

KCC OIL/GAS REGULATORY OFFICES

Date: 10/30/12

District: 01

Case #: _____

- New Situation
 Response to Request
 Follow-Up

- Lease Inspection
 Complaint
 Field Report

Operator License No: 9855

API Well Number: 15-135-25.490-00-00

Op Name: Grand Mesa Operating Company

Spot: SW-NE-NE-NW Sec 27 Twp 19 S Rng 23 E / W

Address 1: 1700 N Waterfront Pkwy Bldg. 600

575 (569) Feet from N / S Line of Section

Address 2: _____

2206 (2221) Feet from E / W Line of Section

City: Wichita

GPS: Lat: 38.37650 Long: 99.85374 Date: 10/30/12

State: Kansas Zip Code: 67206 -5514

Lease Name: Hoss Well #: 1-27

Operator Phone #: (316) 265-3000

County: Ness

Reason for Investigation:

Witness Alt. II

Problem:

None cement circulated to surface

Persons Contacted:

Findings:

8-5/8" @ 334'W/200sxs cement
TD @ 4546'
5-1/2" @ 4542'W/125sxs cement
Port Collar @ 1550'W/ 150sxs smd-1/4# flo seal, 2%cc-- 20sxs to pit

Action/Recommendations:

Follow Up Required Yes No

Date: _____

None, cement circulated to surface

Verification Sources:

Photos Taken: _____

<input type="checkbox"/> RBDMS	<input type="checkbox"/> KGS	<input type="checkbox"/> TA Program
<input type="checkbox"/> T-I Database	<input checked="" type="checkbox"/> District Files	<input type="checkbox"/> Courthouse
Other: _____		

By: Michael Maier

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

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KCC WICHITA

Form: _____

MW

Date: 10/30/10

District: 01

License #: 9855

Op Name: 9855

Spot: SW-NE-NE-NW Sec 27 Twp 19 S Rng 23 E W

County: Ness

Lease Name: Hoss Well #: 1-27

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 Ness

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
15-135-25,490-00-00	569FNL 2221FWL	SW-NE-NE-NW	38.37658-99.85374	1-27	New well, Alt, II completed

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Form: _____