

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

- 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 pressurees 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.

Complete the Attachment Checklist

OGCC Operator Number: <u>10657</u>	Contact Name and Telephone	Oper	OGCC
Name of Operator: <u>PCR Operators</u>		Pressure Chart	
Address: _____	No: _____	Cement Bond Log	
City: _____ State: _____ Zip: _____	Email: _____	Tracer Survey	
API Number: <u>087-05543</u> OGCC Facility ID Number: _____		Temperature Survey	
Well/Facility Name: <u>Glenn J-2</u> Well/Facility Number: _____			
Location QtrQtr: _____ Section: _____ Township: _____ Range: _____ Meridian: _____		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	
Injection/Producing Zone(s) <u>J</u>	Perforated Interval:	Open Hole Interval:	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 <u>5520</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>9-20-22</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>335</u>	Casing Pressure - 10 Min. <u>335</u>	Casing Pressure Final Test <u>335</u>	Pressure Loss or Gain During Test <u>-0.5</u>
Test Witnessed by State Representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		OGCC Field Representative (Print Name): <u>Kym Schur</u>		

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

Print Name: Brene Wehner

Signed: _____ Title: Pumper

Date: _____

OGCC Approval: _____ Title: OGCC

Date: 9-20-22

Conditions of Approval, if any: _____