



WELL SITE INSPECTION FORM
(DRILLING AND PLUGGING)

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Well Name Darby
Operator Sidwell-Tobison
Location NESE 1-2N-54
Field _____

API Number 05 (121 - 08409)
Permit # _____
County Washington
Inspector EBB

AL/PA/DA Inspection Results:

Well Status:

Pass(Y) ☒ Fail(N) _____ Date 11-25-91 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: () _____ BBL'S
Equipment _____ Meter Run: Yes _____ No _____
Bradenhead Press: _____ Fluid: No _____ Yes _____ Type _____ Well Cat. _____

AL/PA/DA Inspection

Date Plugged: 12-4-69 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 _____



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Comments: _____

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