

KCC OIL/GAS REGULATORY OFFICES

Date: 06/22/15

District: 01

Case #: _____

- New Situation
- Response to Request
- Follow-Up

- Lease Inspection
- Complaint
- Field Report

Operator License No: 3842

API Well Number: 15-101-22564-00-00

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

Spot: NW-SE-NW Sec 15 Twp 18 S Rng 30 E / W

Address 1: 562 W State RD 4

3735 Feet from N / S Line of Section

Address 2: _____

3489 Feet from E / W Line of Section

City: Olmitz

GPS: Lat: 38.49230 Long: 100.62524 Date: 6/22/15

State: KS Zip Code: 67564 -8561

Lease Name: Schoepf Well #: 1-15

Operator Phone #: (620) 653-7368

County: Lane

Reason for Investigation:

Witness Alt II

Problem:

None

Persons Contacted:

Tom Larson

Findings:

surface casing: 8.625" at 225' w/170 sx cmt
 Production casing: 5.5" at 4599' w/125 sx cmt
 Port Collar: 2139' w/170 sx cmt to surface/20 to the pit
 TD 4600'
 SMD 1/4# flo-seal by Swift Services

Action/Recommendations:

Follow Up Required Yes No

Date: _____

None, Alt II requirements have been met

Verification Sources:

- RBDMS
- T-I Database
- Other: On-site inspection
- KGS
- District Files
- TA Program
- Courthouse

Photos Taken: _____

By: Larry Harris

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

RECEIVED
 JUN 30 2015
 KCC DODGE CITY

Form: _____

Date: 06/22/15

District: 01

License #: 3842

Op Name: 3842

Spot: NW-SE-NW Sec 15 Twp 18 S Rng 30 E W

County: Lane

Lease Name: Schoepf Well #: 1-15

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