## Well License Suspension / Inspection Report (Initial & Scheduled Inspections

## Report Required by Regulator 30 days from Date of Inspection



## FORM MUST BE COMPLETED IN FULL & SITE PICTURES ATTACHED TO ENSURE SUCCESSFUL REGULATORY REPORTING & SUBMITTED TO CLIENT MAILBOX WITHIN 1 WEEK OF INSPECTION DATE

| 1.0 WELL AND LICENSE DETAILS - All Inspections |                                      |                         |            |        |  |
|--|--------------------------------------|-------------------------|------------|--------|--|
| License Number:                                | 00123456                             | Business Unit:          | CANADA C   | GAS    |  |
| Surface Location:                              | 01-02-03-04W4                        | Team:                   | VALUE CR   | EATION |  |
| Btm Hole Location:                             | 102/01-02-03-04W4/00                 | Field:                  | ATLEE-BUI  | FFALO  |  |
| Rig Release Date:                              | 10-Jan-2006                          | Access Restrictions:    |            |        |  |
| All UWI's Status                               |                                      | Last Volumetric Dt:     | 31-May-200 | 6      |  |
| Suspended?                                     |                                      | No. Yrs. Inactive       | 8.0        |        |  |
| 2.0 WELL LICENSE SUSPENSION DETAILS            |                                      |                         |            |        |  |
| Suspension Date:                               | 10-Jan-2008                          | Routine Suspension: Yes |            |        |  |
| Risk Class:                                    | LOW                                  | Inhibitor Program:      | Both       | Both   |  |
| Well Type:                                     | L2. Gas Wells < 28000 m3/day, Low Ri | sk H2S Cont             | ent (%):   | 0.00   |  |
| Downhole Operation:                            | None (Low risk only)                 | CO2 Cont                | ent (%):   | 0.15   |  |
| Gas Over Bitumen Well? No                      |                                      | Inspection Freq. (yrs): |            |        |  |
| Comments to be Reported to Regulator:          |                                      |                         |            |        |  |

## 3.0 WELL LICENSE SUSPENSION DETAILS UPDATE - Scheduled Inspections

Operations or Lic Susp Details Changed Since Last Inspection?

4.0 WELLSITE INSPECTION DETAILS - All Inspections

| Inspection Details             |                      | Failures Detected |              | Repaired Date  |            |  |
|--------------------------------|----------------------|-------------------|--------------|----------------|------------|--|
| Inspection Date:               |                      |                   |              | Casing:        | Not Tested |  |
| Inspection Reason:             | Scheduled Inspection |                   | Packer/Plug: | Not Tested     |            |  |
| Inspection Outcome:            | Satisfactory         |                   | Wellhead:    | Not Tested     |            |  |
| Packer(s) in Well?             | No                   | Pkr Plug'd?       | No           | Gas Migration: | No         |  |
| Details of Inspection Outcome: |                      | Vent Flow:        |              |                |            |  |

10 minute bubble test of surface casing is required on all inspections. If vent flow detected, the wellhead seals must be pressure tested

| 5.0 AUDIT DETAILS - All Inspections              |         |  |                                 |          |
|--|---------|--|---------------------------------|----------|
| Inspection/Monitoring/Pressure Testing Test Date |         | <u>Wellheads</u>                                   |                                 |          |
| Shut-In Tubing Pressure (kPa):                   | 2144.00 |  | Welded Steel Plate/Wellhead:    | Wellhead |
| Shut-In Casing Pressure (kPa):                   | 2507.00 |  | Wellhead Type:                  |          |
| Annulus/Tubing Pressure (kPa):                   |         |  |                                 |          |
| Wellbore Fluid                                   |         | Wellhead Mainte                                    | nance                           |          |
| Inhibited w/ non-freezing fluid top 2m?          |         |  | Wellhead Leaks:                 | No       |
| <u>Security</u>                                  |         | Sealing Elements Serviced/Pressure To              | ested? No                       |          |
| Wellheads Marked or Fenced: Yes                  |         | Outlets Bull Plugged, Blind Flanges/Needle Valves: |                                 |          |
| Wellheads Visible all Seasons:                   |         | Yes  |                                 | Yes      |
| Well ID Signs in Plain View: Yes                 |         | Yes  | Valves Functional (Open/Close): | Yes      |
| Farming Ops. Restricted Safe Distance: N/A       |         | Greased & Serviced: N/A                            |                                 |          |
| Pumpjacks Left in Secure Condition: N/A          |         | Surface Casing Vent Left Open: No                  |                                 |          |
| Valve Handles Chained/Locked or Removed: Yes     |         | Yes  | Warning Signs? (H2S) N/A        |          |
| Conoral Comments:                                |         | •  | -                               |          |

**General Comments:** 

This well does not have a surf csg vent

| SIGN-OFF                  |                   |                            |
|---------------------------|-------------------|----------------------------|
| Field Personnel Sign-Off  | Engineer Sign-Off | WAM Sign-Off               |
| Inspection Done By:       | Reviewed By:      | Regulatory Submission ID # |
| DEFINITIVE                |                   |                            |
| Pressure Testing Done By: | Results:          | Regulatory Submission Date |
|                           |                   |                            |