



WELL SITE INSPECTION FORM

9

WELL NAME Tupps 4-32  
OPERATOR Benson Minerals  
LOCATION NWNE 4-35-64W  
FIELD Bear Gulch

API NUMBER 05 - 001 - 8174  
PERMIT NUMBER \_\_\_\_\_  
COUNTY Arkansas  
INSPECTOR Bill Day

AL/PA/DA INSPECTION RESULTS:

WELL STATUS:

PASS(Y) \_\_\_\_\_ FAIL(N)  DATE 11-2-89 FN \_\_\_\_\_ FD \_\_\_\_\_ WO \_\_\_\_\_

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 H&R in process of pulling casing  
Stopped to witness cementing operation