	C L A S S I F I C A T I O N	F A C I L I T	H O U R S	Q U A R T E	FIELD TRIP REPOR			
					Name B. W. Weaver	6/20/81	Milas Diakuiak II	
					Time of Departure			
				R H				
				O U R S	In the space below indicate the performed, listing wells or least Signature			
					C, 8-17-31, ARCO 0il & Gas Co	o. J.L.Keel B #7		
					Replaced 3 joints of tubing a	and set packer @ 2896'		
					tested casing to 500 psi, cir	rculated with packer flu	uid.	
					·			
					·			
							9	
							•	
•					·			
					Mileage	Per Diem	Hours	
					UIC	UIC	UIC	
					Other	RFA Other	Other	
					MCDCCCTON		NATURE OF SPECIFIC WELL	
	TYPE INSPECTION INSPECTION PERFORMED CLASSIFICATION						OR FACILITY INSPECTED	
<pre>H + Housekeeping</pre>						ect, facility, or well or into any well. (SWD, 2ndry wells, water flows or pressur	D = Drilling P = Production I = Injection C = Combined prod. inj. operations	
Y = Waterflow M = Mishap or Spill W = Water Contamination O = Other				Spill	R = Inspections relating to Re ion O = Other - Inspections not re Reclamation Fund			
						ndicates some form of enforcement action taken in the ield (show immediately below the letter U, R or O)		