Incidents/Spills	M	Well Inspections	By 2 Date M	led
API Well No. 30-025- Well Name J F BL ACE Well Type Injection - (UL- S-T-R C - 21 - 24	All Types)	Owner PRONCHORN MANAGEMEN Number Well Status Active Facility/Project NA		Lea iEL630001593
Purpose Normal Routine Activity Type Routine/Periodic Notification Type Field Visit or Inspection Date Performed Date NOV	Violation P H O T O Zuno Failed	St Year? Respondant PRO No St/1 N/FL te s	Type: Status: A Change ONGARD to NGHORN MANAGEMEN	
Date RmdyReq Date Extension Date Passed Comply#	Incdnt	No Inspector E	L: Gonzales	Duration
Well Name J F BLACK Well Type Injection - (A L-S-T-R C-21-24S rpose	II Types)	Well Status Active Facility/Project NA	Inspect No.	Lea iLWH0025651038 Type Status
be utine/Periodic	H H O T	N million in the second s	Change ONGARD 10 GHORN MANAGEMENT	
Pate Performed 09/12/2 Date NOV 1414 Tate RmdyReq 1414 Tate Extension 1414 Tate Passed 1414	Failed It	o SHUT-IN,DISC te mpliance s	ONNECTED,	
omply#	IncdntNc	how how here here here here here here here her	idy Hill	Duration