



# State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303)-894-2100 Fax: (303)-894-2109

## 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 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.

<b>OGCC Operator Number:</b> 10203		<b>Contact Name and Telephone</b> BILLY HATAWAY	
<b>Name of Operator:</b> BLACKRAVEN ENERGY		<b>No:</b> (307) 752-5490	
<b>Address:</b> 165 S UNION BLVD SUITE 410		<b>Email:</b> bhataway@enerjexresources	
<b>City:</b> LAKEWOOD	<b>State:</b> CO	<b>Zip:</b> 80228	
<b>API Number:</b> 05-087-053689		<b>Well/Facility Number:</b>	
<b>Well/Facility Name:</b> Gunn Cr-1		<b>Meridian:</b> 6pm	
<b>Location QtrQtr:</b> NWSE	<b>Section:</b> 9	<b>Township:</b> 1	<b>Range:</b> 57

☒ SHUT-IN PRODUCTION WELL ☐ INJECTION WELL

Last MIT Date: 6-3-05

### 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:

Complete the  
Attachment Checklist

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

FOR OGCC USE ONLY

Document Number: \_\_\_\_\_

Date Received: \_\_\_\_\_

### Wellbore Data at Time of Test

Injection/Producing Zone(s)	Perforated Interval:	Open Hole Interval:
j-sand	5456-5460	

### 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.

Bridge Plug or Cement Plug Depth

5386

### 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	Well Status During Test	Casing Pressure Before Test	Initial Tubing Pressure	Final Tubing Pressure
10-9-15	51			
Casing Pressure Start Test	Casing Pressure - 5 Min.	Casing Pressure - 10 Min.	Casing Pressure Final Test	Pressure Loss or Gain During Test
340	340	340	340	0 psi
Test Witnessed by State Representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
OGCC Field Representative (Print Name): _____				

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

Print Name: BILLY HATAWAY

Signed: Billy Hataway Title: DIR FIELD OPERATIONS

Date: 10-9-15

OGCC Approval: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Conditions of Approval, if any: \_\_\_\_\_