

Facility Well Name

UIC Permit #

Month

Year

Submitted

Approved

KOLAR Document ID

Class I-V Injection Well Monthly Monitoring

Summary of Monthly Report

Number of days injection occurred:

Barrels per Day Maximum:

	Injection Volume Barrels per Day	Injection Rate Barrels per Minute	Annulus Pressure psig min		Injection Pressure		Amount Added to Seal Pot
			Gauge psig	Cont. Record psig	Gauge psig	Cont. Record psig	
Monthly Average							
Monthly Maximum							
Monthly Minimum							
Monthly Total							

Summary of Continuous Recorder Data

Maximum Annulus Pressure psig	Minimum Annulus Pressure psig	Maximum Injection Pressure psig	Minimum Injection Pressure psig

Comments:

Weekly Injectate Samples

Kansas Lab Certificate Number

Week	Temperature		pH		Chloride				
	Degrees Fahrenheit	Date	Standard Units	Date	Cl concentration (mg/l)	Date Sample Collected	Date Sampl Analysed		

No monthly injectate samples required.



**KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
MECHANICAL INTEGRITY TEST (MIT) REPORT
CLASS I UIC WELL**

WELL IDENTIFICATION

Test Date:	Well #:	Permit #:
Owner/Operator:		Contact Person:
Address:		Phone:

MECHANICAL INTEGRITY TEST FIELD DATA

Type of liquid pressurized:				
Method used to pressurize:				
Minimum required surface test pressure (psig):				
Time (24 Hr) Start:	Time:	Time:	Time:	End Time:
Pressures (psig):				
Amount of Pressure Loss/Gain (psig):		Percentage of Pressure Loss/Gain %:		
Tested: Casing/Injection Tubing Annulus				
The bottom of the tested interval is shut-in with _____ packer set at _____				

TEST GAUGE DATA

Demonstration test gauge functioning:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Demonstration total hydraulic test:	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Serial number or number of test gauge:		
Calibration of test gauge provided:	Yes <input type="checkbox"/>	No <input type="checkbox"/>

MECHANICAL INTEGRITY TEST RESULTS

The test results were:	Satisfactory <input type="checkbox"/>	Not Satisfactory <input type="checkbox"/>
State Witness:	Title:	
Remarks:		

Cal-scan Services Ltd.

4188-93 Street
Edmonton, Alberta, Canada
T6E 5P5
Phone: (780) 944-1377 Fax: (780) 944 - 1406

Calibration Certificate

Model : Hawk 9000

Range : 3,500.00 psi

Serial Number : 6740

Last Cal. Date : 04-July-2019

Specifications

Calibration Pressure Range: 0.00 3,500.00 psi

Calibration Temperature Range: -20.00 80.00 °C

Pressure: Accuracy ± 0.8400 psi (0.024 %FS)
Resolution ± 0.0105 psi (0.0003 %FS)

Temperature: Accuracy ± 0.40 °C
Resolution ± 0.001 °C

Calibration Summary

Pressure: Accuracy (maximum error) 0.38 psi

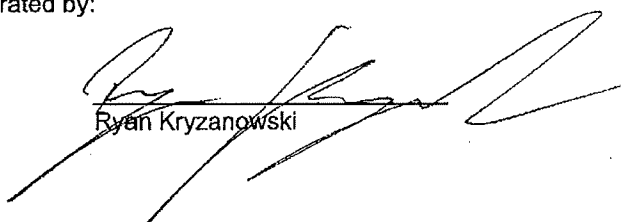
Temperature: Accuracy (maximum error) 0.19 °C

Traceability Statement

All working standards are traceable to national or internationally recognized standards.

Calibrated with Cal-Scan DWG # 5

Calibrated by:


Ryan Kryzanowski

