



WELL SITE INSPECTION FORM

LOCATION 1 NW NW 4-35-66W FIELD W/C  
OPERATOR SNYDER DRUG COUNTY ADAMS  
WELL NAME CHRISTENSEN #3 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 <sup>A.L.</sup> ~~PEA~~ INSPECTION 10/8/86

PITS 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: NICELY TILLED FIELD

DATE OF SAFETY INSPECTION \_\_\_\_\_

COMMENTS: \_\_\_\_\_

INSPECTOR JJK

API No. 05-001-0 ?

P&A Inspected: Yes  No \_\_\_