



00204060

STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
Department of Natural Resources



MECHANICAL INTEGRITY REPORT

Facility Number 288	API Number 05-075-05291	Well Name and Number State A 2
Field Atwood Field	Location (1/4, Sec., Twp., Rng.) NE NE Sec 29 T9 N R 53 W	
Operator Walsh Prod		
Operator Address PO. 30	City Sterling	State Calo.
Operator's Representative at Test Randy Barton	Area Code (303)	Phone Number 522-7438
		Zip Code 80751

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. Notice must be given to the Commission prior to performing any required pressure test.
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 2 3/8	Tubing Depth 4645	Top Packer Depth 4625	Multiple Packers <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Bridge Plug Depth —	Injection Zone(s), name J Sand	Injection Interval (gross) 4688' to 4701'	
Injected Thru <input type="checkbox"/> Perforations <input checked="" type="checkbox"/> Open Hole	Test Witnessed by State Rep. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

B. Test Data

Test Date 3-29-90	Date of Last Approved Mechanical Integrity Test —		
Starting Test Pressure 395 Psi	Final Test Pressure 360 Psi	Pressure Loss or Gain During Test -35 Psi	
Tubing Pressure During Test 0	Well Status During Pressure Test <input type="checkbox"/> Injecting <input checked="" type="checkbox"/> Shut-in <input type="checkbox"/> Open		

- ☐ **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)
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- ☐ **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) 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. Sks Cement	Calculated Cement Tops
Surface Casing	10 3/4	17	140'	1.50	Surf.
Production Casing	5 1/2	8 3/4	4688'	1.50	3940
Stage Tool					

- | | | | |
|--|-----------|---|-----------|
| <input type="checkbox"/> 2. Tracer Survey | Test Date | <input type="checkbox"/> 4. Temperature Survey | Test Date |
| <input type="checkbox"/> 3. CBL or equivalent | Test Date | <input type="checkbox"/> 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 **Randy Barton** Title **Company Rep.** Date **3-29-90**

For State Use:

Approved by **Cal DiMatter** Title **SR. PETROLEUM ENGINEER** Date **APR 02 1990**
O & G Cons. Comm

Conditions of approval, if any: