

FORM

21

Rev  
08/14

# State of Colorado Oil and Gas Conservation Commission

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



Document Number:

402403491

Date Received:

## 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 an OGCC representative.
3. For production wells, test pressures must be at 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. Written OGCC notification must be provided 10 days prior to the test via Form 42, Field Operations Notice
9. 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

OP OGCC

OGCC Operator Number: 52530	Contact Name: Ross Warner	Pressure Chart		
Name of Operator: MAGPIE OPERATING INC	Phone: (970) 6696308	Cement Bond Log		
Address: 2707 SOUTH COUNTY RD 11		Tracer Survey		
City: LOVELAND State: CO Zip: 80537 Email: ross.magpieoil@gmail.com		Temperature Survey		
API Number: 05-123-10648	OGCC Facility ID Number: 242857	Inspection Number		
Well/Facility Name: SCHRAGE	Well/Facility Number: 2			
Location QtrQtr: SENE Section: 6 Township: 4N Range: 68W Meridian: 6				

☒ 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**

Injection Producing Zone(s)	Perforated Interval	Open Hole Interval
NB-CD	4670-5010	

**Tubing Casing/Annulus Test**

Tubing Size:	Tubing Depth:	Top Packer Depth:	Multiple Packers?
			<input type="checkbox"/>

**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

4515

**Test Data (Use -1 for a vacuum)**

Test Date	Well Status During Test	Casing Pressure Before Test	Initial Tubing Pressure	Final Tubing Pressure
05-14-2020	SHUT-IN	-1		
Casing Pressure Start Test	Casing Pressure - 5 Min.	Casing Pressure - 10 Min.	Casing Pressure Final Test	Pressure Loss or Gain
405	360	0	0	-405

Test Witnessed by State Representative? ☒

OGCC Field Representative

Peterson, Tom

**OPERATOR COMMENTS:**

Reloaded casing with H2O, slow pressure up, rapid loss of casing pressure. MIT fail.

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

Signed: \_\_\_\_\_

Print Name: Ross Warner

Title: Compliance

Email: ross.magpieoil@gmail.com

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

Based on the information provided herein, this Notice (Form 21) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: \_\_\_\_\_

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

**CONDITIONS OF APPROVAL, IF ANY:**

**Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
402403495	FAILED MECHANICAL INTEGRITY TEST

Total Attach: 1 Files

**General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
		Stamp Upon Approval

Total: 0 comment(s)