

Incidents/Spills



Well Inspections



Date Mod



API Well No. **30-025-11472-00-00** Owner **KENSON OPERATING COMPANY INC** County **Lea**
Well Name **LANGLIE JAL UNIT** Number **067** Inspect No. **iSAD0104533449**
Well Type **Injection - (All Types)** Well Status **Active**
UL- S-T-R **P - 6 - 25S - 37E** Facility/Project **NA**

Purpose **MIT Witnessed - Bradenhead** Violation? ☐ SNC? ☐ Well Idle ☐ Current Type: **I** Status: **A** Type **DISCONNECTED** Status
Type **MIT Witnessed - Bradenhead** Change ONGARD to...
Notification Type **DISCONNECTED**
Date Performed **03/13/2001** Respondant
Date NOV
Date RmdyReq
Date Extension
Date Passed
Compliance

Failed Items

Comply# IncdntNo Inspector **Buddy Hill** Duration

API Well No. **30-025-11472-00-00** Owner **KENSON OPERATING COMPANY INC** County **Lea**
Well Name **LANGLIE JAL UNIT** Number **067** Inspect No. **iSAD0004514**
Well Type **Injection - (All Types)** Well Status **Active**
UL- S-T-R **P - 6 - 25S - 37E** Facility/Project **NA**

Purpose **MIT Witnessed - Bradenhead** Violation? ☐ SNC? ☐ Well Idle ☐ Current Type: **I** Status: **A** Type **No Flowline** Status
Type **MIT Witnessed - Bradenhead** Change ONGARD to...
Notification Type **No Flowline**
Date Performed **02/28/2001** Respondant
Date NOV
Date RmdyReq
Date Extension
Date Passed
Compliance

Failed Items

Comply# IncdntNo Inspector **Karen Sharp** Duration