



**KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
INSPECTION REPORT FOR LPG
UNDERGROUND STORAGE WELLS**

WELL IDENTIFICATION

Type of inspection:								
Date of inspection:				Time of inspection:				
Well No.				Permit No.				
$\frac{1}{4}$	$\frac{1}{4}$	$\frac{1}{4}$	Section	Township	S	Range	W	County
Company:				Facility:				

INSPECTION INFORMATION

Status of well:		New	Existing
Total depth of well below ground surface (bgs):			
Static groundwater level:			
Casing diameters and depths:	Casing	Diameter	Depth
	Surface:		
	Intermediate:		
	Production:		
Pressures:	Brine (psig):		
	Annulus (psig):		
Field Activity (well installation, workover, testing, logging):			
Condition of wellhead and associated lines, tanks, meters, gauges, warning and detection systems, etc)			

Comments

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Personnel Met During Inspection

Name:	Company:	Title:

Signature of Inspector:

Title:

Date: