



00241628

WELL SITE INSPECTION FORM
(DRILLING AND PLUGGING)

C
FEB 19 1992

Well Name MATHEWSON 32-12
Operator PRENATA J DONNELLY
Location SWNE12-9N-55W
Field _____

API Number 05 - 075 - 8251
Permit # _____
County LOGAN
Inspector R. Janssick

AL/PA/DA Inspection Results:

Well Status:

Pass(Y) Fail(N) _____ Date 2-15-92 ND _____ DG _____ WO _____ PR _____ SI _____ TA _____

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 _____ Stage Tool Depth _____ Cmt. Vol. _____

Date of Inspection Before/During/After Completion _____

Prod. Csg. Set? _____ Completion Rig/Activity _____
Drilling Pits: Closed _____ Open _____ Wellhead Installed: _____ Sign: Yes _____ No _____
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: _____ 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: CHECK CMT VERIFICATION done RJE

Violations: Yes _____ No _____ Notice Sent: Yes _____ No _____ Date Sent: _____