

LEAK DATA FORM

CONTACT INFORMATION:

Date: _____ Field Name: _____
 Contact Name: _____ Well Name: _____
 Company: _____ Leak Type: _____
 Country: _____ Email: _____
 Telephone: _____ Mobile: _____

Please complete as much information as possible below with regards to the leak condition. Attach well-bore diagrams, pictures, and any additional documents to allow us to compile a comprehensive evaluation on your project.

THIS IS A FILLABLE PDF FORM Please click on each field to complete

WELLHEAD DATA:

Wellhead Type: _____
 TBG Hanger Type: _____
 CSG Hanger Type: _____
 Test Pressure: _____
 Pressure Rating: _____

SCSSV/DHSV DATA:

Manufacturer/Model: _____
 Depth: _____
 Control Line OD: _____
 Wall Thickness: _____
 Pressure Rating: _____

PRESSURE DATA:

Tubing Pressure (Normal): _____
 Tubing Pressure (Shut-in): _____
 C/L Normal Pressure: _____
 C/L Pressure Shut-in: _____
 Prod. Annulus Pressure: _____
 Outer Annulus Pressure: _____

FLUIDS:

Annulus Fluid Type: _____
 C/L Fluid Type: _____
 Outer Ann Fluid: _____
 Drilling Mud Type: _____

LEAK DATA:

Current Leak Rate (Vol/Min): _____
 Pump-in Rate and Pressure: _____
 Shut-in Decline Rate: _____
 Pressure Build-up Rate: _____
 Pressure Build-up/Min: _____

CASING/TUBING DATA:

	SIZE (IN)	WT (PPF)	GRADE	MAX PRESSURE	DEPTH INTERVAL
Tubing:	_____	_____	_____	_____	_____
Prod. Casing:	_____	_____	_____	_____	_____
Intermediate Casing:	_____	_____	_____	_____	_____
Surface Casing:	_____	_____	_____	_____	_____

PIPELINE DATA:

	SIZE (OD)	(ID)	GRADE	PRESSURE	WATER DEPTH
Pipeline Diameter:	_____	_____	_____	_____	_____
Length:	_____				
Operating Pressure:	_____				
Leak Location:	_____				

UMBILICAL DATA:

Umbilical ID: _____
 Umbilical Length: _____
 Normal Operating Pressure: _____
 Fluid composition: _____

GAS:

H²S Concentration: _____ ppm
 CO² Concentration: _____ ppm

TEMPERATURE:

Bottom-Hole: _____
 Ambient: _____

DETAILED LEAK DESCRIPTION: