

Class I and II Well Inspection Form US Environmental Protection Agency – Region 4 Underground Injection Control Program 61 Forsyth Street SW, MC 9T25, Atlanta, Georgia, 30303 Phone: (404)562-9424				Inspection ID	EPA Well ID#:	K	Y	S	0	9	9	0	0	0	4
Year-Month-Day:					2	0	2	3	–	0	7	–	1	8	
EPA Permit # (or RA):					K	Y	I	0	3	8	9				
					Page	1		Of	2						
Inspector(s): <u>Carl E. Weller</u> (lead), <u>Carol Chen</u> Start Time: <u>11:06 am</u>															
End Time: <u>11:14 am</u>															
Facility Contact Information	Facility Name: <u>Logsdon Valley Oil Co., Inc.</u>														
	Street Address: <u>105 Bedford Court</u>														
	City: <u>Horse Cave</u> County: <u>Hart</u> State: <u>KY</u> Zip: <u>42749</u>														
	Nature of Business: <u>Oil and gas extraction</u>														
	Facility Owner/Operator: <u>Logsdon Valley Oil Co., Inc.</u> Phone: <u>270-537-4288</u>														
	Email: <u>estinson@scrtc.com</u> <u>Spencer Walters scw106@gmail.com</u>														
	Facility Contact (if different): <u>Ellen Stinson, President</u> Phone: <u>270-537-4288</u>														
	O/O Mailing Address: <u>105 Bedford Court</u>														
	City: <u>Horse Cave</u> County: <u>Hart</u> State: <u>KY</u> Zip: <u>42749</u>														
Well Data from File	Well Name & #: <u>Guinn #UA-3</u>														
	Well Type (see table): <u>Enhanced Oil Recovery (EOR)</u> State Permit: <u>77804</u>														
	Latitude (°N): <u>37.175341</u> Longitude (°W): <u>-85.789236</u> Elevation (ft): _____														
	Injection Method (check applicable): ☐ Casing Injector; ☒ Tubing & Packer; ☐ Cemented Injection Tubing														
	PBTB: ☐ Other: _____														
	Total Depth (ft): <u>630'</u> Inner Casing Size (in): <u>4½"</u> Tubing Size (in): _____ Packer Depth (ft): _____														
	Inj. Zone: ☐ Open Hole; ☐ Perforated; Top(ft) _____ Bottom(ft): _____ Max. Injection Pressure (psig): _____														
Field Measurements and Observations	Latitude (°N): <u>37.177528</u> Longitude (°W): <u>-85.78917</u> Elevation (ft): _____														
	EPA GPS ID: <u>SX8123</u> Well Status (see table): <u>AB</u> If not Active, Reported Date Last Active: <u>3/17/2016</u>														
	Nature of Injected Fluid(s) if any: _____														
	General Condition of the Well Site: _____														
	Notes & Comments (include discrepancies from database values): _____														
	<u>Yellow bucket placed over injection well. Wellhead is incomplete. Tubing was damaged/lost.</u>														
	<u>Workover rig is presently onsite.</u> Tubing Gauge: <u>N/A</u>														
	<u>New 4½" internal production casing was</u> Production Gauge: <u>N/A</u>														
	<u>installed. Materials are seen, within the</u> Surface Gauge: <u>N/A</u>														
	<u>casing, two feet down.</u>														
See reverse for additional observations, comments and photo log															
UIC Inspector Name: <u>Carl E. Weller</u>								UIC Inspector Name: <u>Carol Chen</u>							
Signature: <u>CARL WELLER (Affiliate)</u> Digitally signed by CARL WELLER (Affiliate) Date: 2023.08.29 17:44:39 -04'00'								Signature: <u>CAROL CHEN</u> Digitally signed by CAROL CHEN Date: 2023.08.29 19:01:43 -04'00'							
Version 2018-04-18															

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						Page	2		Of	2	

Field Measurements and Observations (Cont.)

(Cont) **Guinn #UA-3** **EPA Permit No. KYI0389** **State Permit No. 77804**

Photo Log

Photographer: **Carl E. Weller** EPA Camera ID: **SX8123**

Photo ID: **217** Time: **11:07 am** Lat (°N): **37.177528** Long (°W): **-85.78917**

Description: **injection well close-up**

Photo ID:	218	Time:	11:07 am	Lat (°N):	37.177532	Long (°W)	-85.78915
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Description:	injection well and workover rig
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Description:			
Photo ID:	Time:	Lat (°N):	Long (°W)

Photo ID: _____ Info: _____ Lat (N): _____ Long (W): _____

Description: _____

Photo ID:	Time:	Lat (°N):	Long (°W):
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Photo ID: _____ Name: _____ Lat (N): _____ Long (W): _____

Description: _____

Description: _____

Photo ID: _____ Time: _____ Lat (°N): _____ Long (°W): _____

Photo ID. _____ Date. _____ Lat (N). _____ Long (W) _____

Descriptions:

Description: _____

Photo ID:	Time:	Lat. (°N):	Long. (°W)
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Photo ID: _____ Time: _____ Lat (N): _____ Long (W): _____

Description: _____

Name: **Carl E. Weller**

Signature: CARL WELLER (Affiliate) Digitally signed by CARL WELLER (Affiliate)
Date: 2023.08.29 17:47:12 -04'00'

Name: **Carol Chen**

Signature: CAROL CHEN Digitally signed by CAROL CHEN
Date: 2023.08.29 19:02:14 -04'00'