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WELL SITE INSPECTION FORM

WELL NAME BOLLISH #4
OPERATOR SKAER
LOCATION NWSE23-9N53W
FIELD N. MINTO

API NUMBER 05 - 075 - 09203
PERMIT NUMBER
COUNTY LOGAN
INSPECTOR B. Van Sickle

AL/PA/DA INSPECTION RESULTS:

PASS(Y) ☒ FAIL(N) ☐ DATE 2-9-90 FN ☐ FD ☐ WO ☐

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DATE OF INSPECTION BEFORE/DURING DRILLING

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

DATE OF INSPECTION BEFORE/DURING/AFTER COMPLETION

PIPE SET? COMPLETION RIG/ACTIVITY
DRILLING PITS: CLOSED OPEN WELLHEAD SYSTEM INSTALLED
TANK ID: YES NO NA WELL SIGN: YES NO
SKIM PIT: gal TANKS: () bbls
EQUIPMENT

BRADENHEAD PRESSURE FLUID: NO YES TYPE
METER RUN: YES NO WELL STATUS: PR TA SI WELL CAT 3-

AL/PA/DA INSPECTION

DATE PLUGGED: 7-24-89 DATE PERMIT EXPIRED:
HOLE PLUGGED: YES ☒ NO ☐ PITS BACKFILLED: YES ☒ NO ☐
MATERIAL BURIED: YES ☒ NO ☐ NA ☐ SITE CLEAN: YES ☒ NO ☐
BOND RELEASE OK: YES ☒ NO ☐ FED ☐ HOLE MARKER: YES ☐ NO ☒

DATE OF SAFETY/STATUS INSPECTION

COMMENTS



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