



00416044

WELL SITE INSPECTION FORM

LOCATION NW 1/4 20-35-55WFIELD WESTFORKOPERATOR MURFINCOUNTY WASHINGTONWELL NAME #1-20 FLB - LANDACKV

PERMIT # _____

DATE OF INSPECTION DURING DRILLING: _____

RIG _____

SURFACE CASING: _____

DEPTH: _____

BOP'S _____

RETURNS: _____

WOC: _____

CONTACT _____

CMT VOL: _____

ADEQUATE AQUIFER PROTECTION? _____

COMMENTS _____

DATE OF INSPECTION AFTER COMPLETION: _____

FRACED: YES _____ NO _____

PRODUCTION STRING: _____

WATER DISPOSAL: PITS _____, INJECTED _____, COMMERCIAL _____, UNKNOWN _____, N.A. _____

PITS: PERMIT Y _____ N _____, SKIM TANK Y _____ N _____, DIMENSIONS _____

LEASE SIGN: YES _____ NO _____ TANK ID: YES _____ NO _____ NA _____ FENCED: YES _____ NO _____

SURFACE EQUIPMENT: _____

COMMENTS: _____

DATE OF P&A INSPECTION 8/22/80PITS BACKFILLED: YES ☒ NO _____SURFACE RECLAIMED: YES ☒ NO _____HOLE MARKER: YES ☒ NO _____SITE CLEAN: YES ☒ NO _____BOND RELEASE OK: YES ☒ NO _____

LANDOWNER RELEASE: YES _____ NO _____

COMMENTS: SITE LEVEL - MUD SPREAD OUT. GOING NOW GRABINGAREA - OK

DATE OF SAFETY INSPECTION _____

COMMENTS: _____

INSPECTOR R. VACLAVIKAPI No. 05121-9998P&A Inspected: Yes ☒ No _____*epk*