



WELL SITE INSPECTION FORM

LOCATION SENE 29-11s-55w
OPERATOR SONIO
WELL NAME *29-8 SELLON

FIELD w/c
COUNTY LINCOLN
PERMIT # 84-124

DATE OF INSPECTION DURING DRILLING: _____

RIG _____ SURFACE CASING: _____ DEPTH: _____
BOP'S _____ RETURNS: _____ WOC: _____
CONTACT _____ CMT VOL: _____
ADEQUATE AQUIFER PROTECTION? _____
COMMENTS _____

DATE OF INSPECTION AFTER COMPLETION: _____

FRACED: YES _____ NO _____ PRODUCTION STRING: _____
WATER DISPOSAL: PITS _____, INJECTED _____, COMMERCIAL _____, UNKNOWN _____, N.A. _____
PITS: PERMIT Y _____ N _____, SKIM TANK Y _____ N _____, DIMENSIONS _____
LEASE SIGN: YES _____ NO _____ TANK ID: YES _____ NO _____ NA _____ FENCED: YES _____ NO _____
SURFACE EQUIPMENT: _____
COMMENTS: _____

DATE OF P&A INSPECTION 11/6/86

PITS BACKFILLED: YES - NO _____ SURFACE RECLAIMED: YES / NO _____
HOLE MARKER: YES _____ NO / SITE CLEAN: YES / NO _____
BOND RELEASE OK: YES / NO _____ LANDOWNER RELEASE: YES _____ NO _____
COMMENTS: 100% LEVEL - FALLOW WHEAT FIELD - OK

DATE OF SAFETY INSPECTION _____

COMMENTS: _____

INSPECTOR R. VACLAVIK

API No. 05-073 6152

P&A Inspected: Yes / No _____