

WELL SITE INSPECTION FORM

LOCATION NENE 6-33S-45WOPERATOR H&M Oil Prod.WELL NAME BISHOP 1-6FIELD STCCOUNTY BACA

DATE OF INSPECTION BEFORE/DURING DRILLING: _____

RIG _____ SURFACE CASING SIZE: _____ DEPTH SET: _____

BOP'S _____ RETURNS: _____ WOC: _____

CONSISTENT WITH APD CASING PROGRAM? _____ CMT VOL: _____

COMMENTS _____

DATE OF INSPECTION BEFORE/DURING/AFTER COMPLETION: _____

PIPE SET? _____ HOLE OPEN? _____ COMPLETION RIG/ACTIVITY _____

COMMENTS: _____

WELLHEAD SYSTEM INSTALLED? _____

TANKS: _____

HEATERS: _____

SKIM PITS: _____

EARTHEN PITS: _____

LEASE SIGN: YES _____ NO _____ TANK ID: YES _____ NO _____ NA _____ FENCED: YES _____ NO _____

COMMENTS: _____

DATE OF A.L./P&A INSPECTION 7/14/88PITS BACKFILLED: YES X NO _____ SURFACE RECLAIMED: YES X NO _____HOLE MARKER: YES _____ NO X SITE CLEAN: YES X NO _____BOND RELEASE OK: YES X NO _____ LANDOWNER RELEASE: YES _____ NO _____COMMENTS: SITE 100% LEVELED - NO SIGN OF WELL.INSP. OKINSPECTOR R. VACLAVIKPERMIT # 87-1069API No. 05-009-06467 P&A Inspection Results: PASS(Y) X FAIL(N) _____

Jim
Forward TO
JEANNE V/A ED
BINKLEY AFTER
REVIEWING. R

RL