

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CASING MECHANICAL INTEGRITY TEST**

Form U-7
August 2019

Disposal: Enhanced Recovery: KCC District No.: _____
 Operator License No.: _____ Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____ Phone: (____) _____

API No.: _____ Permit No.: _____
 ___ - ___ - ___ - ___ Sec. ___ Twp. ___ S. R. ___ East West
 _____ Feet from North / South Line of Section
 _____ Feet from East / West Line of Section
 Lease: _____ Well No.: _____
 County: _____

Well Construction Details: New well Existing well with changes to construction Existing well with no changes to construction

Maximum Authorized Injection Pressure: _____ psi Maximum Injection Rate: _____ bbl/d

	<i>Conductor</i>	<i>Surface</i>	<i>Intermediate</i>	<i>Production</i>	<i>Liner</i>	<i>Tubing</i>
Size: _____	_____	_____	_____	_____	_____	Size: _____
Set at: _____	_____	_____	_____	_____	_____	Set at: _____
Sacks of Cement: _____	_____	_____	_____	_____	_____	Type: _____
Cement Top: _____	_____	_____	_____	_____	_____	
Cement Bottom: _____	_____	_____	_____	_____	_____	

Packer Type: _____ Set at: _____

DV Tool Port Collar Depth of: _____ feet with _____ sacks of cement TD (and plug back): _____ feet depth

Zone of Injection Formation: _____ Top Feet: _____ Bottom Feet: _____ Perf. or Open Hole: _____

Is there a Chemical Sealant or a Mechanical Casing patch in the annular space? Yes No

If Dual Completion - Injection is: Above Production Below Production

FIELD DATA

GPS Location: Datum: NAD27 NAD83 WGS84 Lat: _____ Long: _____ Date Acquired: _____

MIT Type: _____ MIT Reason: _____

Time in Minute(s): _____

Pressures: Set up 1 _____

Set up 2 _____

Set up 3 _____

Tested: Casing or Casing - Tubing Annulus System Pressure during test: _____ Bbls. to load annulus: _____

Test Date: _____ Using: _____ Company's Equipment

The zone tested for this well is between _____ feet and _____ feet.

The test results were verified by operator's representative:

Name: _____ Title: _____ Phone: (____) _____

<p>KCC Office Use Only</p> <p>The results were:</p> <p><input type="checkbox"/> Satisfactory</p> <p><input type="checkbox"/> Not Satisfactory</p> <p>Next MIT: _____</p>	<p>State Agent: _____ Title: _____ Witness: <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Remarks: _____</p>
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810 E 7TH
 PO Box 92
 EUREKA, KS 67045
 (620) 583-5561



Cement or Acid Field Report

Ticket No. **6598**

Foreman Russell Mcloy

Camp Eureka / Steve

Date	Cust. ID #	Lease & Well Number	Section	Township	Range	County	State	
7-26-22	1229	SIGMAN 5-A				Butler	Ks	
Customer Michael D Traylor LLC			Safety Meeting 2m AM		Unit #	Driver	Unit #	Driver
Mailing Address P.O. Box 1224					104	A mend		
City Eldorado			State KS		113	Broker		
Zip Code 67042					120	Russ		
					121	Steve		

Job Type Squeeze Hole Depth _____ Slurry Vol. _____ Tubing 2 3/8
 Casing Depth _____ Hole Size _____ Slurry Wt. _____ Drill Pipe _____
 Casing Size & Wt. 4 1/2 liner Cement Left in Casing _____ Water Gal/SK _____ Other _____
 Displacement 9 3/4 Displacement PSI 400 # Bump Plug to _____ BPM 1.6

Remarks: Safety Meeting. Locate hole IN casing 668-699' w/ packer.
Test Below 500# GOOD TEST, TEST Above 668 to Surface @ 400# GOOD TEST
Circulation From 668 to Surface = 12 Bbl Dye marker. Lay out Packer Rig to 4 1/2
Sweep hole w/ 20 Bbl water. Mix 95 sks Reg class A cement w/ 2% CACL2 2% Gel
Displace w/ 9 3/4 Bbl water. GOOD cement Returns to Surface, close Annulus last
5 Bbl Displacement to squeeze cement in hole. PSI @ 300 - 400 @ END OF Displace
ment shut Down well holding 200# close well IN over Night. JOB complete
Tear Down.

Code	Qty or Units	Description of Product or Services	Unit Price	Total
C-104	1	Pump Charge	1180.00	1180.00
C-107	30	Mileage	5.00	150.00
C-200	95	sks CLASS A Cement	18.55	1,762.25
C-205	180 #	CACL2 = 2%	.75	135.00
C-206	180 #	Gel = 2%	.30	54.00
C-108A	4.5 Ton	Ton Mileage 30 miles X 1.50	M/C 390.00	390.00
			Sub Total	3,671.25
			-52	
			Sales Tax	

Authorization Witnessed by Mike Title owner Total _____

I agree to the payment terms and conditions of services provided on the back of this job ticket. Any amendments to payment terms must be in writing on the front of this job ticket or in the Customer's records at ELITE's office.

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