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WELL SITE INSPECTION FORM

WELL NAME AMPET BoxElderFed11-24 API NUMBER 05 - 001 - 8871

OPERATOR AMPET PERMIT NUMBER

LOCATION SESW 11-35-65W COUNTY Adams

FIELD Mandella INSPECTOR BinEley

AL/PA/DA INSPECTION RESULTS: WELL STATUS:

PASS(Y) ✓ FAIL(N) ___ DATE 6-16-89 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: ___ 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 Plowed

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