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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

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 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. 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.

Complete the  
Attachment Checklist

OGCC Operator Number: 16700		Contact Name and Telephone Anita Sanford	
Name of Operator: Chevron U.S.A. Inc (Scout)		No: (970) 551-8313	
Address: 100 Chevron Road		Email: anita.sanford@scoutep.com	
City: Rangely State: CO Zip: 81648			
API Number: 05-103-07022 OGCC Facility ID Number: 47443 / Rangely Field 72370			
Well/Facility Name: L.N. HAGOOD A Well/Facility Number: 9			
Location QtrQtr: SWSE Section: 23 Township: 2N Range: 103W Meridian: 6th			
<input type="checkbox"/> SHUT-IN PRODUCTION WELL <input checked="" type="checkbox"/> INJECTION WELL		Last MIT Date: _____	
Test Type: <input type="checkbox"/> Test to Maintain SI/TA status <input checked="" type="checkbox"/> 5- year UIC <input type="checkbox"/> Reset Packer <input type="checkbox"/> Verification of Repairs <input type="checkbox"/> Annual UIC Test			
Describe Repairs or Other Well Activities: This injection well was shut in on 08/15/2022 for a failed compliance survey, but will pass a MIT. Pulled both packers, perforating the weber zone at 6267'-6273', 6250'-6258', 6240'-6244'. Ran new packers and FL tubing.			

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

Wellbore Data at Time of Test

Injection/Producing Zone(s) <b>Weber</b>	Perforated Interval: <b>6315-6459'</b>	Open Hole Interval: <b>6240-6600'</b>
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<b>Casing Test</b> Use when perforations or open hole is isolated by bridge plug or cement plug; use if cased-hole only with plug back total depth. <b>Bridge Plug or Cement Plug Depth</b>
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Tubing Casing/Annulus Test

Tubing Size: <b>2 7/8'</b>	Tubing Depth: <b>6230</b>	Top Packer Depth: <b>5519.5</b>	Multiple Packers? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Test Data

Test Date <b>1-26-23</b>	Well Status During Test <b>Shut In</b>	Casing Pressure Before Test <b>0</b>	Initial Tubing Pressure <b>1571</b>	Final Tubing Pressure <b>1571</b>
Casing Pressure Start Test <b>1260</b>	Casing Pressure - 5 Min. <b>1255</b>	Casing Pressure - 10 Min. <b>1250</b>	Casing Pressure Final Test <b>1250</b>	Pressure Loss or Gain During Test <b>-10</b>

Test Witnessed by State Representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	OGCC Field Representative (Print Name): <b>Chuck Browning</b>
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I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Anita Sanford	Form 42# 403297880	Field Inspection # 69380	<b>5345</b>
Signed: <i>Anita Sanford</i>	Title: Regulatory Analyst	Date: 1-26-23	
OGCC Approval: <i>Chuck Browning</i>	Title: Compliance Inspector	Date: 1-26-23	
Conditions of Approval, if any:			



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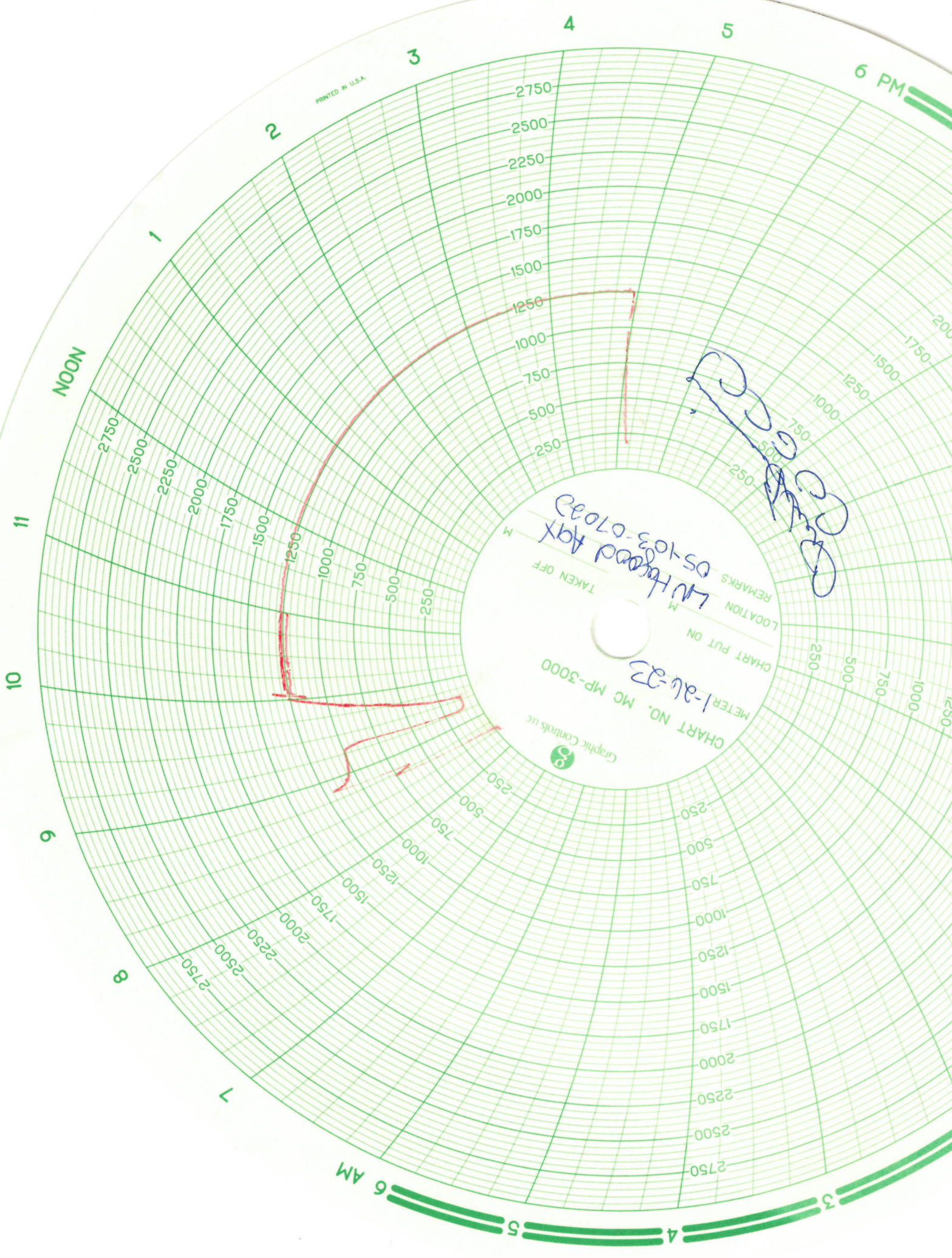


CHART NO. MC MP-3000  
METER PUT ON  
LOCATION  
REMARKS  
TAKEN OFF  
M

1-26-73  
W. Head 49x  
05-103-07003

*[Handwritten signature]*