

WR-35
Rev. 8/23/13

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

API 47 - 033 - 05961 County Harrison District Clay
Quad Shinnston Pad Name Ice Pad Field/Pool Name Marcellus
Farm name XTO Energy Inc. Well Number Ice West Unit 3H
Operator (as registered with the OOG) XTO Energy Inc. State WV Zip 26378
Address P.O. Box 1008 City Jane Lew

As Drilled location NAD 83/UTM Attach an as-drilled plat, profile view, and deviation survey
Top hole Northing 340091.915 Easting 4770342.110 559138.0
Landing Point of Curve Northing NA Easting NA
Bottom Hole Northing NA Easting NA

Elevation (ft) 1360 GL Type of Well New Existing Type of Report Interim Final
Permit Type Deviated Horizontal Horizontal 6A Vertical Depth Type Deep Shallow
Type of Operation Convert Deepen Drill Plug Back Redrilling Rework Stimulate
Well Type Brine Disposal CBM Gas Oil Secondary Recovery Solution Mining Storage Other _____
Type of Completion Single Multiple Fluids Produced Brine Gas NGL Oil Other _____
Drilled with Cable Rotary

Drilling Media Surface hole Air Mud Fresh Water Intermediate hole Air Mud Fresh Water Brine
Production hole Air Mud Fresh Water Brine
Mud Type(s) and Additive(s)
NA

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Date permit issued 8/27/2019 Date drilling commenced 9/17/19 Date drilling ceased 9/19/19
Date completion activities began _____ Date completion activities ceased _____
Verbal plugging (Y/N) _____ Date permission granted _____ Granted by _____

Please note: Operator is required to submit a plugging application within 5 days of verbal permission to plug

Freshwater depth(s) ft None reported. Open mine(s) (Y/N) depths N
Salt water depth(s) ft None reported. Void(s) encountered (Y/N) depths N
Coal depth(s) ft None reported. Cavern(s) encountered (Y/N) depths N
Is coal being mined in area (Y/N) N

APPROVED

Reviewed by:
K. Willett
04/19/2024

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API 47-033 - 05961

Farm name XTO Energy Inc.

Well number Ice West Unit 3H

| CASING STRINGS | Hole Size | Casing Size | Depth | New or Used | Grade wt/ft | Basket Depth(s) | Did cement circulate (Y/N) * Provide details below* |
|---------------------------|-----------|-------------|-------|-------------|-------------|-----------------|--|
| Conductor | 32" | 24" | 20' | New | PE&B 95# | NA | N |
| Surface | | | | | | | |
| Coal | | | | | | | |
| Intermediate 1 | | | | | | | |
| Intermediate 2 | | | | | | | |
| Intermediate 3 | | | | | | | |
| Production | | | | | | | |
| Tubing | | | | | | | |
| Packer type and depth set | | | | | | | |

Comment Details Conductor cement poured directly into annulus.

| CEMENT DATA | Class/Type of Cement | Number of Sacks | Slurry wt (ppg) | Yield (ft ³ /sks) | Volume (ft ³) | Cement Top (MD) | WOC (hrs) |
|----------------|----------------------|-----------------|-----------------|------------------------------|---------------------------|-----------------|-----------|
| Conductor | A | 2 yards | | | | 0 | 24 |
| Surface | | | | | | | |
| Coal | | | | | | | |
| Intermediate 1 | | | | | | | |
| Intermediate 2 | | | | | | | |
| Intermediate 3 | | | | | | | |
| Production | | | | | | | |
| Tubing | | | | | | | |

Drillers TD (ft) 20' Loggers TD (ft) NA
 Deepest formation penetrated NA Plug back to (ft) NA
 Plug back procedure _____

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Kick off depth (ft) NA

Check all wireline logs run caliper density deviated/directional induction
 neutron resistivity gamma ray temperature sonic

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Well cored Yes No Conventional Sidewall Were cuttings collected Yes No

DESCRIBE THE CENTRALIZER PLACEMENT USED FOR EACH CASING STRING NA

WAS WELL COMPLETED AS SHOT HOLE Yes No DETAILS NA

WAS WELL COMPLETED OPEN HOLE? Yes No DETAILS NA

WERE TRACERS USED Yes No TYPE OF TRACER(S) USED NA

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PERFORATION RECORD

| Stage No. | Perforation date | Perforated from MD ft. | Perforated to MD ft. | Number of Perforations | Formation(s) |
|-----------|------------------|------------------------|----------------------|------------------------|--------------|
| NA | | | | | |
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Please insert additional pages as applicable.

STIMULATION INFORMATION PER STAGE

Complete a separate record for each stimulation stage.

| Stage No. | Stimulations Date | Ave Pump Rate (BPM) | Ave Treatment Pressure (PSI) | Max Breakdown Pressure (PSI) | ISIP (PSI) | Amount of Proppant (lbs) | Amount of Water (bbls) | Amount of Nitrogen/other (units) |
|-----------|-------------------|---------------------|------------------------------|------------------------------|------------|--------------------------|------------------------|----------------------------------|
| NA | | | | | | | | |
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| <u>PRODUCING FORMATION(S)</u> | <u>DEPTHS</u> | |
|-------------------------------|---------------|-----------|
| <u>NA</u> | <u>TVD</u> | <u>MD</u> |
| | | |
| | | |
| | | |

Please insert additional pages as applicable.

GAS TEST Build up Drawdown Open Flow OIL TEST Flow Pump

SHUT-IN PRESSURE Surface NA psi Bottom Hole NA psi DURATION OF TEST NA hrs

OPEN FLOW Gas Oil NGL Water GAS MEASURED BY
NA mcfpd NA bpd NA bpd NA bpd Estimated Orifice Pilot

| <u>LITHOLOGY/ FORMATION</u> | <u>TOP</u> | <u>BOTTOM</u> | <u>TOP</u> | <u>BOTTOM</u> | <u>DESCRIBE ROCK TYPE AND RECORD QUANTITY AND TYPE OF FLUID (FRESHWATER, BRINE, OIL, GAS, H₂S, ETC)</u> |
|---------------------------------|--------------------|--------------------|--------------------|--------------------|--|
| | <u>DEPTH IN FT</u> | <u>DEPTH IN FT</u> | <u>DEPTH IN FT</u> | <u>DEPTH IN FT</u> | |
| | <u>NAME</u> | <u>TVD</u> | <u>MD</u> | <u>MD</u> | |

| | | | | | |
|------------|---|----|---|----|--|
| Soil/Stone | 0 | 20 | 0 | 20 | |
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Please insert additional pages as applicable.

Drilling Contractor Lightning Energy Services LLC
Address 104 Heliport Loop Rd. City Bridgeport State WV Zip 26330

Logging Company NA
Address _____ City _____ State _____ Zip _____

Cementing Company Central Supply Company
Address 4923 Benedum Drive City Bridgeport State WV Zip 26330

Stimulating Company NA
Address _____ City _____ State _____ Zip _____

Please insert additional pages as applicable.

Completed by Tim Sands Telephone 304-517-3546
Signature Tim Sands Title Regulatory Coordinator Date 2/29/24

Submittal of Hydraulic Fracturing Chemical Disclosure Information Attach copy of FRACFOCUS Registry