

DEC 09 1994

State of West Virginia
 Division of Environmental Protection
 Section of Oil and Gas

API # 47- 17-04156
 07-Sep-94

**Permitting
 Office of Oil & Gas**

Well Operator's Report of Well Work

Farm name: SAVORY, TOM ETUX.

Operator Well No.: HAMMOND NO 2

LOCATION: Elevation: 1,035.00 Quadrangle: WEST UNION

District: WEST UNION County: DODDRIDGE
 Latitude: 11590 Feet South of 39 Deg. 22Min. 30 Sec.
 Longitude 520 Feet West of 80 Deg. 45 Min. Sec.

Company: TREK, INC.
 P. O. BOX 5087
 VIENNA, WV 26105-5087

Agent: EDWARD B. KIME

Inspector: MIKE UNDERWOOD
 Permit Issued: 09/06/94
 Well work Commenced: 9/16/94
 Well work Completed: 9/29/94
 Verbal Plugging
 Permission granted on: N/A
 Rotary X Cable Rig
 Total Depth (feet) 5563'
 Fresh water depths (ft) 60'

Salt water depths (ft) 1610'

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

Casing & Tubing Size	Used in Drilling	Left in Well	Cement Fill Up Cu. Ft.
11-3/4	132'	132'	CTS 70 sks
8-5/8	1236'	1236'	CTS 370 sks
4-1/2	5534'	5534'	225 sks

OPEN FLOW DATA

Producing formation Alexander/ Benson Sands 5397-5432
 Gas: Initial open flow 1.600 + MCF/d Oil: Initial open flow 0 Bbl/d 5093-97
 Final open flow _____ MCF/d Final open flow 0 Bbl/d
 Time of open flow between initial and final tests _____ Hours
 Static rock Pressure 1100 psig (surface pressure) after 48 Hours

Second producing formation
 Gas: Initial open flow _____ MCF/d Oil: Initial open flow _____ Bbl/d
 Final open flow _____ MCF/d Final open flow _____ Bbl/d
 Time of open flow between initial and final tests _____ Hours
 Static rock Pressure _____ psig (surface pressure) after _____ Hours

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: TREK, INC.

By: Candace McCloskey
 Date: 12/8/94

Perforated at a depth of 5397-5432, 14 shots. Fraced with 811 barrels, 20# gel water, with 100,000 SCF nitrogen gas, 10,000#, 80/100, 50,500# 20/40 sand. Formation break occurred at 2422 psi, average treatment pressure was 2886, average fluid rate was 24.91 bbls/minute. ISIP 1650 psi.

Perforated the second stage at a depth of 5093-97, 16 shots. Fraced with 731 barrels, 20# gel water, with 90,000 SCF nitrogen gas, 10,000#, 80/100, 44,462# sand. Formation break occurred at 2262 psi, average treatment pressure was 2518, average fluid rate was 23.02 bbls/minute. ISIP 1730 psi, 5 minute shut in psi, 1515.

Permian sands/shales	0	500
Pennsylvanian sands/shales	500	2000
Big Lime	2012	2103
Keener Sand	2104	2128
shale	2129	2131
Big Injun Sand	2132	2208
shale	2209	2353
Weir Sand	2354	2432
shale/siltstone	2433	2551
Gantz Sand	2552	2572
shale/siltstone	2573	2761
Gordon Sand	2762	2811
shale/siltstone	2812	3447
Warren Sand	3448	3500
shale/siltstone	3501	4603
Riley Sand	4604	4670
shale/siltstone	4671	5092
Benson Sand	5093	5097
shale/siltstone	5098	5342
Alexander	5343	5432
shale/siltstone	5433	5563
TD		5563

70231

SEP 06 1994

STATE OF WEST VIRGINIA

DIVISION OF ENVIRONMENTAL PROTECTION, OFFICE OF OIL AND GAS

WELL WORK PERMIT APPLICATION

Office of Oil & Gas

Well Operator: TREK, INC

Operator's Well Number: Hammond #2

Well type: (a) Oil / or Gas X /

(b) If Gas: Production / Underground Storage /
Deep 439 / Shallow X /

Proposed Target Formation(s): Alexander/ Benson

Proposed Total Depth: 5700 feet

Approximate fresh water strata depths: 90'

Approximate salt water depths: 1300'

Approximate coal seam depths: N/A

Does land contain coal seams tributary to active mine? Yes / No X /

Proposed Well Work: Drilling and Completion, including frac.

12)

CASING AND TUBING PROGRAM

TYPE	SIZE	GRADE	WEIGHT per ft. drilling	Left in well	Fill-up (cu. ft.)
Conductor	11-3/4		38	120'	CTS by 38CSR18-11.3
Fresh Water					
Coal					
Intermediate	8-5/8		23#	1200'	CTS by 38CSR18-11.2.2
Production	4-1/2		10.5#	5700'	300 sks by 38CSR18-11.
Tubing					
Liners					

PACKERS : Kind N/A

Sizes

Depths set

For Office of Oil and Gas Use Only

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

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

Issued 09/06/94
Expires 09/06/96

3) Elevation: 1035

RECEIVED
WV Division of
Environmental Protection

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Form WW2-A
(09/87)
File Copy

SEP 06 1994

1) Date: August 25, 1994
2) Operator's Well number Hammond #2
3) API Well No: 47 - 017 - 4156
State - County - Permit

Permitting
Office of Oil & Gas
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 Tom Savory
Address 4354 Kenneth Rd.
Stow, Ohio 44224

(b) Name _____
Address _____

(c) Name _____
Address _____

6) Inspector Mike Underwood
Address Rt. 2 Box 135
Salem, WV 26426
Telephone (304) - 782-1043

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

(b) Coal Owner(s) with Declaration
Name N/A
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 11 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.

By: [Signature]
Its: President
Address P.O. Box 5087
Vienna, WV 26105

Telephone (304) 295-8735 OFFICIAL SEAL
Subscribed and sworn before me this 25 day of NOVEMBER, 1994
Candace D McClellan Notary Public
My commission expires 10/16/2001

STATE OF WEST VIRGINIA
CANDACE D. MCCLELLAN
903 - 41st Street
Vienna, WV 26105
My Commission Expires: October 16, 2001