

WELL SITE INSPECTION FORM  
(DRILLING AND PLUGGING)



Well Name KRISS A #1 API Number 05 - 061 - 6658  
Operator MULL Permit # 93161  
Location SE SW 18 17S 42W County KIOWA  
Field \_\_\_\_\_ Inspector SHELTON

AL/PA/DA Inspection Results:

Well Status:

Pass(Y) \_\_\_\_\_ Fail(N) N Date 6/10/93 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 X No \_\_\_\_\_ Pits Backfilled: Yes \_\_\_\_\_ No 6  
Material Buried: Yes \_\_\_\_\_ No \_\_\_\_\_ N/A X Site Clean: Yes X No \_\_\_\_\_  
Bond Release OK: Yes \_\_\_\_\_ No X Fed \_\_\_\_\_ Hole Marker: Yes \_\_\_\_\_ No X

Date of Safety/Status Inspection 6/10/93

Comments: PARTIAL RESTORATION - NO SIGN CSG / PITS OPEN, DRY  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Violations: Yes \_\_\_\_\_ No \_\_\_\_\_ Notice Sent: Yes \_\_\_\_\_ No \_\_\_\_\_ Date Sent: \_\_\_\_\_