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Well Name Box Elder 2  
 Operator Rouse  
 Location NWNW 10-35-65  
 Field \_\_\_\_\_

API Number 05 - 031-40003  
 Permit # \_\_\_\_\_  
 County Denver  
 Inspector EBB

AL/PA/DA Inspection Results:

Well Status:

Pass(Y) ☒ Fail(N) \_\_\_\_\_ Date 10 8 92 ND \_\_\_\_\_ DG \_\_\_\_\_ WO \_\_\_\_\_ PR \_\_\_\_\_ SI \_\_\_\_\_ TA \_\_\_\_\_

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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 \_\_\_\_\_ 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 \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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



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