



WELL SITE INSPECTION FORM



265 M/6

Well Name Anderson State API Number 05 - 001 - 5307
Operator Koch Durrill Permit # _____
Location SW 1/4 16 - 25 65 County Adair
Field 3rd Creek Inspector EBB
AL/PA/DA Inspection Results: Well Status: _____
Pass(Y) _____ Fail(N) ✓ Date 12-7-90 FN _____ FD _____ WO _____ PR _____ SI VP

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 _____ Contact _____

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: tank, HT, vault, GL, cant pad
No change

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

NGPA
Filing Fee

Date Check Received

3-30-81

3/1/79

FILING NO(S). 81-200

And/Or

WELL NAME(S) Anderson State #1

Date of Check

3-27-81

Check #

28601

Amt. \$

150.00

Name of Company

Rock Exploration Co.

Maker of Check

Rock Industries, Inc.

Bank Check Issued On

1st National Bank in
Wichita