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WELL NAME A. Kinzie #1
OPERATOR Depco Inc.
LOCATION NEDE 10-9N-55W
FIELD LC

API NUMBER 05-075-66020
PERMIT NUMBER 81-867
COUNTY Logan
INSPECTOR SP

AL/PA/DA INSPECTION RESULTS:

PASS(Y) ☒ FAIL(N) ☐ DATE 8/25/88 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 _____

COMMENTS _____



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