00572620

WELL SITE INSPECTION FORM
(DRILLING AND PLUGGING)

UIC

Well Name NWBU #2-I API Number 05 - 061 - 6036
Operator PARK Permit # 68 252
Location NENE 5 19S 45W County KIOWA
Field BRANDON Inspector SHELTON

AL/PA/DA Inspection Results: AC Well Status:
Pass(Y) Y Fail(N)____ Date 2/6/91 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: 7/90 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 2/6/91

Comments: RESTORATION COMPLETE

Violations: Yes_____ No_____ Notice Sent: Yes_____ No____ Date Sent:_____