

KCC OIL/GAS REGULATORY OFFICES

Date: 10-18-12

District: 1

Case #: _____

- New Situation
- Response to Request
- Follow-Up

- Lease Inspection
- Complaint
- Field Report

Operator License No: 7311

API Well Number: 15171-20909-0000

Op Name: Shakespeare O.I. Co Inc

Spot: NW 1/4 SE Sec 26 Twp 16 S Rng 34 E W

Address 1: 202 W. Main St

2000 Feet from N S Line of Section

Address 2: _____

900 Feet from E W Line of Section

City: Salem

GPS: Lat: _____ Long: _____ Date: _____

State: IL Zip Code: 62881-

Lease Name: Janzen Well #: 1-26

Operator Phone #: 618 548-1585

County: Scott

Reason for Investigation:

Alternate II Cementing

Problem:

Persons Contacted:

Findings:

8 7/8 % 264' ; 5 1/2 % 4864 w/ 195 sx. Port Collar % 2410'. TD - 4870'

Allied pumped 350 sx 65/35 ppr 8% gel w/ 500# hulls thru port collar % 2410'. Circulated 50 sx to the pit

Action/Recommendations:

Follow Up Required Yes No

Date: _____

Alternate II Cementing Complete

Verification Sources:

- RBDMS
- T-I Database
- Other: _____
- KGS
- District Files
- TA Program
- Courthouse

Photos Taken: _____

By: Ken Khlite

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

RECEIVED
OCT 19 2012
MP

KCC DODGE CITY

RECEIVED

OCT 25 2012

KCC WICHITA

Form: _____

Handwritten initials

Date: _____

District: _____

License #: _____

Op Name: _____

Spot: _____ Sec _____ Twp _____ S Rng _____ E W

County: _____

Lease Name: _____ Well #: _____

I.D. Sign Yes No

Tank Battery Condition
Condition: Good Questionable Overflowing

Pits, Injection Site
Fluid Depth: _____ ft; Approx. Size: _____ ft. x _____ ft.

Oil Spill Evidence

Abandoned Well Potential Pollution Problem Yes No

Lease Cleanliness
 Very Good Satisfactory Poor Very Bad

Gas Venting Yes No

Pits
Fluid Depth: _____ ft; Approx. Size: _____ ft. x _____ ft.

Saltwater Pipelines
Leaks Visible: Y N Tested for Leaks: Y N

Flowing Holes

TA Wells

Monitoring Records

SWD/ER Injection Well Yes No

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Gauge Connections Yes No

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

API Number	Footages	Spot Location	GPS	Well #	Well Status

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

Form: _____