## FORM 21

## State of Colorado

## Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203



08/14		Phone: (303	894-21	00 Fax: (303) 894-2	109		ATA A		
		MECHANI	CAL	NTEGRITY T	EST			L	
Duretion of the press     An original pressure injection well tests mus.     For production wells at New injection wells to For nijection wells, to A minimum 300 pai     Do not use this form 8. Written OGCC notifi	o chart must in the witness to test pressure must be teste est pressurer differential profit submitting if submitting	accompany this report ed by an OGCC repre res must be at a minin ed to maximum reques a must be at least 300 ressure must be maint a under provisions of R	t if this tes sentative. num of 30 sted inject paig or an ained bet tule 326 s	O peig. ion pressure. verage injection pressu ween the tubing and tul (118. or C.	re, whicher bing/caeing	ver is greater. Jannulus press		Complete the Att	op cocc
OGCC Operator Nur	nber:	52530		Contact Name	Warner	Ryan		Pressure Chart	
Name of Operator:	OPERATING INC		•	P	hone: (720)	233-0875	Cement Bond Log	+++	
Address: 2707 SOUTH COUNTY RD 11					_			Tracer Survey	
tty: LOVELAND State: CO Zip: 80537 Email: magpicol@yal						piecil@yaho	o.com	Temperature Survey	
API Number: 05- Well/Facility Name: Location QtrQtr: SHUT-IN PROD Test Type: Test to Main Verification of Describe Re	LITT NWNE UCTION W  Intain SI/TA in of Repairs or Otto	status X 5		C TEST	Ran Last Mi	ge: 56W	Meridian: 6	Inspection Nu	1504
Injection Producing Zone(s)			Perforated Interval			Open Hole Interval		Use when perforations or open hole	
DSND		5178-5	5178-5226				isolated by bridge plug or cement plug; use cased-hole only with plug back total depth		g; use if
Tubing Casing/Annulus Test								ug or Cement Plug D	1
Tubing Size:	Tubing Depth:		Top Packer Depth:		Multiple Packers?				1
2 3/8 5016 5016									-
Test Data (Use -1 for a vacuum)  Test Date   Weil Status During Test   Casing Pressure Before Test   Initial Tubing Pressure								Final Tubing Pres	sure
06-03-2019		SHUT -IN		0		0		0	
asing Pressure Start Test Casing		Casing Pressure	Pressure - 5 Min. Casing Pressure - 5 Min.		ssure - 10 Min. Casing Pri		essure Final Test	Pressure Loss of	Gain
0		0		0		0		0	
Test Witnessed by PERATOR COMMEN  hereby certify all tat Signed:	NTS:		to the be	OGCC Field Repres	, true, cor				
Title: Vice Pre	sident		Em	ail: magpleoil@yah	100.00m		Date:	6-319	1
	ation provid	led herein, this Not				Rules and ap		6-3-49 d is hereby approved.	

CONDITIONS OF APPROVAL, IF ANY:

Bradenhead was