Bureau of Water - Geology Section
1000 S. W. Jackson, Ste. 420
Topeka, KS 66612-1367

UNDERGROUND HYDROCARBON STORAGE
MECHANICAL INTEGRITY TEST (MIT) FORM

Procedure #: UICLPG-22
(3/21)

The following field procedure for the MIT must be completed and submitted with the final report. Do not alter the format.

Facility Name:				**Well Name:**	
Type of MIT:	☐	**Casing**	☐ **Cavern**	☐	**Casing/Cavern**

TEST PREPARATION	**Date/time:**
Wellhead inspection results: **external corrosion, faulty valves, gasket leaks, etc)**	

Brine pressure		**Product pressure**	
Cavern compressibility:			
Cavern pressure change < 10 psi/day			
PRE-NITROGEN INJECTION			
Base temperature **log from surface to 50 ft below expected interface**	**Date/time:**	**Temperature (F):**	
Base density log (a minimum of 50 ft below the expected interface level or an acceptable depth above the casing seat)	**Date/time:**	**Interface depth:**	
		Anomalies (washouts, etc)	

PART 1: CASING TEST

Interval Depth	Nitrogen pressure	Brine pressure	Nitrogen temperature	Time nitrogen interface passed

Measure nitrogen with a meter. Terminate nitrogen injection when the interface depth is just above the casing seat.

CASING TEST				
Interval 1				
Test Start	**Time:**			
	Interface depth			
	N pressure			
	Brine pressure			
TEST END	**Time:**		**Length of test:**	
Density log	**Interface depth:**		**Brine pressure:**	**Nitrogen pressure:**
Comments: Note any interface movement or loss of nitrogen pressure. If interface is more than 10 feet above the effective casing seat, please explain why.				

PART 2: CAVERN TEST

Nitrogen/Brine Cavern Test		
Set interface below the casing and terminate nitrogen injection		
Test Length:		
START TEST Date/Time:		
Brine:	**Nitrogen:**	**Interface Depth:**
Calculated Nitrogen Volume:		
END TEST Date/Time		
Brine:	**Nitrogen:**	**Interface Depth:**
Calculated Nitrogen Volume:		
TEST RESULTS		
MDLR:	**CLR:**	

Liquid/Liquid Cavern Test		
Set interface below the casing and terminate nitrogen injection		
Test Length:		
START TEST Date/Time:		
Brine:	**Product:**	**Interface Depth:**
END TEST Date/Time		
Brine:	**Product:**	**Interface Depth:**
MDLR:	**CLR:**	

Comments:
K.A.R. 28-45-16 requires that a licensed professional engineer or licensed geologist, or a licensed professional engineer's or licensed geologist's designee supervise all test procedures and associated field activity.
Supervised by: (Print name)
Company/Title:
Signature: Date: