

## WELL SITE INSPECTION FORM



00217008

WELL NAME CANAL #2  
OPERATOR H & R  
LOCATION NWNE 34 NW-6-7W  
FIELD WINDSOR

API NUMBER 05 - -  
PERMIT NUMBER \_\_\_\_\_  
COUNTY WELD  
INSPECTOR R. VanSickle

## AL/PA/DA INSPECTION RESULTS:

PASS(Y) \_\_\_\_\_ FAIL(N) \_\_\_\_\_ DATE \_\_\_\_\_ WELL STATUS: FN \_\_\_\_\_ FD \_\_\_\_\_ WO \_\_\_\_\_

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DATE OF INSPECTION BEFORE/DURING DRILLING \_\_\_\_\_

CASING SIZE \_\_\_\_\_ DEPTH SET \_\_\_\_\_ CMT VOL \_\_\_\_\_ WOC \_\_\_\_\_  
CONSISTENT WITH APD CASING PROGRAM? \_\_\_\_\_ RETURNS \_\_\_\_\_  
RIG \_\_\_\_\_ BOP'S \_\_\_\_\_ CONTACT \_\_\_\_\_

DATE OF INSPECTION BEFORE/DURING/AFTER COMPLETION 2-28-90

PIPE SET? \_\_\_\_\_ COMPLETION RIG/ACTIVITY \_\_\_\_\_  
DRILLING PITS: CLOSED ☒ OPEN \_\_\_\_\_ WELLHEAD SYSTEM INSTALLED ☒  
TANK ID: YES ☒ NO \_\_\_\_\_ NA \_\_\_\_\_ WELL SIGN: YES \_\_\_\_\_ NO ☒  
SKIM PIT: \_\_\_\_\_ gal TANKS: ( ) \_\_\_\_\_ bbls  
EQUIPMENT \_\_\_\_\_

BRADENHEAD PRESSURE \_\_\_\_\_ FLUID: NO \_\_\_\_\_ YES \_\_\_\_\_ TYPE \_\_\_\_\_  
METER RUN: YES \_\_\_\_\_ NO \_\_\_\_\_ WELL STATUS: PR \_\_\_\_\_ TA \_\_\_\_\_ SI \_\_\_\_\_ WELL CAT 3- \_\_\_\_\_

## AL/PA/DA INSPECTION

DATE PLUGGED: \_\_\_\_\_ DATE PERMIT EXPIRED: \_\_\_\_\_  
HOLE PLUGGED: YES \_\_\_\_\_ NO \_\_\_\_\_ PITS BACKFILLED: YES \_\_\_\_\_ NO \_\_\_\_\_  
MATERIAL BURIED: YES \_\_\_\_\_ NO \_\_\_\_\_ NA \_\_\_\_\_ SITE CLEAN: YES \_\_\_\_\_ NO \_\_\_\_\_  
BOND RELEASE OK: YES \_\_\_\_\_ NO \_\_\_\_\_ FED \_\_\_\_\_ HOLE MARKER: YES \_\_\_\_\_ NO \_\_\_\_\_

DATE OF SAFETY/STATUS INSPECTION \_\_\_\_\_

COMMENTS PU REMOVED, PROPANE TANK IN PLACE PLANS?

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\_\_\_\_\_  
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\_\_\_\_\_  
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