



WELL SITE INSPECTION FORM
(DRILLING AND PLUGGING)

C

Well Name Kahler 1A API Number 05 - 009 - 5012
Operator Jackson Permit # _____
Location SWNE 9-355-41W County Baca
Field _____ Inspector EBB

AL/PA/DA Inspection Results:

Well Status:

Pass(Y) _____ Fail(N) _____ Date _____ 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: VP Status Date Permit Expired: _____
Hole Plugged: Yes _____ No X Pits Backfilled: Yes _____ No _____
Material Buried: Yes _____ No _____ N/A _____ Site Clean: Yes _____ No _____
Bond Release OK: Yes _____ No X Fed _____ Hole Marker: Yes _____ No _____

Date of Safety/Status Inspection 11-19-91

Comments: GM, wellhead Sep.

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

~~Call~~ Sent
for F4 signed by
Din JACKSON
9/17/92 J

NOT OK FOR BOND RELEASE

10/1/92 . SITE NOT RESTORED

SPL