

State of West Virginia
DEPARTMENT OF ENERGY
Division of Oil and Gas

Well Operator's Report of Well Work

Farm name: WOLFORD, ROY LEE Operator Well No.: MCCABE #1 447-S

LOCATION: Elevation: 880.00 Quadrangle: WEST UNION
District: WESTUNION County: DODDRIDGE
Latitude: 12830 Feet South of 39 Deg. 22Min. 30 Sec.
Longitude 4210 Feet West of 80 Deg. 47 Min. 30 Sec.

Company: STONEWALL GAS COMPANY
909 E. MAIN ST. P.O. BOX 1575
RICHMOND, VA 23219-1575

Agent: JESSE A. SHELL

Inspector: MIKE UNDERWOOD
Permit Issued: 09/11/90
Well work Commenced: 09-21-90
Well work Completed: 09-27-90

Verbal Plugging
Permission granted on: _____ Rig
Rotary Cable 4994
Total Depth (feet) 50, 125
Fresh water depths (ft) 50, 125

Salt water depths (ft) 165, 640

Is coal being mined in area (Y/N)? N
Coal Depths (ft): 440, 506

Size	Casing & Tubing		Used in		Cement Fill Up Cu. Ft.
	Drilling	in Well	Drilling	in Well	
11 3/4			123	123	75 SKS
8 5/8			1353	1353	300 SKS
4 1/2			4933	4933	715 SKS

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OPEN FLOW DATA

Producing formation BENSON Pay zone depth (ft) 4786
Gas: Initial open flow * MCF/d Oil: Initial open flow 0 Bbl/d
Final open flow 1391 MCF/d Final open flow 0 Bbl/d
Time of open flow between initial and final tests 1 Hours

Static rock Pressure 1500 psig (surface pressure) after 168 Hours
Second producing formation RILEY Pay zone depth (ft) 4359
Gas: Initial open flow * MCF/d Oil: Initial open flow 0 Bbl/d
Final open flow 1391 MCF/d Final open flow 0 Bbl/d
Time of open flow between initial and final tests 1 Hours
Static rock pressure 1500 psig (surface pressure) after 168 Hours

* UNABLE TO DETERMINE DUE TO OPEN FLOW FROM INJUN FORMATION.
NOTE: ON BACK OF THIS FORM PUT THE FOLLOWING: 1). DETAILS OF PERFORATED INTERVALS, FRACTURING OR STIMULATING, PHYSICAL CHANGE, ETC. 2). THE WELL LOG WHICH IS A SYSTEMATIC DETAILED GEOLOGICAL RECORD OF ALL FORMATIONS, INCLUDING COAL ENCOUNTERED BY THE WELLBORE.

For: STONEWALL GAS COMPANY OCT 30 1990
By: *Ray M. Frear, Jr.* RAY M. FREAR, JR.
Date: _____ PETROLEUM ENGINEER

STAGE 2	FRAC	WATER	DATE	HOLES	BBL	BP	ISIP
ZONES	PERFS		01-04-90				
BENSON	4786-4791		20	800		2090	1650
RILEY	4359-4363		16	600		2470	1830
FORMATION	COLOR		HARD/SOFT	TOP	BOTTOM	REMARKS	
FILL AND TREES	GRAY		HARD	0	8	HOLE DAMP @ 50'	
SHALE & CLAY	GRAY		HARD	8	15	GAS CK 1714	NO SHOW
SHALE	GRAY		HARD	15	30		
SAND	BROWN		SOFT	30	70	GAS CK 1869	22/10 W/W
SH & RR	BROWN		SOFT	70	85	GAS CK 1993	30/10 2" W/W
SAND	TAN		SOFT	85	150	GAS CK 2711	24/10 2" W/W
SAND & SHALE	GRAY		SOFT	85	200	GAS CK 3300	30/10 2" W/W
RR	RD		SOFT	150	210		
SAND & SHALE	GRAY		HARD	200	210		
COAL	BLACK		HARD	210	440	GAS CK 4543	30/10 2" W/W
SAND & SHALE	BROWN		SOFT	440	444	GAS CK 4853	50/10 2" W/W
COAL	BROWN		HARD	444	506		
SAND & SHALE	GRAY		SOFT	506	510		
SHALE & RR	GRAY		SOFT	510	657		
SAND & SHALE	BROWN		SOFT	657	745		
SHALE & RR	BROWN		SOFT	745	915		
SAND & SHALE	BROWN		HARD	915	1255		
LITTLE LIME	GRAY		SOFT	1255	1717		
SHALE & SAND	GRAY		SOFT	1717	1728		
BIG LIME	GRAY		HARD	1728	1752		
INJUN	BROWN		HARD	1752	1849		
SAND & SHALE	BROWN		HARD	1849	1955		
GORDON	BROWN		SOFT	1955	2505		
SAND & SHALE	GRAY		SOFT	2505	2515		
SHALE	GRAY		HARD	2515	4028		
RILEY	GRAY		HARD	4028	4365		
SAND & SHALE	BROWN		SOFT	4365	4375		
BENSON	BROWN		SOFT	4375	4795		
SAND & SHALE	GRAY		SOFT	4795	4802		
TD	GRAY		SOFT	4802	5000		

11110

017-3849

Dated 9/11/90

FORM WW-2B

STATE OF WEST VIRGINIA
DEPARTMENT OF ENERGY, DIVISION OF OIL AND GAS
WELL WORK PERMIT APPLICATION

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RECEIVED

1) Well Operator: ⁸⁴⁷ STONEWALL GAS COMPANY 47850 /

AUG 16 1990

2) Operator's Well Number: MCCABE #1 (447-S)

3) Exploration: 880'

4) Well type: (a) Oil or Gas

(b) If Gas: Production Underground Storage
Deep Shallow

5) Proposed Target Formation(s): BENSON 435

6) Proposed Total Depth: 5000' feet

7) Approximate fresh water strata depths: 120', 500', 1300'

8) Approximate salt water depths: 1950'

9) Approximate coal seam depths: N/A

10) Does land contain coal seams tributary to active mine? No

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11) Proposed Well Work: DRILL & STIMULATE

12) CASING AND TUBING PROGRAM

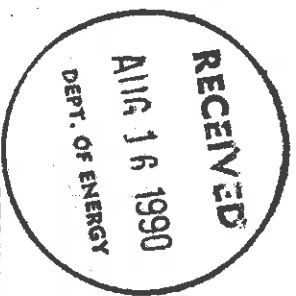
TYPE	SPECIFICATIONS			FOOTAGE INTERVALS		CEMENT Fill-up (cu. ft.)
	Size	Grade	Weight per ft.	For drilling	Left in well	
Conductor	11 3/4"		27#	130'	130' CTS	38CSR18-11
Fresh Water						
Coal						
Intermediate	8 5/8"		20#	1320'	1320' CTS	38CSR18-11
Production	4 1/2"		10.5#	4940'	4940'	38CSR18-11
Tubing						
Liners						

PACKERS : Kind
Sizes
Depths set

For Division of Oil and Gas Use Only

Fee(s) paid: Well Work Permit Reclamation Fund WPCP

Plat WW-9 WW-2B Bond Agent
(Type)



1) Date: AUGUST 14, 1990
2) Operator's well number MC CABE #1 447-S
3) API Well No: 47 - 017 - 3849
State - County - Permit

STATE OF WEST VIRGINIA
DEPARTMENT OF ENERGY, DIVISION OF OIL AND GAS

NOTICE AND APPLICATION FOR A WELL WORK PERMIT

4) Surface Owner(s) to be served:

(a) Name ROY LEE WOLFORD
Address 6816 E. 48TH ST.
INDIANAPOLIS, IN 46226

(b) Name _____
Address _____

(c) Name _____
Address _____

6) Inspector MIKE UNDERWOOD
Address RT 2 BOX 135
SALEM, WV 26426
Telephone (304)-782-1043

(a) Coal Operator:
Name N/A
Address _____

(b) Coal Owner(s) with Declaration
Name SAME AS SURFACE
Address _____

Name _____
Address _____

(c) Coal Lessee with Declaration
Name N/A
Address _____

TO THE PERSON(S) NAMED ABOVE TAKE NOTICE THAT:

Included is the lease or leases or other continuing contract or contracts by which I hold the right to extract oil and gas OR

Included is the information required by Chapter 22B, Article 1, Section 8(d) of the Code of West Virginia (see page 2)

I certify that as required under Chapter 22B of the West Virginia Code I have served copies of this notice and application, a location plat, and accompanying documents pages 1 through _____ on the above named parties, by:

Personal Service (Affidavit attached)

Certified Mail (Postmarked postal receipt attached)

_____ Publication (Notice of Publication attached)

I have read and understand Chapter 22B and 38 CSR 11-18, and I agree to the terms and conditions of any permit issued under this application.

I certify under penalty of law that I have personally examined and am familiar with the information submitted on this application form and all attachments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete.

I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Well Operator STONEMALL GAS COMPANY

By: *Jane Lew*
Its: _____
Address PO DRAWER R
JANE LEW, WV 26378
Telephone 304-884-7881

Subscribed and sworn before me this 14TH day of AUGUST, 1990

Smith
My commission expires MARCH 14, 2000 Notary Public