

## WELL SITE INSPECTION FORM



00264462

Well Name CAREY C #1 API Number 05 - 075 - 06297  
 Operator CHEVRON Permit # \_\_\_\_\_  
 Location NESE29-9N-53W County LOGAN  
 Field MT. HOPE Inspector R. VanSickle  
 AL/PA/DA Inspection Results: Well Status: \_\_\_\_\_  
 Pass(Y) ☒ Fail(N) \_\_\_\_\_ Date 4-18-98 FN \_\_\_\_\_ FD \_\_\_\_\_ WO \_\_\_\_\_ PR \_\_\_\_\_ SI \_\_\_\_\_

=====

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 \_\_\_\_\_ Y \_\_\_\_\_ N \_\_\_\_\_  
 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: 2-21-66 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: FLOWED FIELD.

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