

WR-35
Rev (9-11)

State of West Virginia
Department of Environmental Protection
Office of Oil and Gas
Well Operator's Report of Well Work

PM

DATE: 10/15/2014
API #: 47-033-05189

JK

Farm name: Denzil W. McIntire Operator Well No.: McIntire 2187H

LOCATION: Elevation: 1,339' Quadrangle: Shinnston

District: Clay County: Harrison
Latitude: 8,600' Feet South of 39 Deg. 27 Min. 30 Sec.
Longitude 2,630' Feet West of 80 Deg. 17 Min. 30 Sec.

Company: XTO Energy Inc.

Address:	Casing & Tubing	Used in drilling	Left in well	Cement fill up Cu. Ft.
PO Box 1008, Jane Lew, WV 26378	20"	60'	60'	CTS
Agent: Gary Beall	13 3/8"	307'	307'	578
Inspector: Tim Bennett	Well plugged	Class A	Cement 307'	To Surface
Date Permit Issued: 12/26/2008				
Date Well Work Commenced: 5/9/2010				
Date Well Work Completed: 5/17/2010				
Verbal Plugging: Yes				
Date Permission granted on: 5/17/2010				
Rotary <input checked="" type="checkbox"/> Cable <input type="checkbox"/> Rig <input type="checkbox"/>				
Total Vertical Depth (ft): 307'				
Total Measured Depth (ft): 307'				
Fresh Water Depth (ft.): NA				
Salt Water Depth (ft.): NA				
Is coal being mined in area (N/Y)? N				
Coal Depths (ft.): NA				
Void(s) encountered (N/Y) Depth(s) N				

OPEN FLOW DATA (If more than two producing formations please include additional data on separate sheet)

Producing formation NA Pay zone depth (ft) NA
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

Second producing formation _____ Pay zone depth (ft) _____
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

I certify under penalty of law that I have personally examined and am familiar with the information submitted on this document and all the 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.

[Signature]
Signature

10-17-14
Date

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OCT 20 2014

11/07/2014

33.05189

Were core samples taken? Yes _____ No

Were cuttings caught during drilling? Yes _____ No

Were Electrical, Mechanical or Geophysical logs recorded on this well? If yes, please list _____
NA

NOTE: IN THE AREA BELOW 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 THE TOPS AND BOTTOMS OF ALL FORMATIONS, INCLUDING COAL ENCOUNTERED BY THE WELLBORE FROM SURFACE TO TOTAL DEPTH.

Perforated Intervals, Fracturing, or Stimulating:

NA

Plug Back Details Including Plug Type and Depth(s):

Formations Encountered: _____ Top Depth _____ / _____ Bottom Depth
Surface:

Fill/Shale/Sand/Limestone 0' - 307'

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