

Location

Overall Good:

Signs/Marker:			
Type	WELLHEAD		
Comment:	Adequate		
Corrective Action:		Date:	

Emergency Contact Number:	
Comment:	<input style="width: 500px; height: 20px;" type="text"/>
Corrective Action:	<input style="width: 500px; height: 20px;" type="text"/> Date: _____

Overall Good:

Spills:			
Type	Area	Volume	

In Containment: No

Comment:

Multiple Spills and Releases?

Equipment:			corrective date
Type: Plunger Lift	# 0		
Comment:			
Corrective Action:		Date:	

Venting:			
Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 251928 Type: WELL API Number: 123-19733 Status: PR Insp. Status: PA

BradenHead

Comment: Plumbed to surface

Corrective Action:

Date:

Workover

Comment: P&A well. At time of inspection crew was setting stump plug and circulating cement. No visible signs of venting.

Corrective Action:

Date: