



WELL SITE INSPECTION FORM

Well Name NW BU # 5-I API Number 05 - 061 - 06045
Operator PARK OIL & GAS Permit # 68 386
Location NE SE 5 19S 45W County KIOWA
Field BRANDON Inspector SHELTON
AL/PA/DA Inspection Results: Well Status:
Pass (Y) _____ Fail (N) N Date 9/11/90 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: _____ 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: 7/31/90 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 9/11/90

Comments: PULLED CSG + TUBING ON SITE / DEBRIS
/ FLOWLINE / NO SIGN OF SURF CSG / ON PULLED

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