



WELL SITE INSPECTION FORM

3

LOCATION SESE 22-35-58W
OPERATOR N.C.R.A.
LEASE MAOPED #4

FIELD ROMAN NOSE NORTH
COUNTY ADAMS

DATE OF INSPECTION BEFORE/DURING DRILLING _____

RIG _____ SURFACE CASING SIZE _____ DEPTH SET _____
BOP'S _____ RETURNS _____ WOC _____
CONSISTENT WITH APD CASING PROGRAM? _____ CMT VOL _____
COMMENTS _____

DATE OF INSPECTION BEFORE/DURING/AFTER COMPLETION _____

PIPE SET? _____ HOLE OPEN? _____ COMPLETION RIG/ACTIVITY _____
DRILLING PITS: CLOSED _____ OPEN _____
WELLHEAD SYSTEM INSTALLED? _____
TANKS _____ HEATERS _____
SKIM PITS _____
LEASE SIGN: YES ___ NO ___ TANK I.D.: YES ___ NO ___ NA ___
COMMENTS _____

DATE OF AL/DA/PA INSPECTION 10/14/87

DATE PLUGGED: 7/19/87
HOLE PLUGGED: YES ☒ NO ___
BOND RELEASE OK: YES ☒ NO ___

PITS BACKFILLED: YES ☒ NO ___
SITE CLEAN: YES ☒ NO ___
HOLE MARKER: YES ☒ NO ☒

COMMENTS GOOD REPAIR

DATE APD EXPIRED _____

PA INSPECTION RESULTS: PASS(Y) ☒ FAIL(N) ___

PERMIT # 87-423
API # 05-001-08833
INSPECTOR JSX