depth	Top Packer Depth	Multiple Packers	
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Bridge Plug Depth	Injection Zone(s), name		Injection Interval (gross)	
<u>4270</u>	<u>N/A</u>		<u>N/A</u>	
Injected Thru	Test Witnessed by State Rep.			
<input type="checkbox"/> Perforations <input type="checkbox"/> Open Hole	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

B. Casing Test Data

Test Date	Well Status During Pressure Test		Date of Last Approved MIT	
<u>9-24-96</u>	<input type="checkbox"/> Injecting	<input checked="" type="checkbox"/> Shut-in	<input type="checkbox"/> Open	
Starting Casing Press.	Final Casing Press.	Pressure Loss or Gain During Test		
<u>380</u>	<u>380</u>	<u>-0-</u>		
Initial Tubing Press.	Tubing Press.-5 min	Tubing Press.-10 min	Tubing Press.-15 min	
<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>	

- 2. Monitoring Tubing - Casing Annulus Pressure**

Procedure must be approved prior to initiation and only after satisfactorily passing an initial pressure test.

Date of Pressure Test	Test Pressure	Date Pressure Test Approved	Monitoring to start (Month, Year)

- 3. Alternate Test Approved by Director** (See Rule 327) Attach procedures and logs with report. Procedures subject to review by EPA.

PART II (Choose one of the following options) Attach records, charts, logs where appropriate.

- 1. Cementing Records -** (valid only for injection wells in existence prior to July 1, 1986)

	Casing Size	Hole Size	Depth Set	No. Sacks Cement	Calculated Cement Tops
Surface Casing					
Production Casing					
Stage Tool					

2. Tracer Survey Test Date

3. CBL or equiv. Test Date

4. Temperature Survey Test Date

- 5. Alternate Test Approved by Director**
(See Rule 327) Attach procedures and logs with report. Procedures subject to review by EPA.

I hereby certify that the statements herein made are true and correct.

Signed Michael Polley Title Foreman Date 9-24-96

For State Use:
Approved by Ryan Schib Title Engr. Date 9-24-96
Conditions of approval, if any: