

WELL SITE INSPECTION FORM
(DRILLING AND PLUGGING)

Well Name Zorichak #1 Govt API Number 05 - 087 - 5745
Operator (Schio) → Beren Permit # _____
Location NWNE 15-2N-55 County Morgan
Field Zorichak Inspector EBB

AL/PA/DA Inspection Results:

Well Status:

Pass(Y) _____ Fail(N) X Date 10/26/92 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: () _____ BBL'S

Equipment _____ Meter Run: Yes _____ No _____

Bradenhead Press: _____ Fluid: No _____ Yes _____ Type _____ Well Cat. _____

AL/PA/DA Inspection

Date Plugged: Historical 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: Risers & Cement Battery site



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