

KCC OIL/GAS REGULATORY OFFICES

Date: 10/03/13

District: 01

Case #: _____

- New Situation
- Response to Request
- Follow-Up

- Lease Inspection
- Complaint
- Field Report

Operator License No: 3842

API Well Number: 15-101-21945-00-01

Op Name: Larson Engineering, Inc. dba Larson Operating Company

Spot: E/2-SW-SW Sec 9 Twp 18 S Rng 29 E / W

Address 1: 562 W State RD 4

660 (671) Feet from N / S Line of Section

Address 2: _____

990 (1010) Feet from E / W Line of Section

City: Olmitz

GPS: Lat: 38.49847 Long: 100.53667 Date: 10/3/13

State: Kansas Zip Code: 67564 -8561

Lease Name: Patricia Wood Well #: 1-9 OWWO

Operator Phone #: (620) 653-7368

County: Lane

Reason for Investigation:

Witness Alt.II

Problem:

None

Persons Contacted:

Findings:

8-5/8"@334'
TD@4610'
5.5@4609'W/125sxs
Port Collar@2113'W/215sxs-smd-1/4#floseal-@2%cc-15sxs to pit.

Action/Recommendations:

Follow Up Required Yes No

Date: _____

None, Alt.II requirements have been met.

RECEIVED
KANSAS CORPORATION COMMISSION

OCT 10 2013

CONSERVATION DIVISION
WICHITA, KS

Verification Sources:

Photos Taken: 0

- | | | |
|---------------------------------------|----------------------------------------------------|-------------------------------------|
| <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 |
| <input type="checkbox"/> Other: _____ | | |

By: Michael Maier
Michael Maier

RECEIVED

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

OCT - 8 2013

KCC DODGE CITY

Form: _____

ADU

Date: 10/03/13

District: 01

License #: 3842

Op Name: 3842

Spot: E/2-SW-SW Sec 9 Twp 18 S Rng 29 E W

County: Lane

Lease Name: Patricia Wood Well #: 1-9.OWWO

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 Lane

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
15-101-21.945-00-00	671FSL 1010FWL	E/2SWSW	38.49847-100.53667	1-9OWWO	Cement circulated to surface.

Retain 1 Copy District Office
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Form: _____