

WELL INSPECTION REPORT

INSTRUCTIONS:

1. Complete both pages.
2. Send one electronic copy of this form and supporting technical documentation by email to orogo@gov.nt.ca. If you wish to communicate with OROGO in hard copy, please do so using the courier address found at www.orogo.gov.nt.ca.

WELL INFORMATION

Well Name:	OBSIDIAN ET AL FORT LIARD C-31		
Coordinates: <i>(verify onsite)</i>	Lat:	60° 0' 30"	Long: 123° 36' 36"
	Datum:	NAD83	
Well Operator:	Obsidian Energy	Status:	Suspended
Current Inspection Date:	October 13, 2021	WID:	1907
Previous Inspection Date:	July 14, 2021	Completed in H ₂ S zone?	No; % of H ₂ S: 0

EVALUATION

Site

Accessible for inspection and monitoring?	Yes;
Equipment or debris on site?	Yes; Rig anchors, water source well, piling
Additional clean up required?	No;
Any environmental or safety concerns? (see Note 1)	No;
Number of photos attached? (required)	3 (wellhead, valves, signage and site area, other)

Wellhead

Wellhead accessible for inspection and monitoring?	Yes; Helicopter/winter access
Brush cleared 10m around wellhead?	Yes;
Visible well marker in place?	Yes;
Wellhead chained and locked?	Yes;
Pumpjack secure?	Select
Wellhead valves operate freely?	Yes;
Surface casing vent open?	Yes;
Pressure test well head seal assembly?	Yes; Pass
Pressure rating of all components:	35 MPa
Wellhead schematic attached? (required)	Yes;

SCVF / Gas Migration

Evidence of SCVF? ^{Note 1} No; Passed bubble test

SCVF test conducted? Yes; Pass

Signs of gas migration outside surface casing? ^{Note 1} No;

Gas migration test conducted? Yes; Pass

Well

Does well contain tubing? No;

Does well contain pump and rods? No;

Is there a packer/plug above the perms? No;

Are tapped bull plugs in place? Yes;

Shut in production casing pressure: 13083 kPa ^{Note 2} Shut in intermediate casing pressure: 13100 kPa ^{Note 2}

Shut in production tubing pressure: 13100 kPa ^{Note 2}

Include any other readings taken:
(Use separate page(s) if needed) _____

Note 1: As per Section 75 of the Oil and Gas Drilling and Production Regulations, it is the responsibility of the operator to notify OROGO of any pollution incident as soon as possible.

Note 2: Indicate any change in pressure since last inspection.

COMMENTS:

“I certify on the basis of personal knowledge of operations undertaken at the above named well that the above information is accurate.”

Name	<u>Craig Langford</u>	Phone	<u>(403) 597-0428 Ext</u>
Title	<u>Asset Retirement Advisor</u>	E-Mail	<u>craig.langford@obsidianenergy.com</u>
Operator	<u>Obsidian Energy Ltd</u>	Inspected by	<u>Todd McCracken</u>
Signature	<u><i>Craig Langford</i></u> Responsible Officer of Company	Date	<u>November 22, 2021</u>

OROGO use only

The details of this document have been examined and verified by:

Job Designation _____

Well Identifier _____

Signature _____

Approval Authority

Unique Well Identifier 30 / ____ - ____ - ____ / ____
(eg. 300 / A01 60-00 120-00 / 0)

Date _____



Photograph 1: Wellhead



Photograph 2: Aerial overview of lease



Photograph 3: Water Source Well