

KCC OIL/GAS REGULATORY OFFICES

Date: 6-2-14

District: 1

Case #: \_\_\_\_\_

New Situation

Lease Inspection

Response to Request

Complaint

Follow-Up

Field Report

Operator License No: 7311 API Well Number: 15-171-21056-00-00

Op Name: Shakespeare O. Co Inc Spot: SW NW NW Sec 14 Twp 16 S Rng 34  E /  W

Address 1: 202 W. Main St 800 Feet from  N /  S Line of Section

Address 2: 550 Feet from  E /  W Line of Section

City: Salem GPS: Lat: \_\_\_\_\_ Long: \_\_\_\_\_ Date: \_\_\_\_\_

State: IL Zip Code: 62881 Lease Name: Radnor Well #: 2-14

Operator Phone #: 618 548-1585 County: Scott

Reason for Investigation:

Alternate II Cementing

Problem:

\_\_\_\_\_

Persons Contacted:

\_\_\_\_\_

Findings:

8 7/8" @ 251', 5 1/2" @ 4867' w/ 150sx. Port Collar @ 2423'  
TD = 4870'  
Allied Cementing pumped 450sx 65/35 poz 8 bags thru  
port collar. Circulated 50sx to the pit.

Action/Recommendations:

Follow Up Required  Yes  No

Date: \_\_\_\_\_

Alternate II Cementing complete

Received  
KANSAS CORPORATION COMMISSION

JUN 11 2014

CONSERVATION DIVISION  
WICHITA, KS

Verification Sources:

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

Photos Taken: \_\_\_\_\_

By: Ken Jehlitz  
PIRT II

Retain 1 Copy District Office  
Send 1 Copy to Conservation Division

RECEIVED  
JUN 10 2014

KCC DODGE CITY

Form: \_\_\_\_\_

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

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Permit #: \_\_\_\_\_ Pressure - Actual: \_\_\_\_\_ psi; Authorized: \_\_\_\_\_ psi

Gauge Connections  Yes  No

Tubing: \_\_\_\_\_; T/C Annulus: \_\_\_\_\_; C/SP Annulus: \_\_\_\_\_

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API Number	Footages	Spot Location	GPS	Well #	Well Status

Retain 1 Copy District Office  
Send 1 Copy to Conservation Division

Form: \_\_\_\_\_