

KCC OIL/GAS REGULATORY OFFICES

Date: 6-20-13

District: 1

Case #: _____

New Situation

Lease Inspection

Response to Request

Complaint

Follow-Up

Field Report

Operator License No: 17311

API Well Number: 15-171-20947-00-00

Op Name: Shakespeare Oil Co Inc

Spot: SESESE Sec 9 Twp 16 S Rng 34 E / W

Address 1: 202 W Main St

400 Feet from N / S Line of Section

Address 2: _____

600 Feet from E / W Line of Section

City: Salem

GPS: Lat: _____ Long: _____ Date: _____

State: IL Zip Code: 62881

Lease Name: Tucker Well #: 1-9

Operator Phone #: 618 548-1585

County: Scott

Reason for Investigation:

Alternate II Cmtg

Problem:

Persons Contacted:

Findings:

8% @ 264' w/ 180sx, 5 1/2% @ 4863' w/ 150sx. Port Collar @ 2432',
Allied Cementing pumped 425sx @ 65/35 psi 8% gel w/ 800# hulls
thru port collar. Circulated 30sx to the pit.

Action/Recommendations:

Follow Up Required Yes No

Date: _____

Alternate II Cementing Complete **KCC WICHITA**
JUL 01 2013
RECEIVED

Verification Sources:

Photos Taken: 0

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

By: Ken Jehlik

Retain 1 Copy District Office **RECEIVED**
Send 1 Copy to Conservation Division

JUN 26 2013

KCC DODGE CITY

Form: _____

BAW

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: _____