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## WELL SITE INSPECTION FORM



Well Name GREEN G #1 API Number 05 - 075 - 06295  
Operator CHEVRON Permit # \_\_\_\_\_  
Location NESW29-9N-53W County LOGAN  
Field MT. HOPE Inspector R. VanSickle  
AL/PA/DA Inspection Results: Well Status:  
Pass(Y) ☒ Fail(N) \_\_\_\_\_ Date 4-18-90 FN \_\_\_\_\_ FD \_\_\_\_\_ WO \_\_\_\_\_ PR \_\_\_\_\_ SI \_\_\_\_\_

Date of Inspection Before/During Drilling \_\_\_\_\_

Surf. Csg. Size \_\_\_\_\_ Setting Depth \_\_\_\_\_ Cmt. Vol. \_\_\_\_\_ WOC time \_\_\_\_\_  
Consistent with APD casing Program? YES \_\_\_\_\_ NO \_\_\_\_\_ Returns \_\_\_\_\_  
Rig \_\_\_\_\_ BOP'S \_\_\_\_\_ Contact \_\_\_\_\_

Date of Inspection Before/During/After Completion \_\_\_\_\_

Prod. Csg. Set? \_\_\_\_\_ Completion Rig/Activity \_\_\_\_\_  
Drilling Pits: Closed \_\_\_\_\_ Open \_\_\_\_\_ Wellhead Installed \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_  
Tank ID: Yes \_\_\_\_\_ No \_\_\_\_\_ N/A \_\_\_\_\_ Skim Tank/Pit: \_\_\_\_\_ Prod. Tanks: ( ) \_\_\_\_\_ BBLS  
Equipment \_\_\_\_\_ Meter Run: Yes \_\_\_\_\_ No \_\_\_\_\_  
Bradenhead Press: \_\_\_\_\_ Fluid: No \_\_\_\_\_ Yes \_\_\_\_\_ Type \_\_\_\_\_ Well Cat. \_\_\_\_\_

AL/PA/DA Inspection

Date Plugged: 8-6-59 Date Permit Expired: \_\_\_\_\_  
Hole Plugged: Yes ☒ No \_\_\_\_\_ Pits Backfilled: Yes ☒ No \_\_\_\_\_  
Material Buried: Yes ☒ No \_\_\_\_\_ N/A \_\_\_\_\_ Site Clean: Yes ☒ No \_\_\_\_\_  
Bond Release OK: Yes ☒ No \_\_\_\_\_ Fed \_\_\_\_\_ Hole Marker: Yes \_\_\_\_\_ No ☒

Date of Safety/Status Inspection \_\_\_\_\_

Comments: \_\_\_\_\_  
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Violations: Yes \_\_\_\_\_ No ☒ Notice Sent: Yes \_\_\_\_\_ No \_\_\_\_\_ Date Sent: \_\_\_\_\_