

KCC OIL/GAS REGULATORY OFFICES

Date: 5-13-15

District: 1

Case #: _____

- New Situation
- Response to Request
- Follow-Up

- Lease Inspection
- Complaint
- Field Report

Operator License No: 4767
 Op Name: Ritchie Exploration, Inc
 Address 1: 8100 E 22nd St N #700
 Address 2: P.O. Box 783188
 City: Wichita
 State: Kansas Zip Code: 67218-
 Operator Phone #: 316 691 9500

API Well Number: 15-203-20304-00-00
 Spot: SW SE SE Sec 8 Twp 17 S Rng 37 E W
391 Feet from N S Line of Section
853 Feet from E W Line of Section
 GPS: Lat: _____ Long: _____ Date: _____
 Lease Name: Biermann Well #: 8 D
 County: Wichita

Reason for Investigation:

Alt II Cementing

Problem:

Persons Contacted:

Findings:

8 1/2 % 256', 5 1/2 % 5035' w/ 175 sk. TD-5044. Port Collar @ 2484.
Consolidated pumped 375 sk 60/40 per 6% gel of 500# bulbs thru port collar.
Circulated 35 sk to the pit.

Received
 KANSAS CORPORATION COMMISSION
MAY 26 2015
 CONSERVATION DIVISION
 WICHITA, KS
5-26-15

Action/Recommendations:

Follow Up Required Yes No

Date: _____

Alternate II Complete

Verification Sources:

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

Photos Taken: _____

By: Ken Septik

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

RECEIVED
MAY 22 2015
 KCC DODGE CITY

SA

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

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: _____