



WELL SITE INSPECTION FORM

WELL NAME State #1 API NUMBER 05 - -  
OPERATOR MEPCO PERMIT NUMBER \_\_\_\_\_  
LOCATION SW 36-12N-44W COUNTY Sedgewick  
FIELD Chappel INSPECTOR SP

AL/PA/DA INSPECTION RESULTS: WELL STATUS:  
PASS(Y) \_\_\_\_\_ FAIL(N) \_\_\_\_\_ DATE \_\_\_\_\_ 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 \_\_\_\_\_

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 10/20/88

COMMENTS Well SI, not connected to flowline  
No surface equipment on location.  
TA well