00624649

WELL SITE INSPECTION FORM
(DRILLING AND PLUGGING)

Well Name BARNES # 1-31 API Number 05 - 061 - 6622

Operator LEEDE Permit # 91 1116

Location NW SE 31 17S 41W County KIOWA

Field JACE Inspector SHELTON

AL/PA/DA Inspection Results: Well Status:

Pass(Y)____ Fail(N) N Date 12/18/91 ND____ DG____ WO____ PR____ SI____ TA____

==========

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 12/2/91 Date Permit Expired:_____

Hole Plugged: Yes ✓ No____ NO SURF PLUG 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 12/18/91

Comments: 8 5/8 2 FT BGL, OPEN, HARD PLUG 250 FT DOWN / ALL PITS OPEN, WET / GRASSLAND

Violations: Yes_____ No_____ Notice Sent: Yes_____ No____ Date Sent:_____