



west virginia department of environmental protection

Office of Oil and Gas
601 57th Street, S.E.
Charleston, WV 25304
(304) 926-0450
fax: (304) 926-0452

Harold D. Ward, Cabinet Secretary
www.dep.wv.gov

Monday, September 26, 2022
WELL WORK PLUGGING PERMIT
Vertical Plugging

ROSS AND WHARTON GAS COMPANY, INC.
354 MORTON AVE.

BUCKHANNON, WV 26201

Re: Permit approval for H. HARRAH 1
47-019-00437-00-00

This well work permit is evidence of permission granted to perform the specified well work at the location described on the attached pages and located on the attached plat, subject to the provisions of Chapter 22 of the West Virginia Code of 1931, as amended, and all rules and regulations promulgated thereunder, and to any additional specific conditions and provisions outlined in the pages attached hereto. Notification shall be given by the operator to the Oil and Gas Inspector at least 24 hours prior to the construction of roads, locations, and/or pits for any permitted work. In addition, the well operator shall notify the same inspector 24 hours before any actual well work is commenced and prior to running and cementing casing. Spills or emergency discharges must be promptly reported by the operator to 1-800-642-3074 and to the Oil and Gas Inspector.

Upon completion of the plugging well work, the above named operator will reclaim the site according to the provisions of WV Code 22-6-30. Please be advised that form WR-38, Affidavit of Plugging and Filling Well, is to be submitted to this office within 90 days of completion of permitted well work, as should form WR-34 Discharge Monitoring Report within 30 days of discharge of pits, if applicable. Failure to abide by all statutory and regulatory provisions governing all duties and operations hereunder may result in suspension or revocation of this permit and, in addition, may result in civil and/or criminal penalties being imposed upon the operators.

Per 35 CSR 4-5.2.g this permit will expire in two (2) years from the issue date unless permitted well work is commenced. If there are any questions, please feel free to contact me at (304) 926- 0450.

James A. Martin
Chief

Operator's Well Number: H. HARRAH 1
Farm Name: GAULEY RIVER NAT. REC.
U.S. WELL NUMBER: 47-019-00437-00-00
Vertical Plugging
Date Issued:

A blue ink signature of James A. Martin, Chief, is written over the signature line.

P

4701900437 P

PERMIT CONDITIONS

West Virginia Code § 22-6-11 allows the Office of Oil and Gas to place specific conditions upon this permit. Permit conditions have the same effect as law. Failure to adhere to the specified permit conditions may result in enforcement action.

CONDITIONS

1. All pits must be lined with a minimum of 20 mil thickness synthetic liner.
2. In the event of an accident or explosion causing loss of life or serious personal injury in or about the well or while working on the well, the well operator or its contractor shall give notice, stating the particulars of the accident or explosion, to the oil and gas inspector and the Chief within twenty-four (24) hours.
3. Well work activities shall not constitute a hazard to the safety of persons.

09/30/2022

STATE OF WEST VIRGINIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS

APPLICATION FOR A PERMIT TO PLUG AND ABANDON

- 1) Well Type: Gas Oil Water Waste disposal
(Is "Gas, Production or Underground storage") Deep Shallow X

- 2) Location: Elevation 1421' Watercourse Gauley River
District Mountain Cove County Fayette State Summersville Dam

- 3) Well Operator: Ross & Wharton Gas Co. Inc. Designated Agent Mike Ross
Address P.O. Box 219 Address P.O. Box 219
Coalton, WV 26257 Coalton, WV 26257

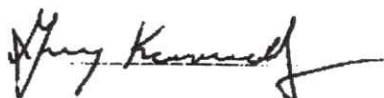
- 4) Oil and Gas Inspector to be notified: Name Gary Kennedy
Address 66 Old Church Lane
Pipestem, WV 25979

- 5) Plug and Seal Contractor: Name N/A
Address

1.) Work Order: *Record Rock Assessments*
The work order for the manner of plugging this well is as follows:
Free point and recover casing's & tubular's, 6% Gel between plug's
Set cement plug 1000' to TD (1301') 100' above top perf
Set 100' cement plug across casing cut
Set plug 500' to 600', (8" casing plug, Fresh Water Protection plug)
Set 100' to 0' surface plug
Tag plug's, as necessary, Set monument with API number

Notification must be given to the district oil and gas inspector 4 hours before beginning of the work can commence.

Work order approved by Inspector



Date

8/29/22

STATE OF WEST VIRGINIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS

APPLICATION FOR A PERMIT TO PLUG AND ABANDON

4) Well Type: Oil ___ / Gas X / Liquid injection ___ / Waste disposal ___
(If "Gas, Production ___ or Underground storage ___) Deep ___ / Shallow X

5) Location: Elevation 1421' Watershed Gauley River
District Mountain Cove County Fayette Quadrangle Summersville Dam

6) Well Operator Ross & Wharton Gas Co. Inc. 7) Designated Agent Mike Ross
Address P.O. Box 219 Address P.O. Box 219
Coalton, WV 26257 Coalton, WV 26257

8) Oil and Gas Inspector to be notified Name Gary Kennedy 9) Plugging Contractor Name N/A
Address 66 Old Church Lane Address _____
Pipestem, WV 25979

10) Work Order: The work order for the manner of plugging this well is as follows:

- Free point and recover casing's & tubular's, 6% Gel between plug's
- Set cement plug 1000' to TD (1301') 100' above top perf
- Set 100' cement plug across casing cut
- Set plug 500' to 600', (8" casing plug, Fresh Water Protection plug)
- Set 100' to 0' surface plug
- Tag plug's, as necessary, Set monument with API number

Notification must be given to the district oil and gas inspector 24 hours before permitted work can commence.

Work order approved by inspector _____ Date _____

OG-10
Rev. - 9-71



STATE OF WEST VIRGINIA
DEPARTMENT OF MINES

Oil and Gas Division
WELL RECORD

RECEIVED
AUG 19 1980

OIL & GAS DIVISION
DEPT. OF MINES

Quadrangle Summersville Dam 7.5'
Permit No. 47-019-0437

Rotary Oil _____
Cable _____ Gas
Recycling _____ Comb. _____
Water Flood _____ Storage _____
Disposal _____ (Kind)

Company Texas International Petroleum Corporation
Address 740 One Valley Sq., Charleston, WV
Farm Hallie Harrah, et al Acres 117.5
Location (waters) Cauley River
Well No. 1 Elev 1421.42'
District Mount Cove County Fayette
The surface of tract is owned in fee by _____
Hallie Harrah, et al
Address Ansted, West Virginia
Mineral rights are owned by Hallie Harrah, et al
Address Ansted, West Virginia
Drilling Commenced 4/30/80 (core hole)
Drilling Completed 6/18/80
Initial open flow N/M cu. ft. --- bbls.
Final production 1409 Mcu. ft. per day N/A bbls.
Well open 4 hrs. before test 180 RP.

| Casing and Tubing | Used in Drilling | Left in Well | Cement fill up Cu. ft. (Sks.) |
|----------------------|------------------|--------------|-------------------------------|
| Size 20-16 | | | |
| Cond. 13-10" 11-3/4" | 22' | 22' | to surface. |
| 9 5/8 | | | |
| 8 5/8 | | | |
| 7 | 449' | 449' | 100 sx. RFC. |
| 5 1/2 | | | |
| 4 1/2 | 1253' | 1253' | 75 sx. Thixotropic |
| 3 | | | |
| 2 | | | |
| Liners Used | | | |

Well treatment details:

Attach copy of cementing record.

Perforated 1098'-1101', 1109'-1120', 1132'-1136', 1 shot per foot. Spotted 500 gal. 15X HCl. Loaded hole. Broke down w/300 PSI. Fraced w/20,000# 80/100 sand & 40,000# 20/40 sand. AIR-23.5 BPM. AIP-1865 PSI. ISIP-1000 PSI, 5 minutes-825 PSI, 15 minutes-625 PSI, 30 minutes-400 PSI.

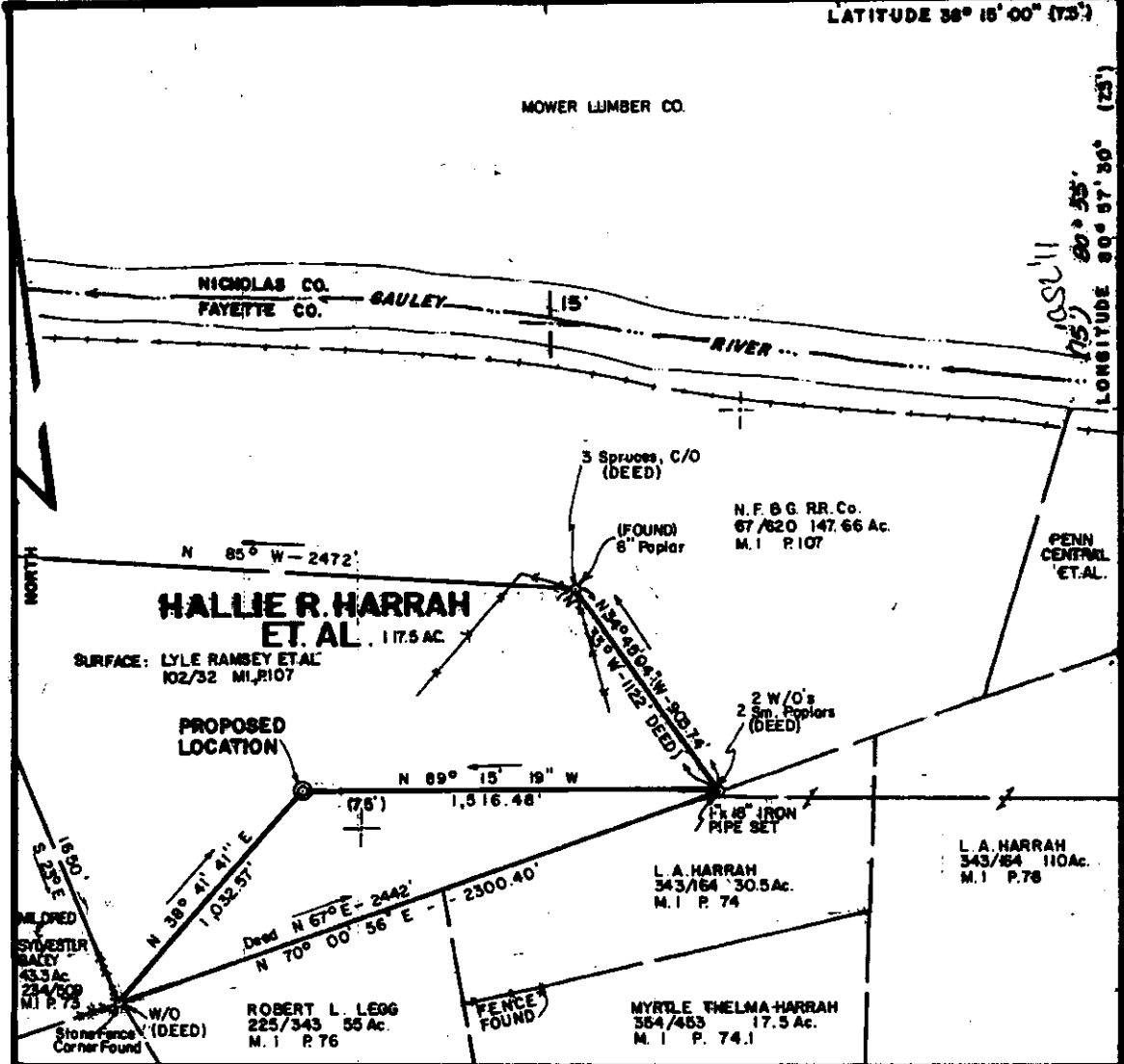
Coal was encountered at None reported Feet _____ Inches _____
Fresh water None recorded Feet _____ Salt Water _____ Feet _____
Producing Sand Ravencliff Depth _____

| Formation | Color | Hard or Soft | Top Feet | Bottom Feet | Oil, Gas or Water | * Remarks |
|------------|----------|--------------|----------|-------------|-------------------|-----------|
| Core hole | | | 0 | 615 | | |
| Sand/Shale | Black | Soft | 615 | 652 | | |
| Sand | Gray | Hard | 652 | 654 | | |
| Sand/Shale | Gray | Medium | 654 | 701 | | |
| Shale | Gray | Soft | 701 | 722 | | |
| Sand/Shale | Gray | Medium | 722 | 739 | | |
| Shale | Gray | Soft | 739 | 746 | | |
| Sand Shale | Lt.Gray | Medium | 746 | 810 | | |
| Shale | Gray | Soft | 810 | 815 | | |
| Sand | Gray | Hard | 815 | 844 | | |
| Sand Shale | Gray | Medium | 844 | 848 | | |
| Shale | Blk/Gray | Soft | 848 | 859 | | |
| Sand/Shale | Gray | Medium | 859 | 863 | | |
| Sand/Shale | Gray/Blk | Soft | 863 | 895 | | |
| Shale/Sand | Gray | Medium | 895 | 960 | | |
| Shale | Gray | Soft | 960 | 1050 | | |
| Shale/Sand | Gray | Hard | 1050 | 1070 | | |
| Ravencliff | Gray | Hard | 1070 | 1199 | | |
| Red Rock | Red | Soft | 1199 | 1301 | | |

1070' - gas test - no show.
1087' gas test - no show.
1118' gas test - 3/10 gas
1156' gas test - 4/10 gas
T.D. - gas test - 5/10 gas

RECEIVED
Office of Oil & Gas
Office of Chief
MAY 09 2005
WV Department of
Environmental Protection

LATITUDE 38° 15' 00" (73')



FILE NO. 448
 DRAWING NO. 1
 SCALE. 1" = 500'
 MINIMUM DEGREE OF ACCURACY IN 5,000
 PROVEN SOURCE OF ELEVATION SW OF RICHMOND CHAPEL EL. 1626

I, THE UNDERSIGNED, HEREBY CERTIFY THAT THIS PLAT IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND SHOWS ALL THE INFORMATION REQUIRED BY LAW AND THE REGULATIONS ISSUED AND PRESCRIBED BY THE DEPARTMENT OF MINES
 (SIGNED) *J.D. Braden* J.D. BRADEN JR. S.R.E. 3064

PLACE SEAL HERE

(-|-) DEMOTES LOCATION OF GAS WELL ON UNITED STATES GEOLOGICAL SURVEY MAP, 7.5 MINUTE SERIES. FORM IV-6 6-78

STATE OF WEST VIRGINIA
 DEPARTMENT OF MINES
 OIL AND GAS DIVISION

DATE FEBRUARY, 1978
 OPERATORS WELL NO. H.H. 71
 API WELL NO. _____
47 - 019 - 0437P
 STATE COUNTY PERMIT

WELL TYPE: OIL X GAS X LIQUID INJECTION _____ WASTE DISPOSAL _____
 (IF "GAS", PRODUCTION _____ STORAGE _____ DEEP _____ SHALLOW X)
 LOCATION: ELEVATION 1421.42 WATER SHED _____ SAULEY RIVER
 DISTRICT MOUNTAIN COVE COUNTY FAYETTE
 QUADRANGLE SUMMERSVILLE DAM (7.5) WINNIE 15'
 SURFACE OWNER LYLE RAMSEY, ET AL. ACREAGE 117.5
 OIL & GAS ROYALTY OWNER HALLIE R. HARRAH ET AL. LEASE ACREAGE 117.5
 LEASE NO. _____
 PROPOSED WORK: DRILL X CONVERT _____ DRILL DEEPER _____ REDRILL _____ FRACTURE OR STIMULATE _____ PLUS OFF OLD FORMATION _____ PERFORATE NEW FORMATION _____ OTHER PHYSICAL CHANGE IN WELL (SPECIFY) _____

PLUG AND ABANDON _____ CLEAN OUT AND REPLUG _____
 TARGET FORMATION RAVENCLIFF ESTIMATED DEPTH 1216'

WELL NO. _____

ROSS & WHARTON GAS COMPANY
 Route 5, Box 29
 Parkersburg, West Virginia 26204

SIGNED AGENT

Same

4701900437P

WW-4A
Revised 6-07

1) Date: July 28, 2022
2) Operator's Well Number
Hallie Harrah #1
3) API Well No.: 47 - 019 - 00437

STATE OF WEST VIRGINIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION, OFFICE OF OIL AND GAS
NOTICE OF APPLICATION TO PLUG AND ABANDON A WELL

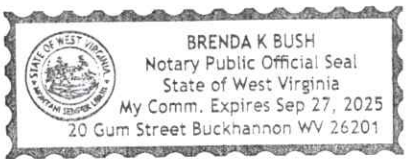
| | |
|---|------------------------------------|
| 4) Surface Owner(s) to be served: | 5) (a) Coal Operator |
| (a) Name <u>James & Delores Hudnall</u> | Name <u>N/A</u> |
| Address <u>223 Stringtown Rd.</u> | Address _____ |
| <u>Hico, WV 25854</u> | _____ |
| (b) Name _____ | (b) Coal Owner(s) with Declaration |
| Address _____ | Name <u>N/A</u> |
| _____ | Address _____ |
| (c) Name _____ | Name _____ |
| Address _____ | Address _____ |
| _____ | _____ |
| 6) Inspector <u>Gary Kennedy</u> | (c) Coal Lessee with Declaration |
| Address <u>66 Old Church Lane</u> | Name <u>N/A</u> |
| <u>Pipestem, WV 25979</u> | Address _____ |
| Telephone <u>1-304-382-8402</u> | _____ |

TO THE PERSONS NAMED ABOVE: You should have received this Form and the following documents:

- (1) The application to Plug and Abandon a Well on Form WW-4B, which sets out the parties involved in the work and describes the well its and the plugging work order; and
- (2) The plat (surveyor's map) showing the well location on Form WW-6.

The reason you received these documents is that you have rights regarding the application which are summarized in the instructions on the reverses side. However, you are not required to take any action at all.

Take notice that under Chapter 22-6 of the West Virginia Code, the undersigned well operator proposes to file or has filed this Notice and Application and accompanying documents for a permit to plug and abandon a well with the Chief of the Office of Oil and Gas, West Virginia Department of Environmental Protection, with respect to the well at the location described on the attached Application and depicted on the attached Form WW-6. Copies of this Notice, the Application, and the plat have been mailed by registered or certified mail or delivered by hand to the person(s) named above (or by publication in certain circumstances) on or before the day of mailing or delivery to the Chief.



Well Operator Ross & Wharton Gas Co. Inc.
 By: [Signature]
 Its: President
 Address P.O. Box 219
Coalton, WV 26257
 Telephone 1-304-472-4289


Subscribed and sworn before me this 25th day of August, 2022
[Signature] Notary Public
 My Commission Expires September 27, 2025

Oil and Gas Privacy Notice

The Office of Oil and Gas processes your personal information, such as name, address and phone number, as a part of our regulatory duties. Your personal information may be disclosed to other State agencies or third parties in the normal course of business or as needed to comply with statutory or regulatory requirements, including Freedom of Information Act requests. Our office will appropriately secure your personal information. If you have any questions about our use of your personal information, please contact DEP's Chief Privacy Officer at depprivacyofficer@wv.gov.

09/30/2022

4701900437 P

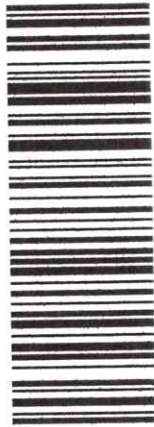
| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY | | | | | | | | | | | | | | | | |
|--|--|--|---|--|---|---|--|---|---|--|---|--|---|---------------------------------------|--|--|--|
| <ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. | <p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> | | | | | | | | | | | | | | | | |
| <p>1. Article Addressed to:</p> <p>James & Delores Hudnall 223 Stringtown Road Hico WV 25854</p>  <p>9590 9402 5645 9308 2153 14</p> | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> | | | | | | | | | | | | | | | | |
| <p>2. Article Number (Transfer from service label) 7021 2720 0003 3793 3760</p> | <p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input checked="" type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table> | <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® | <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ | <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery | <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> Collect on Delivery | <input checked="" type="checkbox"/> Signature Confirmation™ | <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery | <input type="checkbox"/> Insured Mail | | <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | |
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Collect on Delivery | <input checked="" type="checkbox"/> Signature Confirmation™ | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Insured Mail | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) | | | | | | | | | | | | | | | | | |

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL®



7021 2720 0003 3793 3760
7021 2720 0003 3793 3760

| U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only | |
|---|-------------------------------------|
| For delivery information, visit our website at www.usps.com ®. | |
| OFFICIAL USE | |
| <p>Certified Mail Fee \$ 4.00</p> <p>Extra Services & Fees (check box, add fees as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ 3.25</p> <p><input type="checkbox"/> Return Receipt (electronic) \$</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$</p> <p><input type="checkbox"/> Adult Signature Required \$</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$</p> | <p>8/25/22</p> <p>Postmark Here</p> |
| <p>Postage \$ 1.93</p> <p>Total Postage and Fees \$ 8.18</p> | |
| <p>Sent To James & Delores Hudnall</p> <p>Street and Apt. No., or PO Box No. 223 Stringtown Road</p> <p>City, State, ZIP+4® Hico WV 25854</p> | |
| <p>PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions</p> | |



09/30/2022

SURFACE OWNER WAIVER

4701900437P

Operator's Well
Number

47-019-00437 Hallie Hannah #1

INSTRUCTIONS TO SURFACE OWNERS NAMED ON PAGE WW4-A

The well operator named on page WW-4A is applying for a permit from the State to plug and abandon a well. (Note: If the surface tract is owned by more than three persons, then these materials were served on you because your name appeared on the Sheriff's tax ticket on the land or because you actually occupy the surface tract. In either case, you may be the only owner who will actually receive these materials.) See Chapter 22 of the West Virginia Code. Well work permits are valid for 24 months. If you do not own any interest in the surface tract, please forward these materials to the true owner immediately if you know who it is. Also, please notify the well operator and the Office of Oil and Gas.

**NOTE: YOU ARE NOT REQUIRED TO FILE ANY COMMENT.
WHERE TO FILE COMMENTS AND OBTAIN ADDITIONAL INFORMATION:**

Chief, Office of Oil and Gas
Department of Environmental Protection
601 57th St. SE
Charleston, WV 25304
(304) 926-0450

Time Limits and methods for filing comments. The law requires these materials to be served on or before the date the operator files his Application. You have **FIVE (5) DAYS** after the filing date to file your comments. Comments must be filed in person or received in the mail by the Chief's office by the time stated above. You may call the Chief's office to be sure of the date. Check with your postmaster to ensure adequate delivery time or to arrange special expedited handling. If you have been contacted by the well operator and you have signed a "voluntary statement of no objection" to the planned work described in these materials, then the permit may be issued at any time.

Comments must be in writing. Your comments must include your name, address and telephone number, the well operator's name and well number and the approximate location of the proposed well site including district and county from the application. You may add other documents, such as sketches, maps or photographs to support your comments.

The Chief has the power to deny or condition a well work permit based on comments on the following grounds:

- 1) The proposed well work will constitute a hazard to the safety of persons.
- 2) The soil erosion and sediment control plan is not adequate or effective;
- 3) Damage would occur to publicly owned lands or resources;
- 4) The proposed well work fails to protect fresh water sources or supplies;
- 5) The applicant has committed a substantial violation of a previous permit or a substantial violation of one or more of the rules promulgated under Chapter 22, and has failed to abate or seek review of the violation...".

If you want a copy of the permit as it is issued or a copy of the order denying the permit, you should request a copy from the Chief.

VOLUNTARY STATEMENT OF NO OBJECTION

I hereby state that I have read the instructions to surface owners and that I have received copies of a Notice and Application For A Permit To Plug And Abandon on Forms WW-4A and WW-4B, and a survey plat.

I further state that I have no objection to the planned work described in these materials, and I have no objection to a permit being issued on those materials.

FOR EXECUTION BY A NATURAL PERSON
ETC.

FOR EXECUTION BY A CORPORATION,

| | | | | |
|-----------|------|--|-----------|------------|
| | Date | | Name | |
| Signature | | | By | |
| | | | Its | |
| | | | | Date |
| | | | Signature | 09/30/2022 |
| | | | | Date |

STATE OF WEST VIRGINIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS
FLUIDS/ CUTTINGS DISPOSAL & RECLAMATION PLAN

Operator Name Ross & Wharton Gas Co. Inc. OP Code 306580

Watershed (HUC 10) Gauley River Quadrangle Summersville Dam

Do you anticipate using more than 5,000 bbls of water to complete the proposed well work? Yes No

Will a pit be used? Yes No

If so, please describe anticipated pit waste: _____

Will a synthetic liner be used in the pit? Yes No If so, what ml.? _____

Proposed Disposal Method For Treated Pit Wastes:

- Land Application (if selected provide a completed form WW-9-GPP)
- Underground Injection (UIC Permit Number _____)
- Reuse (at API Number _____)
- Off Site Disposal (Supply form WW-9 for disposal location)
- Other (Explain _____)

Will closed loop system be used? If so, describe: _____

Drilling medium anticipated for this well (vertical and horizontal)? Air, freshwater, oil based, etc. _____

-If oil based, what type? Synthetic, petroleum, etc. _____

Additives to be used in drilling medium? _____

Drill cuttings disposal method? Leave in pit, landfill, removed offsite, etc. _____

-If left in pit and plan to solidify what medium will be used? (cement, lime, sawdust) _____

-Landfill or offsite name/permit number? _____

Permittee shall provide written notice to the Office of Oil and Gas of any load of drill cuttings or associated waste rejected at any West Virginia solid waste facility. The notice shall be provided within 24 hours of rejection and the permittee shall also disclose where it was properly disposed.

I certify that I understand and agree to the terms and conditions of the GENERAL WATER POLLUTION PERMIT issued on April 1, 2016, by the Office of Oil and Gas of the West Virginia Department of Environmental Protection. I understand that the provisions of the permit are enforceable by law. Violations of any term or condition of the general permit and/or other applicable law or regulation can lead to enforcement action.

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 thereto 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 or imprisonment.

Company Official Signature Mike Ross

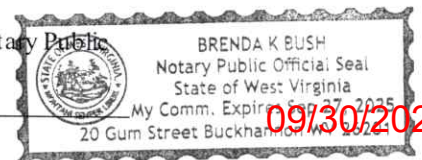
Company Official (Typed Name) Mike Ross

Company Official Title President

Subscribed and sworn before me this 25th day of August, 2022

Brenda K Bush

Notary Public



My commission expires September 27, 2025

09/30/2022

Proposed Revegetation Treatment: Acres Disturbed 1 Prevegetation pH 6.5

Line 2 Tons acre or to correct to pH 6.5

Fertilizer type 10-20-20

Fertilizer amount 500 lbs acre

Mulk Hay Tons/acre

Seed Mixtures

| Temporary | | Permanent | |
|------------------|----------|------------------|----------|
| Seed Type | lbs/acre | Seed Type | lbs/acre |
| Fescue | 30 | Fescue | 30 |
| Contractor's Mix | | Contractor's Mix | |
| | | | |

Attach:

Maps(s) of road, location, pit and proposed area for land application (unless engineered plans including this info have been provided). If water from the pit will be land applied, provide water volume, include dimensions (L, W, D) of the pit, and dimensions (L, W), and area in acres, of the land application area.

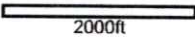
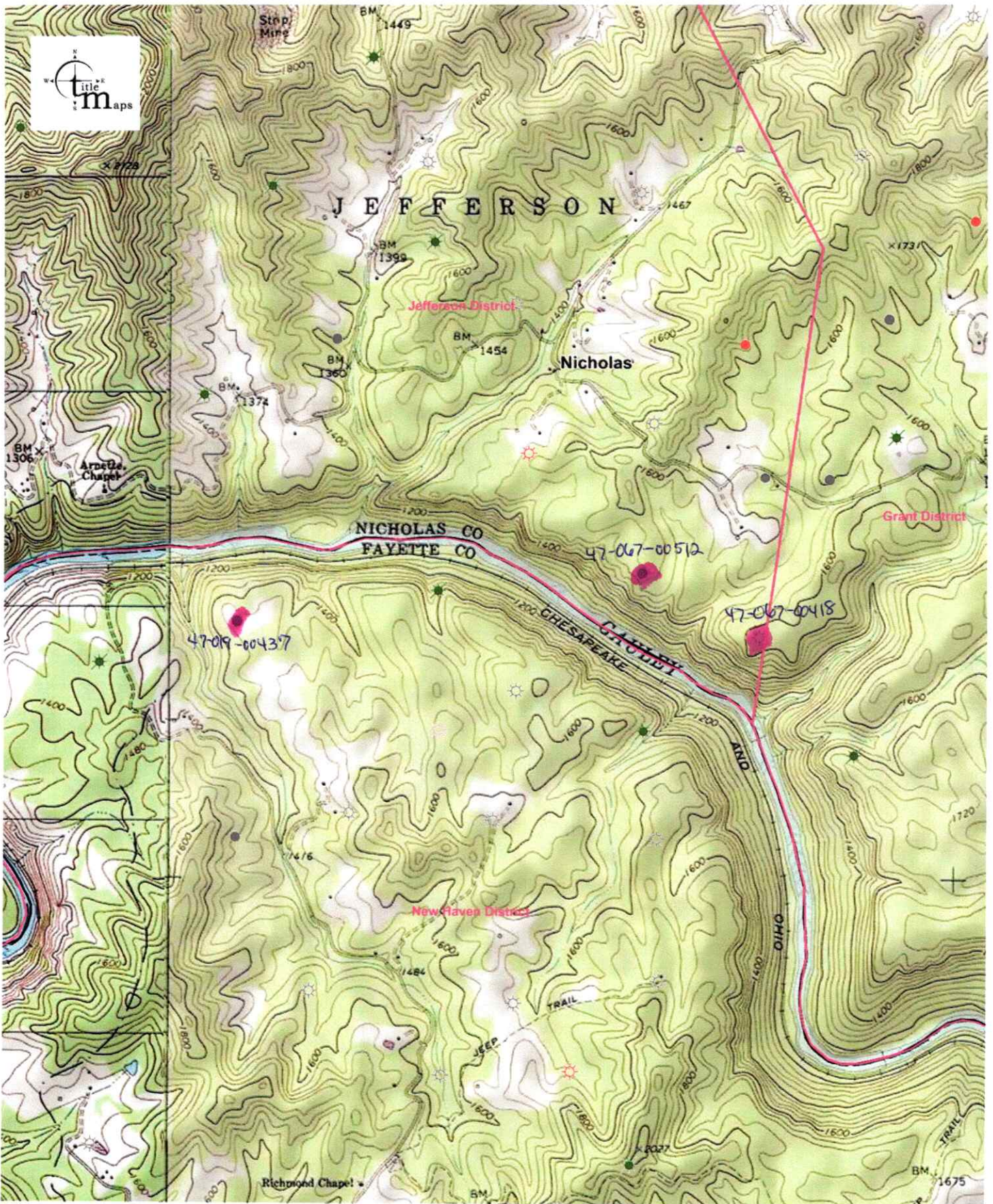
Photocopied section of involved 7.5' topographic sheet.

Plan Approved by: *Henry Kennedy*

Comments: _____

Title: *Inspector* Date: *8/29/22*

Field Reviewed? () Yes () No



Approximate Scale 1:24,000

08/09/2022 - 12:56:03 PM

Disclaimer: The map information shown is from various sources including but not limited to tax maps and state or federal agency web sites. The map information does not represent and should not be relied upon as a land survey or legal depiction of the property or information shown. Title Maps LLC does not warrant the accuracy or correctness of the map information shown hereon.



West Virginia Department of Environmental Protection
Office of Oil and Gas

WELL LOCATION FORM: GPS

API: 47-019-00437 WELL NO.: 1

FARM NAME: Hallie Hannah

RESPONSIBLE PARTY NAME: Mike Ross

COUNTY: Fayette DISTRICT: Mountain Cove

QUADRANGLE: Summersville Dam

SURFACE OWNER: James & Delores Hudnall

ROYALTY OWNER: _____

UTM GPS NORTHING: ~~42301.377~~ 4230138

UTM GPS EASTING: ~~50033.15~~ 500332 GPS ELEVATION: 1421'

The Responsible Party named above has chosen to submit GPS coordinates in lieu of preparing a new well location plat for a plugging permit or assigned API number on the above well. The Office of Oil and Gas will not accept GPS coordinates that do not meet the following requirements:

1. Datum: NAD 1983, Zone: 17 North, Coordinate Units: meters, Altitude: height above mean sea level (MSL) – meters.
2. Accuracy to Datum – 3.05 meters
3. Data Collection Method:
Survey grade GPS ____: Post Processed Differential ____
Real-Time Differential ____
Mapping Grade GPS ____: Post Processed Differential ____
Real-Time Differential ____

4. **Letter size copy of the topography map showing the well location.**
I the undersigned, hereby certify this data is correct to the best of my knowledge and belief and shows all the information required by law and the regulations issued and prescribed by the Office of Oil and Gas.

Mike Ross _____ President _____ Aug. 25, 2022
Signature Title Date



Kennedy, James P <james.p.kennedy@wv.gov>

Plugging permit issued 4701900437

2 messages

Kennedy, James P <james.p.kennedy@wv.gov>

Mon, Sep 26, 2022 at 2:12 PM


To: nreeder@mikerossinc.com, Gary L Kennedy <gary.l.kennedy@wv.gov>, eyoung1@assessor.state.wv.us

To whom it may concern, a plugging permit has been issued for 4701900437.

James Kennedy

WVDEP OOG

2 attachments

 **4701900437.pdf**
2637K

 **IR-8 Blank.pdf**
237K

Mail Delivery Subsystem <mailer-daemon@googlemail.com>

Mon, Sep 26, 2022 at 2:12 PM

To: james.p.kennedy@wv.gov



Address not found

Your message wasn't delivered to **eyoung1@assessor.state.wv.us** because the address couldn't be found, or is unable to receive mail.

The response from the remote server was:

550 5.1.1 <eyoung1@assessor.state.wv.us>... User unknown

Final-Recipient: rfc822; eyoung1@assessor.state.wv.us

Action: failed

Status: 5.1.1

Remote-MTA: dns; state.mx1.wvnet.edu. (129.71.2.216, the server for the domain assessor.state.wv.us.)

Diagnostic-Code: smtp; 550 5.1.1 <eyoung1@assessor.state.wv.us>... User unknown

Last-Attempt-Date: Mon, 26 Sep 2022 11:12:46 -0700 (PDT)

----- Forwarded message -----

09/30/2022

9/26/22, 2:14 PM

State of West Virginia Mail - Plugging permit issued 4701900437

From: "Kennedy, James P" <james.p.kennedy@wv.gov>

To: nreeder@mikerossinc.com, Gary L Kennedy <gary.l.kennedy@wv.gov>, eyoung1@assessor.state.wv.us

Cc:

Bcc:

Date: Mon, 26 Sep 2022 14:12:31 -0400

Subject: Plugging permit issued 4701900437

----- Message truncated -----

09/30/2022