FILE COPY



| 1) | Date:                  | April | 1,       | 19 85    |
|----|------------------------|-------|----------|----------|
| 2) | Operator's<br>Well No. | Sally | Todd #35 | FORM IV. |
| 3) | API Well No            | 47    | 039-416  | 5        |

County

Permit

State

#### STATE OF WEST VIRGINIA DEPARTMENT OF MINES, OIL AND GAS DIVISION

|                     |              |            |                 | 234             |                   | HON FOR A WEL       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |                                                                   |
|---------------------|--------------|------------|-----------------|-----------------|-------------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------------|
| 4) WELL TY          |              |            |                 |                 |                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DIFICATIONS              | N.                                                                |
|                     | В (І         | "Gas",     | Production 1022 | on              | 9                 | _/ Underground      | storage                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | k of Campbell            | / Shallow/)                                                       |
| 5) LOCATIO          |              | vation:    | Malden          | 1               |                   |                     | Kanawha                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          |                                                                   |
| 6) WELLOR           |              |            |                 | _               | oment             | Co., Inc.           | CONTRACTOR OF THE PARTY OF THE | Quadrangle:Quadrangle:   |                                                                   |
| 6) WELL OP          |              |            | Box 4           |                 |                   | 24235               | Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          | Box 498                                                           |
| Address             |              |            | in, WV          |                 | 23                | 10/200              | Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          | n, WV 25523                                                       |
| 8) OIL & GA         | SINSPECT     |            | REPORT OF THE   | 100             |                   |                     | O) DRILLING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          | The second                                                        |
| Name                |              |            | worth           |                 |                   |                     | 9) DRILLING ( Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                                                                   |
| Address             | Donne        |            | , Box           | -               | 0.3               |                     | Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          | TIO - 1                                                           |
| Addiess             |              |            | WV 26           |                 |                   |                     | Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          | D Com                                                             |
| 10) PROPOSE         | D WELL V     | VORV.      | Drill           | X               | _/ Drill          |                     | / D-d-!!!                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 4 60 1                   | 1 0                                                               |
| 10) PROPOSE         | D WELL V     | VORK:      |                 | And the Control |                   | deeper/ Perfor      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | / Stimulate              | S S                                                               |
|                     |              |            |                 |                 |                   | well (specify)      | ate new formation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | n/                       | F S D                                                             |
| 11) GEOLOGI         | CAL TARC     | ET FOR     |                 |                 | Veir              | i well (specify)    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          | 7 × 8 4                                                           |
| 12) Estima          |              |            |                 |                 | 2077              | feet                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          | - S O F                                                           |
| 13) Approx          |              |            |                 |                 |                   | feet; salt          | 1200                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | £                        | Com my list that                                                  |
| 14) Approx          |              |            |                 |                 |                   |                     | al being mined in th                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | feet.                    | [1] Compension                                                    |
| 15) CASING A        |              |            |                 |                 |                   | 15 CO               | a being inned in tr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ie area? Yes             | No No                                                             |
| CASING OR           | II           |            | IFICATION       | S               |                   | FOOTAGE II          | NTERVALE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | II CEMENT FILL-UP        |                                                                   |
| TUBING TYPE         | Star.        |            | Weight          | 1               | 1                 |                     | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | OR SACKS                 | PACKERS                                                           |
| Conductor           | Size         | Grade      | per ft.         | New             | Used              | For drilling        | Left in well                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | (Cubic feet)             |                                                                   |
| Fresh water         | 8-5/8        | J          | 24              |                 | X                 | 500                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Surface Al.              | Kinds                                                             |
| Coal                | 7,           |            |                 |                 |                   | ,,,,                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Parrace No               | a A                                                               |
| Intermediate        | 7            | J          | 20              |                 | x                 | 1600                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 2.1                      | Sizes                                                             |
| Production          | 42           | J          | 15              | X               | A                 | 2075                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 475 or a                 | 1000000                                                           |
| Tubing              | 42           | -          | 1)              | A               |                   | V 11/20 13 21/10/01 | STEELEN STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 475 gr a                 | Depthologuered                                                    |
| Liners              |              |            |                 |                 |                   |                     | 6. 10432                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | pyr                      | 15.01                                                             |
|                     |              |            |                 | 1123            |                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | /                        | Perforations:                                                     |
|                     |              |            |                 |                 | A168 U            | *                   | (B.10) (0.851H)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | TED ICE IS IS CLEAN      | Top Bottom                                                        |
|                     | 3-27         |            |                 | 2. 3            |                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |                                                                   |
|                     | 1000         |            |                 |                 | l I               | 4 134               | 2115 C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                          |                                                                   |
|                     |              |            |                 |                 |                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |                                                                   |
|                     |              |            |                 |                 | DO TOTAL          | OFFICE USE C        | NLY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                          | he impar tradenders                                               |
|                     |              |            |                 |                 |                   | DRILLING PE         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |                                                                   |
|                     | 17-0         | 39-41      | 65              |                 |                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 7                        | battasia Japwalley                                                |
| Permit number       | 47-0.        | 39-41      | .03             |                 |                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | April 24                 | 19 85                                                             |
|                     |              |            |                 |                 |                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Dat                      |                                                                   |
| This permit cover   | ring the wel | l operato  | r and wel       | l locatio       | on shown          | below is evidence o | f permission grant                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ed to drill in accordan  | ce with the pertinent legal re-<br>l and Gas Inspector, (Refer to |
| No. 8) Prior to th  | e construct  | ion of roa | ads, locati     | ons and         | pits for a        | inv permitted work. | In addition, the w                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | given to the District Oi | and Gas Inspector, (Refer to tractor shall notify the proper      |
| district oil and ga | s inspector  | 24 hours   | before ac       | tual per        | rmitted w         | ork has commenced   | .)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          | actor shall notify the proper                                     |
| The permitted wo    | rk is as des | cribed in  | the Notic       | e and A         | pplication        | , plat, and reclama | tion plan, subject                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | to any modifications a   | nd conditions specified on the                                    |
| reverse hereof.     |              |            |                 |                 |                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          | of the specifical on the                                          |
| Permit expires      | Apri.        | L 24       | 1987            |                 |                   | unless well         | work is commenced                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | prior to that date and   | prosecuted with due diligence.                                    |
|                     |              |            |                 |                 |                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          | THER INSPECTIONS                                                  |
| Bond:               | Agent:       | P          | lat:            | Casin           | g                 | Fee                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                          |                                                                   |
| 83                  | 800)         | 1          | 20/1            | ha              | The second second | 82 7                | 20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          | Rosson: [ Transmit ]                                              |
| 33                  | 700          | 1          | 14              | MA              | 1 10              | 1                   | Vh.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 011                      | 1/01                                                              |
|                     |              |            |                 |                 |                   |                     | lurg                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | wei ,                    | Nusse                                                             |
|                     |              |            |                 |                 |                   |                     | Adn                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | inistrator, Office of O  | il and Gas                                                        |
| NOTE: Keep on       | e copy of t  | his permi  | t posted a      | it the dr       | illing loca       | ition.              | //                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                                                                   |

See the reverse side of the APPLICANT'S COPY for instructions to the well operator.

12/01/2023

1) Date:\_

April 1, . 19 85 Operator's
 Well No.\_\_\_ FORM IV-2(B) FILE COPY



Reverse 3) API Well No. 47 State County

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                                               | NOI                      | AND CAS DIVIS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                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                                                                                                                                                                        | MEMBER                        | DEPA    |                               |                             |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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                                               |                          | I STALMOL A MENERALA (T)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | MAN W WON NOT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | CANAL F                       | A       |                               |                             |                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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                                               | ODIFICATIONS             | AND CONDIT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   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                                                                                                                                                                        |                               |         |                               |                             |                           | 4) WELLT <b>X</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          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| Shallow / /                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | c of Campbells           | Big Ten Ford                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| This part of Form IV-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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| inis part of Form 1v-2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 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IV-9 (Rev 8-81)



DATE 3-26-1985 WELL NO. TODD No. 35

# State of Mest Airginia

API NO. 47 - 039 - 4/63

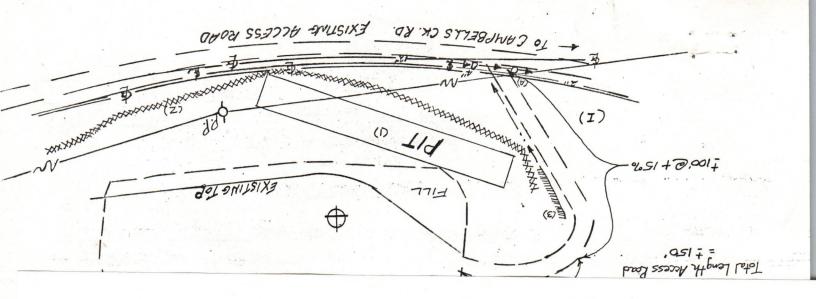
Lloyd Jackson

Bepartment of Mines Gil and Gas Bivision

#### CONSTRUCTION AND RECLAMATION PLAN

COMPANY NAME JACKSON DEVELOPMENT COMPANY DESIGNATED AGENT

| Address Box 498 HAMILIN, WV 25523                                                          | Address Box 498, Hamlin, WV 25523                |
|--------------------------------------------------------------------------------------------|--------------------------------------------------|
| Telephone 304-756-94-10                                                                    | Telephone 304-756-9410                           |
| ANDOWNER SALLIE TODO                                                                       | SOIL CONS. DISTRICT CAPITOL                      |
| Revegetation to be carried out by Llay                                                     | d Jackson (Agent)                                |
| This plan has been reviewed by CA                                                          | PITOD SCD. All corrections                       |
| nd additions become a part of this plan:                                                   | APR. 2 1985                                      |
|                                                                                            | (Date)                                           |
|                                                                                            | 1. C. alford                                     |
|                                                                                            | (SCD Agent) "SEE ATTACHED COMMENTER"             |
| ACCESS ROAD                                                                                | LOCATION                                         |
| tructure Road Culvert (A)                                                                  | Structure Drilling Pit (1)                       |
| pacing Shown on sketch, 12"CMP (MIN)                                                       | Material Earthen                                 |
| age Ref. Manual 2-7                                                                        | Page Ref. Manual NA                              |
| tructure U (B)                                                                             | Structure Sediment and In                        |
|                                                                                            | Structure <u>Sediment Barrier</u> (2)            |
| pacing L F D                                                                               | Material Earthen Berms or Dikes                  |
| age Ref. Manual 0                                                                          | Page Ref. Manual Z-16                            |
| 4 20 7                                                                                     |                                                  |
| ructure (C)                                                                                | Structure Diversion Ditch (3)                    |
| pacing Zo (FU)                                                                             | Material Earthen                                 |
| age Ref. Manual                                                                            | Page Ref. Manual Z-/Z                            |
| commercial timber is to be cut and stacked of cut and removed from the site before dirt wo | ork begins.                                      |
| Management Dates 7                                                                         | America -                                        |
| Treatment Area I                                                                           | Treatment Area II                                |
| or correct to pH 6.5                                                                       | Lime 3 Tons/acre or correct to pH 6.5            |
| ertilizer 500 lbs/acre (10-20-20 or equivalent)                                            | Fertilizer 500 lbs/acre (10-20-20 or equivalent) |
| alch Hoy 2.0 Tons/acre                                                                     | Mulch Hay 2.0 Tons/acre                          |
| ed* Ky 31 Tall Fescue 30 lbs/acre                                                          | Seed* Ky. 31 Tall Fascue 30 lbs/acre             |
| Crownvetch 10 lbs/acre                                                                     | Crownvetch 10 lbs/acre                           |
| Annual Ryegrass 10 lbs/acre                                                                | Annual Ryegrass 10 lbs/acre                      |
| *Inoculate all legumes such as vetch, treformoculate with 3X recommended amount.           | V                                                |
|                                                                                            |                                                  |
| ==::\                                                                                      | REPARED BY BOWMAN LAND SURVEYING COM             |
| MOTES: Please resulest landouners!                                                         | 12/01/2020                                       |
| NOTES: Please request landouners' cooperation to protect new                               | ADDRESS PO BOX6                                  |
| NOTES: Please remiest landounen.                                                           | ADDRESS PO BOXLA  ALUM CREEK, W.UA 2500          |



# Re: Margaret Dickinson Well #35

COAL OWNERS:

Princess Susan Coal Company . 4104-A MacCorkle Ave. . Charleston, WV 25304

The Valley Camp Coal Company 2971 E. Dupont Ave. Shrewsbury, WV 25184

Union Carbide Corp., Metal Div. 32 Sanderson Road Clendenin, WV 25045

| this latiay of | April       | , 19 85      |
|----------------|-------------|--------------|
| My commission  | n expireMar | ch 31, 1987. |
| Barba          |             | and a        |
| Notary Publi   |             | County,      |
| State of       | W. Va.      |              |

Telephone 824-3432 12/01/2023

(Rev 8-81)



# State of Mest Wirginia

Department of Mines Bil und Gas Bivision

| Date     | 6/20/85     |        |
|----------|-------------|--------|
| Operator | 's          |        |
| Well No. | #35         |        |
| Farm g   | Sallie Todd |        |
| APT No 4 | 7 - 039     | - 4165 |

# WELL OPERATOR'S REPORT OF DRILLING, FRACTURING AND/OR STIMULATING, OR PHYSICAL CHANGE

| WELL TYPE: Oil / Gas X / Liquid Injectio (If "Gas," Production X / Undergro                                             | n/ Wast<br>und Storag | e Disposal<br>e/ Deep                | l/<br>o/ Sha                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | illowX_/)                                                  |
|-------------------------------------------------------------------------------------------------------------------------|-----------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| LOCATION: Elevation: 1020' Watershed_                                                                                   | Big Ten Fo            | rk of Campl                          | bells Cre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ek                                                         |
| District: Malden County Kan                                                                                             |                       |                                      | The same of the sa | THE RESERVE THE PERSON NAMED IN COLUMN 2 IS NOT THE OWNER. |
|                                                                                                                         |                       |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
| COMPANY_Jackson Development Company                                                                                     |                       |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
| ADDRESS P.O. Box 498, Hamlin, WV 25523                                                                                  |                       | 1                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 10                                                         |
| DESIGNATED AGENT Lloyd Jackson                                                                                          | Casing                | Used in                              | Left                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Cement<br>fill up                                          |
| ADDRESS P.O. Box 498, Hamlin, WV 25523                                                                                  | Tubing                | Drilling                             | in Well                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Cu. ft.                                                    |
| SURFACE OWNER Sallie Todd                                                                                               | Size<br>20-16         |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
| ADDRESS                                                                                                                 | Cond.                 |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
| MINERAL RIGHTS OWNER SAME                                                                                               | 13-10"                |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
| ADDRESS                                                                                                                 | 9 5/8                 |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
|                                                                                                                         | 8 5/8                 | 462'                                 | 462'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Surface +                                                  |
| OIL AND GAS INSPECTOR FOR THIS WORK Jerry Holcomb ADDRESS Hamlin, WV 25523                                              | 7                     | 1536'                                | 1536'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Surface +                                                  |
| PERMIT ISSUED 4/24/85                                                                                                   | 5 1/2                 |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
|                                                                                                                         | 4 1/2                 |                                      | 1991'                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 161.25 CF                                                  |
| DRILLING COMMENCED 4/85  DRILLING COMPLETED 6/13/85                                                                     | 3                     | 1                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
|                                                                                                                         | 2                     |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
| IF APPLICABLE: PLUGGING OF DRY HOLE ON CONTINUOUS PROGRESSION FROM DRILLING OR REWORKING. VERBAL PERMISSION OBTAINED ON | Liners<br>used        |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
|                                                                                                                         | <u> </u>              | J                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
| GEOLOGICAL TARGET FORMATION Weir                                                                                        |                       |                                      | th 1947                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                            |
|                                                                                                                         | Rotary                |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | XX                                                         |
| Water strata depth: Fresh 93' feet;                                                                                     |                       | THE RESIDENCE OF THE PERSON NAMED IN |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
| Coal seam depths: 48-51', 75-78'                                                                                        | Is coal               | being min                            | ed in the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | area?YES                                                   |
| OPEN FLOW DATA                                                                                                          |                       |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
| Producing formation Big Injun, Upper Wei                                                                                | r Pay                 | zone dep                             | th See                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | back feet                                                  |
| Gas: Initial open flow N.E.G. Mcf/d                                                                                     | Oil: Ini              | tial open                            | flow                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Bb1/d                                                      |
| Final open flow 600 Mcf/d                                                                                               | Fir                   | nal open f                           | low                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Bbl/d                                                      |
| Time of open flow between init                                                                                          | ial and fi            | inal tests                           | h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | nirs                                                       |
| Static rock pressure 350 psig(surface                                                                                   | ce measurer           | ment) afte                           | rhou                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | urs shut in                                                |
| (If applicable due to multiple completion                                                                               |                       |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                            |
| Second producing formation                                                                                              | Pay                   | y zone dep                           | th1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 2/01/2023                                                  |
| Gas: Initial open flow Mcf/d                                                                                            | Oil: In:              | itial open                           | flow                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Bb1/d                                                      |
| Final open flowMcf/d                                                                                                    | Oil: Fi               | nal open f                           | low                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Bb1/d                                                      |
| Time of open flow between ini                                                                                           | tial and f            | inal tests                           | h                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ours                                                       |
| Static rock pressurepsig(surface                                                                                        | e measurem            | ent) after                           | ho                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | urs shut in                                                |

FORM IV-35 (REVERSE)

#### DETAILS OF PERFORATED INTERVALS, FRACTURING OR STIMULATING, PHYSICAL CHANGE, ETC.

Big Injun - 1783 - 1789'; 14 Holes

75 Quality foam frac with 30,000 lbs. 20/40 sand 346,000 Scf  $\mathrm{N}_2$ 

Upper Weir - 1863 - 1872'; 15 Holes

75 Quality foam frac with 30,000 lbs. 20/40 sand 380,000 Scf  $\rm N_{\rm 2}$ 

#### WELL LOG

| FORMATION COLOR HARD OR SOFT                                                                                                                             | TOP FEET                                                                                     | BOTTOM FEET                                                                                  | REMARKS Including indication of all fresh and salt water, coal, oil and gas |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| Surface Slate Coal Sand Coal Sand Slate Sand Slate Sand Slate Sand Slate Sand                                                                            | 0<br>20<br>48<br>51<br>75<br>78<br>111<br>134<br>210<br>375<br>405<br>416                    | 20<br>48<br>51<br>75<br>78<br>111<br>134<br>210<br>375<br>405<br>416<br>443                  | Hole full water @ 93'                                                       |
| Slate Sand Slate Sand Slate Sand Slate Sand Slate Sand Slate Sand Redrock Slate Redrock Slate                                                            | 443<br>500<br>525<br>600<br>930<br>1000<br>1140<br>1160<br>1330<br>1350<br>1360<br>1410      | 500<br>525<br>600<br>930<br>1000<br>1140<br>1160<br>1330<br>1350<br>1360<br>1410<br>1455     | Show oil @ 890-900'<br>Water @ 1050' - hole full                            |
| Redrock Slate Little Lime Pencil Cave Big Lime Grey Injun Red Injun Slate and shells Upper Weir Slate and shells Lower Weir Slate and shells TOTAL DEPTH | 1455<br>1465<br>1542<br>1588<br>1600<br>1769<br>1781<br>1805<br>1856<br>1877<br>1947<br>2015 | 1465<br>1542<br>1588<br>1600<br>1769<br>1781<br>1805<br>1856<br>1877<br>1947<br>2015<br>2090 | Show gas @ 1695 - 1705'  Well logged by:  Allegheny Nuclear Surveys         |

(Attach separate sheets as necessary)

| Jackson Development Co | mpany      |
|------------------------|------------|
| Well Operator          | 12/01/2023 |
| By: Thydylan           |            |
| Date: 7/25/85          |            |

Regulation 2.02(i) provides as follows: Note: "The term 'log' or 'well log' shall mean a systematic detailed geological record of all formations, including and, encountered in the drilling of a well." Permit No. 039-4/165

#### STATE OF WEST VIRGINIA

# DEPARTMENT OF MINES OIL AND GAS WELLS DIVISION



#### INSPECTOR'S WELL REPORT

OIL & GAS DIVISION

ODER Vell OF MINES

| Company Jackson Dow. Co.                                              | CASING AND<br>TUBING | USED IN<br>DRILLING | LEFT IN | PACK         | ERS    |
|-----------------------------------------------------------------------|----------------------|---------------------|---------|--------------|--------|
| Address                                                               | Size                 |                     |         |              |        |
| Farm Sqlly Todd                                                       | 16                   |                     |         | Kind of Pac  | ker    |
| Well No. Todd#35                                                      | 10                   |                     |         | Size of      |        |
| District Mg/den County Kanaulag                                       | 81/4                 |                     |         |              |        |
| Drilling commenced                                                    | 6%                   |                     |         | Depth set    |        |
| D. 111                                                                | 5 3/16               |                     |         |              |        |
| Drilling completed Total depth                                        | 3                    |                     |         | Perf. top    | -      |
| Date shotDepth of shot                                                | 2                    |                     | ,       | Perf. botton | 1      |
| Initial open flow/10ths Water inInch                                  | Liners Used          | V                   | -29     | Perf. top    |        |
| Open flow after tubing/10ths Merc. in Inch                            |                      |                     |         | Perf. bottom | 1      |
| VolumeCu. Ft.                                                         | CASING CEME          | NTED                | SIZE    | No. FT       | Date   |
| Rock pressurelbshrs.                                                  | NAME OF SEI          | RVICE COMPA         | ANY     |              |        |
| Oilbbls., 1st 24 hrs.                                                 | COAL WAS EN          | COUNTERED           | AT      | _FEET        | INCHES |
| Fresh waterfeetfeet                                                   | FEET                 | INCE                | IES     | _FEET        | INCHES |
| Salt water <u>feet</u> <u>feet</u>                                    | FEET                 | INCE                | IES     | FEET         | INCHES |
| Drillers' Names Darrell Skeeps Dri                                    | 'Hing Co.            |                     |         |              |        |
| Remarks: Moved Pigon location 85" Casing & Cement- down at 10:30 a-m. | on 4-36              | -85. 70<br>1005KS   | Beg. 1  | 5et-2/6      | 5 0 9  |

5-3-85

Coulos w. Traight 120

Form 26 2/16/82

#### STATE OF WEST VIRGINIA

#### **DEPARTMENT OF MINES**

#### OIL AND GAS WELLS DIVISION

#### **INSPECTOR'S PLUGGING REPORT**

| Permit No.      | 0 8 10    |                        |                    |                       | W               | /ell No  |      |
|-----------------|-----------|------------------------|--------------------|-----------------------|-----------------|----------|------|
| COMPANY         | the grant |                        |                    | ADDRESS               |                 | Y Y.     | - 54 |
|                 |           |                        |                    | C                     |                 |          |      |
|                 |           |                        |                    |                       | his Color Color |          |      |
| Liner           | Loc       | cation                 | Amount             | Packer                | Loc             | ation    | .,.  |
| PLUG            | SS USED A | ND DEPTH PLACED        |                    | BRIDGES               | CASIN           | G AND TU | BING |
| CEMENT-THICK    | KNESS     | WOOD-SIZE              | LEAD               | CONSTRUCTION-LOCATION | RECOVERED       | SIZE     | LOST |
|                 | *         |                        |                    | Complete Section      |                 | 17/2     | 1111 |
|                 |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       | -               |          | -    |
|                 |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       |                 | -        |      |
|                 |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       |                 | 1.0      |      |
|                 |           |                        |                    |                       |                 |          |      |
| Drillers' Names |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       |                 |          |      |
| Remarks:        |           |                        |                    |                       |                 |          |      |
| Nomarks.        |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       | 15 0 0 0        | * * *    |      |
|                 |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       |                 |          |      |
|                 |           |                        |                    |                       |                 |          |      |
|                 | I         | hereby certify I visit | ted the above well | on this date.         |                 |          |      |
| DATE            |           |                        |                    |                       |                 |          |      |

DISTRICT WELL INSPECTOR 1/2023

#### STATE OF WEST VIRGINIA

# DEPARTMENT OF MINES

OIL AND GAS WELLS DIVISION



## INSPECTOR'S WELL REPORT & GAS DIVISION

Permit No. 039-4/65

DEPT. OF WINES

| Company Jackson Dev. Co.                  | CASING AND<br>TUBING | USED IN<br>DRILLING | LEFT IN<br>WELL |        | PACKERS   |
|-------------------------------------------|----------------------|---------------------|-----------------|--------|-----------|
| Address                                   | Size                 |                     |                 |        | -         |
| Farm 50/1 y Todd                          | 16                   |                     |                 | Kind   | of Packer |
| Well No. Todd# 35                         | 13                   |                     |                 | C:     | -6        |
| District Malden County Kanawha            | 81/4                 | s- 18 eu 7% - L     |                 | Size   | of        |
| Drilling commenced                        | 6%                   |                     |                 | Depti  | n set     |
| Drilling completedTotal depth             | 5 3/16               |                     |                 |        |           |
|                                           | 3                    |                     |                 | Perf.  | top       |
| Date shotDepth of shot                    | 2                    |                     |                 | Perf.  | bottom    |
| Initial open flow/10ths Water inInch      | Liners Used          |                     |                 | Perf.  | top       |
| Open flow after tubing/10ths Merc. inInch |                      |                     |                 | Perf.  | bottom    |
| VolumeCu. Ft.                             | CASING CEMEN         | ITED                | SIZE            | No.    | FTDate    |
| Rock pressurelbshrs.                      | NAME OF SER          | VICE COMPA          | NY              |        |           |
| Oilbbls., 1st 24 hrs.                     | COAL WAS EN          | COUNTERED           | AT              | _FEET_ | INCHES    |
| Fresh water <u>feet</u> feet              | FEET                 | INCH                | ES              | FEET_  | INCHES    |
| Salt water <u>feet</u> <u>feet</u>        | FEET_                | INCH                | ES              | FEET_  | INCHES    |
| Drillers' Names Darrell Steens Drill      | ing Co.              |                     |                 |        |           |
| Remarks: Drilling at 845 + 60             | ailingou             | thole.              |                 |        |           |

5-9-85 BATE Carlos w. Hungling 1/2022

Form 26 2/16/82

OIL & GAS DIVISION

# STATE OF WEST VIRGINIA DEPARTMENT OF MINES

OIL AND GAS WELLS DIVISION

## **INSPECTOR'S PLUGGING REPORT**

|                                       |                        |                     | ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                   |       |      |
|---------------------------------------|------------------------|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|-------|------|
| ARM                                   |                        | DISTRICT            | C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | OUNTY             | 7     |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
| iner L                                | ocation                | Amount              | Packer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Loc               | ation | 100  |
| PLUGS USED                            | AND DEPTH PLACED       |                     | BRIDGES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | CASING AND TUBING |       |      |
| CEMENT-THICKNESS                      | WOOD-SIZE              | LEAD                | CONSTRUCTION-LOCATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | RECOVERED         | SIZE  | LOST |
|                                       |                        |                     | The court of the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                   | 1989  |      |
| × ×                                   |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1                 |       |      |
|                                       |                        |                     | A Company of the Comp |                   |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | -     |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1                 |       |      |
| B                                     |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
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|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
| · · · · · · · · · · · · · · · · · · · |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
| Orillers' Names                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
| Remarks:                              | *                      |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ×                 |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | •     |      |
|                                       | ,                      |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
|                                       |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |
|                                       | I hereby certify I vis | sited the above wel | ll on this date.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                   |       |      |
| DATE                                  |                        |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |       |      |

#### **DEPARTMENT OF MINES** OIL AND GAS WELLS DIVISION



# INSPECTOR'S WELL REPORT DEPT. OF WINES

OIL & GAS DIVISION

| Permit No. 039-4/165                      |                      | E military          | Oil o        |          |         |
|-------------------------------------------|----------------------|---------------------|--------------|----------|---------|
| Company Jackson Dev. Co.                  | CASING AND<br>TUBING | USED IN<br>DRILLING | LEFT IN WELL |          | PACKERS |
| Address                                   | Size                 |                     |              |          |         |
| Farm 59/14 Todd                           | 16                   |                     |              | Kind of  | Packer  |
| Well No. Todd # 35                        | 10                   |                     |              | Size of  | B       |
| District Malden County Kanawha            | 81/4                 |                     |              |          |         |
| Drilling commenced                        | 65%                  |                     |              | Depth s  | et      |
|                                           | 5 3/16               |                     |              |          |         |
| Drilling completedTotal depth             | 3                    |                     |              | Perf. to | p       |
| Date shotDepth of shot                    | 2                    |                     |              | Perf. bo | ttom    |
| Initial open flow/10ths Water inInch      | Liners Used          |                     | - ~          |          | )       |
| Open flow after tubing/10ths Merc. inInch |                      |                     |              | Perf. bo | ttom    |
| VolumeCu. Ft.                             | CASING CEMEN         | NTED                | SIZE         | No. F?   | CDate   |
| Rock pressure lbs. hrs.                   | NAME OF SER          | VICE COMPA          | ANY          |          |         |
| Oilbbls., 1st 24 hrs.                     | COAL WAS EN          | COUNTERED           | AT           | _FEET    | INCHES  |
| Fresh water <u>feet</u> <u>feet</u>       | FEET_                | INCI                | HES          | _FEET    | INCHES  |
| Salt waterfeetfeet                        | FEET_                | INCI                | HES          | _FEET    | INCHES  |
| Drillers' Names Dathell Skeens Dr         | illing Con           |                     |              |          |         |
| Remarks: 1225 Deep + 691                  | ling ou              | ut ho               | le.          | P        |         |

Form 26 2/16/82

#### STATE OF WEST VIRGINIA

#### **DEPARTMENT OF MINES**

#### OIL AND GAS WELLS DIVISION

#### **INSPECTOR'S PLUGGING REPORT**

| COMPANY               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  | ADDRESS               |                                                  |                                              |      |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------|--------------------------------------------------|----------------------------------------------|------|
| FARM                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | DISTRICT _       | C                     | OUNTY                                            |                                              |      |
| Filling Material Used |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                       |                                                  |                                              |      |
| iner La               | ocation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Amou             | nt Packer             | Loc                                              | ation                                        | 377  |
| PLUGS USED            | AND DEPTH PLACED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                  | BRIDGES               | CASING                                           | S AND TU                                     | BING |
| CEMENT-THICKNESS      | WOOD-SIZE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | LEAD             | CONSTRUCTION-LOCATION | RECOVERED SIZE L                                 |                                              | LOST |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                       |                                                  |                                              |      |
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|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | -                |                       |                                                  |                                              |      |
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|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                       |                                                  |                                              |      |
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|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                       |                                                  |                                              |      |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  | ,                     |                                                  |                                              |      |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                       |                                                  |                                              |      |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                       | -                                                |                                              |      |
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|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                       |                                                  |                                              |      |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                       |                                                  |                                              |      |
| Orillers' Names       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  | . 1                   |                                                  |                                              |      |
|                       | the decrease of the transport of the section of the |                  |                       |                                                  | Final Connection Service Connection Contract |      |
| Remarks:              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                       |                                                  |                                              |      |
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|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                       |                                                  |                                              |      |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                  |                       |                                                  |                                              |      |
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|                       | I hereby certify I vis                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ited the above w | vell on this date     |                                                  |                                              |      |

DISTRICT WELL INSPECTOR 1/2023

Address

Date shot

Volume\_

Oil

Rock pressure\_\_\_\_

Fresh water\_

Salt water\_

#### STATE OF WEST VIRGINIA

# DEPARTMENT OF MINES



#### INSPECTOR'S WELL REPORT OIL & GAS DIVISION

Permit No. 039-4/65

Farm 591/4 Todd

Well No Todd # 35

Drilling commenced\_\_\_

Company Jackson Dev. Cu.

District Malden County Kenauha

Depth of shot

Initial open flow\_\_\_\_\_/10ths Water in\_\_\_Inch

Open flow after tubing \_\_\_\_\_/10ths Merc, in\_\_\_\_\_

Drilling completed\_\_\_\_\_Total depth

DEPT. OF MINES

CASING AND USED IN LEFT IN PACKERS Size Kind of Packer\_\_\_\_ Size of 81/4\_ 65% Depth set\_\_\_\_ 5 3/16\_ Perf. top\_\_\_\_ Perf. bottom\_\_\_ Liners Used Perf. top\_\_\_\_ Perf. bottom\_ CASING CEMENTED\_\_\_\_ SIZE No. FT Date NAME OF SERVICE COMPANY COAL WAS ENCOUNTERED AT\_\_\_\_ \_FEET\_\_ \_INCHES FEET INCHES FEET\_ INCHES

INCHES

Drillers' Names Darrell Skeens Drilling Co.

feet

Remarks:

1530 Deep + bailing out hole.

bbls., 1st 24 hrs.

Cu. Ft.

hrs.

feet

feet

FEET

5-23-85

Carlos w Hayeling

FEET\_\_\_\_

INCHES

Form 26 2/16/82

OIL & GAS DIVISION

#### STATE OF WEST VIRGINIA

#### **DEPARTMENT OF MINES**

#### OIL AND GAS WELLS DIVISION

## **INSPECTOR'S PLUGGING REPORT**

| Permit No.            | The The                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                     | Well No.              |                    |          |      |  |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------------------|--------------------|----------|------|--|
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     | ADDRESS               |                    |          |      |  |
| FARM                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | DISTRICT            | C                     | COUNTY             |          |      |  |
| Filling Material Used |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
| Liner Lo              | cation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Amount              | Packer                | Loc                | ation    |      |  |
| PLUGS USED A          | AND DEPTH PLACED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                     | BRIDGES               | CASIN              | G AND TU | BING |  |
| CEMENT-THICKNESS      | WOOD-SIZE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | LEAD                | CONSTRUCTION-LOCATION | RECOVERED SIZE LOS |          | LOST |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    | 10 37 1  | ail  |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       | -                  |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       | -                  |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       | -                  |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
| Drillers' Names       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | \$                  |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
| Remarks:              | Personal de la constante de la |                     |                       |                    | _X       |      |  |
| terrary.              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                     |                       |                    |          |      |  |
|                       | hereby certify I vis                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ited the above well | on this date.         |                    |          |      |  |
| DATE                  | nereby certify I Vis                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ited the above well | on this date.         |                    |          |      |  |

DISTRICT WELL INSPECTOR 1/2023

#### STATE OF WEST VIRGINIA

# DEPARTMENT OF MINES OIL AND GAS WELLS DIVISION



#### INSPECTOR'S WELL REPORT

OIL & GAS DIVISION

| Permit No. 039-4/65 | Permit | No. O | 39- | 41 | 165 |
|---------------------|--------|-------|-----|----|-----|
|---------------------|--------|-------|-----|----|-----|

DEPT. OF MINES

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                      |                     | ( 4.11                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                |      |
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| Company Jack Son Dev- Co.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | CASING AND<br>TUBING | USED IN<br>DRILLING | LEFT IN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | PACKERS        |      |
| Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Size                 |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |      |
| Parm 59/14 Todd                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 16                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Kind of Packer |      |
| Well No Todd # 35                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 13                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |      |
| and the second s | 10                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Size of        |      |
| District Malden County Kangush                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 81/4                 |                     | And the property of the second |                |      |
| Drilling commenced                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 6%                   |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Depth set      |      |
| Drilling completedTotal depth                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 5 3/16               |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 3                    |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Perf. top      | -    |
| Date shotDepth of shot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 2                    |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Perf. bottom   |      |
| Initial open flow/10ths Water inInch                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Liners Used          |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Perf. top      |      |
| Open flow after tubing /10ths Merc. in Inch                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                      |                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Perf. bottom   |      |
| VolumeCu. Ft.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | CASING CEME          | NTED                | SIZE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | No. FTI        | Date |
| Rock pressurelbshrs.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | NAME OF SEF          | RVICE COMPA         | NY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                |      |
| Oilbbls., 1st 24 hrs.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | COAL WAS EN          | COUNTERED           | AT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | _FEETINC       | IES  |
| Fresh water <u>feet</u> <u>feet</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | FEET_                | INCH                | ES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | FEETINC        | HES  |
| Salt water <u>feet</u> <u>feet</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | FEET_                | INCH                | ES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | FEETINC        | IES  |
| Drillers' Names Darrell Skeens                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Drilling             | e Co.               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |      |
| Remarks: 5et1542'0f7'eq                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 25,00 9              | -Ceme               | nted                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | with           |      |
| 150 SKS- C/955A 39                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | hee a                | haulot              | ted to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 5047900        |      |
| Plug down at 1:30                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | D.00.                | 1.60/9/             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |      |

5-99-85 BATE Carlos w. Happagaga

Form 26 2/16/82

#### STATE OF WEST VIRGINIA

#### **DEPARTMENT OF MINES**

#### OIL AND GAS WELLS DIVISION

## **INSPECTOR'S PLUGGING REPORT**

OIL & GAS DIVISION

| Permit No. 11/11/10   |                        |                   | Well No               |                   |                                       |      |  |  |
|-----------------------|------------------------|-------------------|-----------------------|-------------------|---------------------------------------|------|--|--|
|                       |                        |                   | ADDRESS               |                   |                                       |      |  |  |
| ARM                   | _                      | DISTRICT _        | COUNTY                |                   |                                       |      |  |  |
| Filling Material Used |                        |                   |                       |                   |                                       |      |  |  |
| Liner L               | ocation                | Amour             | nt Packer             | Loc               | cation                                | 11-2 |  |  |
| PLUGS USED            | AND DEPTH PLACED       |                   | BRIDGES               | CASING AND TUBING |                                       |      |  |  |
| CEMENT-THICKNESS      | WOOD-SIZE              | LEAD              | CONSTRUCTION-LOCATION | RECOVERED SIZE    |                                       | LOST |  |  |
|                       |                        |                   | Sallania .            |                   |                                       | 100  |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       | -                 |                                       |      |  |  |
|                       |                        |                   |                       | -                 |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
| Drillers' Names       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   | TALIN STREET, THE SHOP OF THE SHOP OF |      |  |  |
| Remarks:              |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       |                        |                   |                       |                   |                                       |      |  |  |
|                       | I hereby certify I vis | ited the above we | ell on this date.     |                   |                                       |      |  |  |
| DATE                  |                        |                   |                       |                   |                                       |      |  |  |

#### STATE OF WEST VIRGINIA

# DEPARTMENT OF MINES



OIL & GAS DIVISION

## DEPT. OF MINES

#### INSPECTOR'S WELL REPORT

Permit No. 039-41/65 Oil or Gas Well\_\_\_\_ CASING AND USED IN LEFT IN PACKERS Company Jack Son Dew Co. Size Kind of Packer\_\_\_\_ Farm Sally Todd Size of County Languing Depth set\_\_\_\_ Drilling commenced\_ 5 3/16\_ Drilling completed\_\_\_\_\_Total depth\_ Perf. top\_\_\_ \_\_\_\_\_Depth of shot Date shot\_ Perf. bottom\_ Liners Used Perf. top\_ Initial open flow\_\_\_\_\_\_/10ths Water in\_\_\_Inch Perf. bottom\_ Open flow after tubing /10ths Merc. in Volume\_ Cu. Ft. CASING CEMENTED\_\_\_\_ SIZE No. FT. Date NAME OF SERVICE COMPANY Rock pressure\_\_\_\_ hrs. bbls., 1st 24 hrs. COAL WAS ENCOUNTERED AT\_\_\_\_\_FEET\_\_\_INCHES Fresh water\_ feet feet FEET INCHES FEET \_INCHES Salt water\_ feet feet FEET INCHES\_ FEET\_\_\_\_INCHES Drillers' Names Darrell Skeens Drilling Co.

Remarks:

1593 Deep + bailing out hole.

6-21-85 BATE Carles w. Hungley 12023

Form 26 2/16/82

OIL & GAS DIVISION

DEFT. OF MINES

# STATE OF WEST VIRGINIA

#### **DEPARTMENT OF MINES**

#### **OIL AND GAS WELLS DIVISION**

#### **INSPECTOR'S PLUGGING REPORT**

| OMBANIV                                                                                                        |                       |                   | ADDRESS               |                             |        |      |  |
|----------------------------------------------------------------------------------------------------------------|-----------------------|-------------------|-----------------------|-----------------------------|--------|------|--|
|                                                                                                                |                       |                   | ADDRESS               |                             |        |      |  |
| ARM                                                                                                            |                       | _ DISTRICT _      | COUNTY                |                             |        |      |  |
| lling Material Used                                                                                            |                       |                   |                       |                             |        |      |  |
| iner Loc                                                                                                       | cation                | Amount            | Packer                | Location  CASING AND TUBING |        |      |  |
| PLUGS USED A                                                                                                   | ND DEPTH PLACED       |                   | BRIDGES               |                             |        |      |  |
| CEMENT-THICKNESS                                                                                               | WOOD-SIZE             | LEAD              | CONSTRUCTION-LOCATION | RECOVERED                   | SIZE   | LOST |  |
|                                                                                                                |                       |                   |                       |                             |        |      |  |
|                                                                                                                |                       |                   |                       |                             | 7      |      |  |
|                                                                                                                |                       |                   |                       |                             |        |      |  |
|                                                                                                                |                       |                   |                       |                             |        | (4)  |  |
|                                                                                                                |                       |                   |                       |                             |        |      |  |
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|                                                                                                                |                       |                   |                       |                             |        |      |  |
|                                                                                                                |                       |                   | . 10                  |                             |        |      |  |
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| ette van turkungsvalle ett in den se eine se allikuste se einter også sustantil ett ett ett ett ett ett ett et |                       |                   |                       |                             |        |      |  |
| rillers' Names                                                                                                 |                       |                   |                       |                             |        |      |  |
|                                                                                                                |                       | 2                 |                       |                             |        |      |  |
| emarks:                                                                                                        |                       |                   |                       |                             |        |      |  |
|                                                                                                                |                       |                   |                       |                             |        |      |  |
|                                                                                                                |                       |                   |                       |                             |        |      |  |
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|                                                                                                                |                       |                   |                       |                             |        |      |  |
|                                                                                                                |                       |                   |                       |                             |        |      |  |
|                                                                                                                |                       |                   |                       |                             |        |      |  |
|                                                                                                                | hereby certify I visi | ted the above wel | l on this date.       |                             |        |      |  |
| DATE                                                                                                           |                       |                   |                       |                             |        |      |  |
|                                                                                                                |                       |                   |                       | TRICT WELL INSF             | 40/04/ | 0000 |  |

#### STATE OF WEST VIRGINIA

# DEPARTMENT OF MINES OIL AND GAS WELLS DIVISION

#### INSPECTOR'S WELL REPORT

| Pormit No. 039 - 4165                      |                         |                     | Oil er<br>(KIN |            |        |
|--------------------------------------------|-------------------------|---------------------|----------------|------------|--------|
| Company Jackson Dav. Co.                   | CASING AND<br>TUBING    | USED IN<br>DRILLING | LEFT IN        | PA         | CKERS  |
| Address                                    | Size                    |                     |                |            |        |
| Parm Sally Todd                            | 16                      |                     |                | Kind of P  | acker  |
| Well No Sally Todd #35                     | 10                      |                     |                | Size of    |        |
| District Made County Canaly                | 81/4                    |                     |                | Jiac 01    |        |
| Drilling commenced                         | 6%                      |                     |                | Depth set  |        |
| Drilling commenced                         | 5 3/16                  |                     |                |            |        |
| Drilling completedTotal depth              | 3                       |                     |                | Perf. top_ |        |
| Date shotDepth of shot                     | 2                       |                     |                | Perf. bott | om     |
| Initial open flow/10ths Water inIneh       | Liners Used             |                     |                | Perf. top_ |        |
| Open flow after tubing/10ths Mere, in Inch |                         |                     |                | Perf. bott | om     |
| VolumeCu. Ft.                              | CARING CEMEN            | 1999                | aren.          | 37 - 7369  | Data   |
|                                            | CASING CEMEINAME OF SER |                     |                | No. FT.    | Date   |
| Rock pressure lbs hrs.                     | Trade Of San            | VICE COMIT          |                |            |        |
| Oilbbls., 1st 24 hrs.                      | COAL WAS EN             | COUNTERED           | AT             | FEET       | INCHES |
| Fresh waterfeetfeet                        | FEET_                   | INCH                | ES             | FEET       | INCHES |
| Salt water feet feet                       | FEET_                   | INCH                | IES            | FEET       | INCHES |
| Drillers' Names Darral Skuas Dr            | silling C               | ).                  |                |            |        |
| Remarks: T.D hok at 2080' 6-14-            | 95. Mou                 | ed no               | 370            | loca       | tion   |
| Pid well Frac. 6-18-85                     | . Today                 | nothin              | g be           | ing a      | done.  |

6-25-85

Carlos w. Haziguanos

#### **STATE OF WEST VIRGINIA**

#### **DEPARTMENT OF MINES**

#### OIL AND GAS WELLS DIVISION

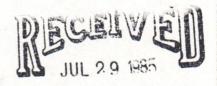
#### **INSPECTOR'S PLUGGING REPORT**

| Permit No.            |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | V                 | /ell No |        |
|-----------------------|--------------------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------|--------|
| COMPANY               |                          |                      | ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                   |         |        |
| FARM                  |                          | DISTRICT             | C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | OUNTY             |         |        |
| Filling Material Used |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |
| Liner L               | ocation                  | Amount               | Packer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Loc               | ation   |        |
| PLUGS USED            | AND DEPTH PLACED         |                      | BRIDGES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | CASING AND TUBING |         |        |
| CEMENT-THICKNESS      | WOOD-SIZE                | LEAD                 | CONSTRUCTION-LOCATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | RECOVERED         | SIZE    | LOST   |
|                       |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |
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|                       |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |
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|                       |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |
| Drillers' Names       |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |
|                       | -X 1 191                 |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |
| Remarks:              |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |
|                       |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | * /               |         | ay e w |
|                       |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |
|                       |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |
|                       |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |
|                       |                          |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |
| DATE                  | I hereby certify I vis   | sited the above well | on this date.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                   |         |        |
| DATE                  | . I hereby certify I vis | sited the above well | l on this date.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |         |        |

DISTRICT WELL INSPECTOR

### STATE OF WEST VIRGINIA DEPARTMENT OF ENERGY

OIL AND GAS WELLS DIVISION



#### INSPECTOR'S WELL REPORT

DIVISION OF OIL & GAS DEPARTMENT OF ENERGY

| Permit No. 039-4165                       |                      |                     | Oil or       | Gas Well       |
|-------------------------------------------|----------------------|---------------------|--------------|----------------|
| Company Jackson Dev. Co.                  | CASING AND<br>TUBING | USED IN<br>DRILLING | LEFT IN WELL | PACKERS        |
| Address                                   | Size                 |                     |              |                |
| Sally Todd                                | 16                   |                     |              | Kind of Packer |
| Well No Sally Todd #35                    | 13                   |                     |              |                |
| MI                                        | 81/4                 |                     |              | Size of        |
| , , , , , ,                               | 65/8                 |                     |              | Depth set      |
| Drilling commenced                        | 5 3/16               |                     |              |                |
| Drilling completedTotal depth             | 3                    |                     |              | Perf. top      |
| Date shotDepth of shot                    | . 2                  |                     |              | Perf. bottom   |
| Initial open flow/10ths Water inInch      | Liners Used          |                     |              | Perf. top      |
| Open flow after tubing/10ths Merc. inInch |                      |                     |              | Perf. bottom   |
| VolumeCu. Ft.                             | CASING CEME          | NTED                | SIZE         | No. FTDate     |
| Rock pressurelbshrs                       | NAME OF SE           | RVICE COMP.         | ANY          |                |
| Oilbbls., 1st 24 hrs                      | COAL WAS EN          | NCOUNTEREI          | ) AT         | _FEETINCHES    |
| Fresh water <u>feet</u> <u>feet</u>       | FEET                 | INC                 | HES          | _FEETINCHES    |
| Salt water feet feet                      | FEET                 | INC                 | HES          | FEETINCHES     |
| Drillers' Names                           |                      |                     |              | 00.90          |
| Remarks: Working on reclar                | nation 4             | seedi               | ng.          |                |

Carlos w. Herely
DISTRICT WELL INSPI

#### STATE OF WEST VIRGINIA

#### DEPARTMENT OF ENERGY

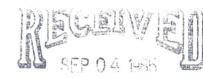
#### OIL AND GAS WELLS DIVISION

## INSPECTOR'S PLUGGING REPORT

|                     | ADDRESS                 |                          |                       |           |          |         |  |  |
|---------------------|-------------------------|--------------------------|-----------------------|-----------|----------|---------|--|--|
| ARM                 |                         | DISTRICT                 | C                     | OUNTY     |          |         |  |  |
| lling Material Used |                         |                          |                       |           | 1        |         |  |  |
| ner I               |                         |                          | V                     |           | cation   |         |  |  |
|                     | AND DEPTH PLACED        |                          | BRIDGES               | CASIN     | G AND TU | BING    |  |  |
| CEMENT-THICKNESS    | WOOD-SIZE               | LEAD                     | CONSTRUCTION-LOCATION | RECOVERED | SIZE     | LOST    |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          | 24-14-1 |  |  |
|                     |                         |                          |                       |           | 100      |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
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|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
| - A. 186            |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
| Orillers' Names     |                         | The second second second |                       |           |          | 100     |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
| Remarks:            |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
|                     |                         |                          |                       |           |          |         |  |  |
| DATE                | _ I hereby certify I vi | isited the above we      | ell on this date.     |           |          |         |  |  |
| DATE                |                         |                          |                       |           | 12/0     | 1/202   |  |  |

DISTRICT WELL INSPECTOR

# STATE OF WEST VIRGINIA DEPARTMENT OF ENERGY OIL AND GAS WELLS DIVISION



DIVISION OF OIL & GAS DEPARTMENT OF ENERGY

#### INSPECTOR'S WELL REPORT

| Permit No. 639-4        | 165           |                  |                      |                     | Oil or  |           |        |
|-------------------------|---------------|------------------|----------------------|---------------------|---------|-----------|--------|
| Company Jacks           | son Dev. C    | 201              | CASING AND<br>TUBING | USED IN<br>DRILLING | LEFT IN | P         | ACKERS |
| Address                 |               |                  | Size                 |                     |         |           |        |
| Farm Sally              | Todd          |                  | 16                   |                     |         | Kind of   | Packer |
| Well No Sally           | Todd #        | 35               | 13                   |                     |         | Size of_  |        |
| District Malde          | en County K   | andwho           | 81/4                 |                     |         |           |        |
| Drilling commenced      |               |                  | 6%                   |                     | _       | Depth se  | et     |
|                         |               |                  | 5 3/16               |                     |         |           |        |
| Drilling completed      | Total dep     | th               | 3                    |                     |         | Perf. top | )      |
| Date shot               | Depth of shot |                  | 2                    |                     |         | Perf. bo  | ttom   |
| Initial open flow       | /10ths Wate   | er inInch        | Liners Used          |                     |         | Perf. tor | )      |
| Open flow after tubing. | /10ths Merc   | . inInch         |                      |                     |         | Perf. bot | tom    |
| Volume                  |               |                  | CASING CEME          | NTED                | SIZE    | No. F7    | Date   |
| Rock pressure           | lbs           | hrs.             | NAME OF SER          | VICE COMPA          | NY      |           |        |
| 0i1                     | bb            | ls., 1st 24 hrs. | COAL WAS EN          | COUNTERED           | AT      | _FEET     | INCHES |
| Fresh water             | feet          | feet             | FEET_                | INCE                | IES     | _FEET     | INCHES |
| Salt water              | feet          | feet             | FEET_                | INCH                | IES     | _FEET     | INCHES |
| Drillers' Names         | Darrell Si    | Keens            | Drilling             | g Co.               |         |           |        |
| Remarks:                |               | 1                |                      |                     | 1       | ·         |        |
| Work                    | ing on r      | ecldm            | ation &              | Seed                | ing.    |           |        |
|                         |               |                  |                      |                     |         |           |        |

8-30-85

Carlos w Hazafaro 23

Inspector's signature

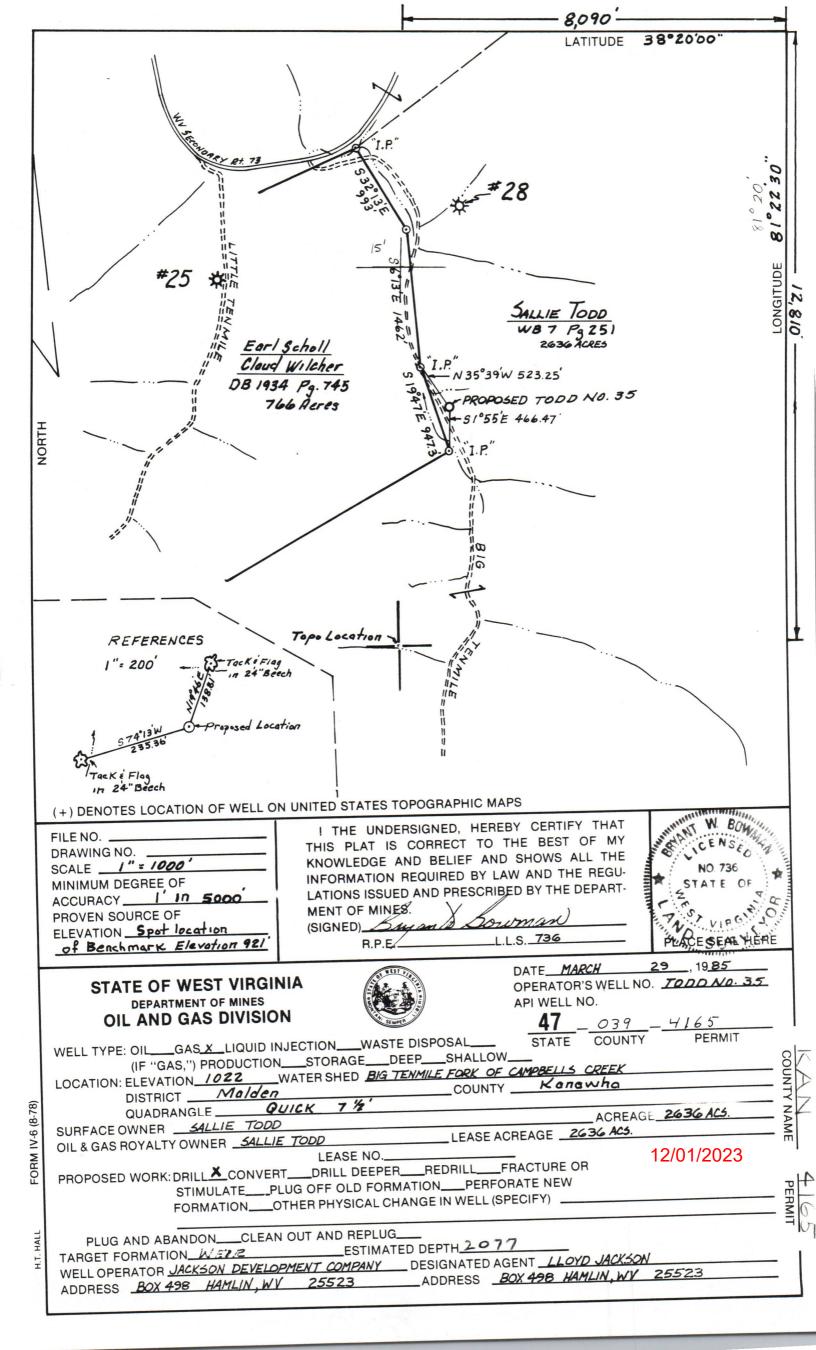
IR-26 Reverse

#### API# 47 039 - 2/165

# LIST ALL VISITS FOR THIS PERMIT

|    | DATE    | TIME | PURPOSE    | COMMENTS                |
|----|---------|------|------------|-------------------------|
|    |         | 7.3  |            |                         |
|    |         |      |            |                         |
| 1  |         |      | INSPECTION | Building lacetion       |
| 2  | 4-90-85 |      | 11         | set sunfece cosing      |
| 3  | 5-3-85  |      |            | Drilling 8 1 1225       |
|    | 5-17-85 |      | <i>ii</i>  | sot 9" Pasing           |
| 4  | 5-29-85 |      | 11         | 1592'hole equing        |
| 5  | 6-4-85  |      | 11         | 1374 11012 (401119      |
| 6  | 6-18-85 |      | )/         | Daing well Frage        |
| 7  | 7-33-85 |      | //         | working on Reeking tion |
| 8  | 4-16-86 |      | //         | Released                |
| 9  |         |      |            |                         |
| 10 |         |      | . 5 ( ->-  |                         |
| 11 |         |      |            |                         |
| 12 |         |      |            |                         |
| 13 |         |      |            |                         |
| 14 |         |      |            |                         |
|    |         |      |            |                         |
| 15 |         | -    |            |                         |
| 16 |         |      |            |                         |
| 17 |         |      |            |                         |
| 18 |         |      |            |                         |
| 19 |         |      |            |                         |
| 20 |         |      |            |                         |

Notes



IV-9 (Rev 8-81)



DATE 3-26-1985 WELL NO. TODD No. 35

# State of Mest Wirginia

API NO. 47 - 039 -4/65

ALUM CREEK, W.UA 25003

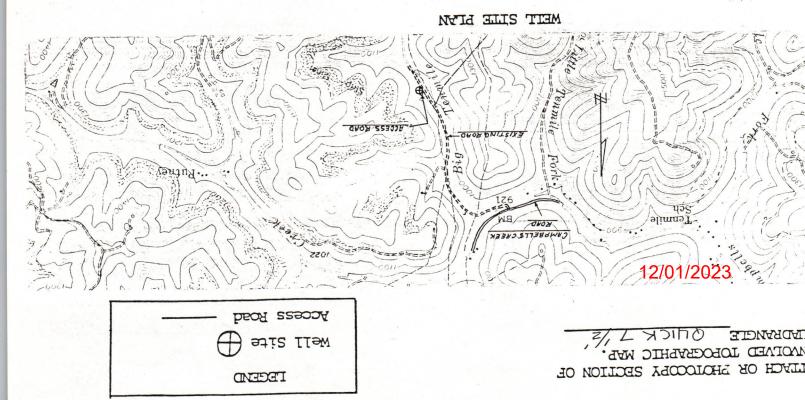
PHONE NO. 304 - 756 - 3043

Bepartment of Mines Bil and Gas Bivision

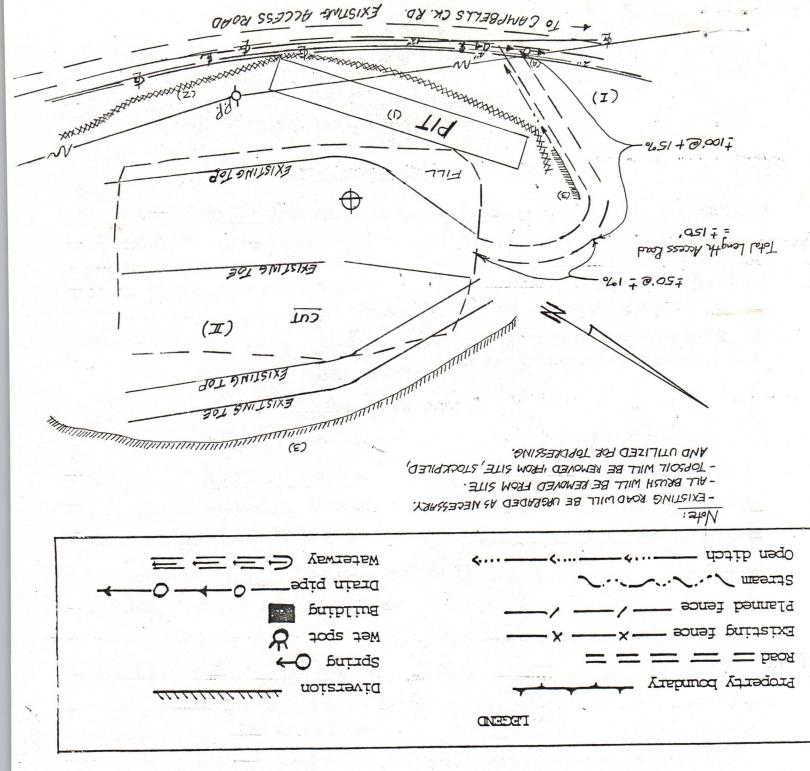
#### CONSTRUCTION AND RECLAMATION PLAN

| COMPANY NAME JACKSON DEVELOPMENTCOMPANY                                              | y DESIGNATED AGENT Lloyd Jackson                             |
|--------------------------------------------------------------------------------------|--------------------------------------------------------------|
| Address Box 498 HAMLIN, WV 25523                                                     | Address Box 498, Homlin, WV 25523                            |
| Telephone 304-756-94-10                                                              | Telephone 304-756-9410                                       |
| LANDOWNER SALLIE TODO                                                                | SOIL CONS. DISTRICT CAPITOL                                  |
|                                                                                      | yd Jackson (Agent)                                           |
|                                                                                      | APITON SOD. All corrections                                  |
| This plair has been reviewed by                                                      | APR. 2 1985                                                  |
| and additions become a part of this plan:                                            | (Date)                                                       |
|                                                                                      | 1. C. alford                                                 |
| 4                                                                                    | "SEE ATTACHED COMMINUS"                                      |
| ACCESS ROAD                                                                          | LOCATION                                                     |
| Structure Pond Culvert (A)                                                           | Structure Drilling Pit (1)                                   |
| Structure /Codd Editor                                                               |                                                              |
| Spacing Shown on sketch, 12"CMP (MIN)                                                | Material <u>Earthen</u>                                      |
| Page Ref. Manual 2-7                                                                 | Page Ref. Manual NA                                          |
|                                                                                      | Structure sediment Barrier (2)                               |
| Structure (B)                                                                        | THE CO. LEWIS CO.                                            |
| Spacing Tip >                                                                        | Material Earthen Berms or Dikes                              |
| - P - D                                                                              | Page Ref. Manual Z-16                                        |
| Page Ref. Manual                                                                     |                                                              |
| Structure (C)                                                                        | Structure Diversion Ditch (3                                 |
| 25 85 FE                                                                             | Material Earthen                                             |
| Spacing [1]                                                                          | Page Ref. Manual Z-/Z                                        |
| Page Ref. Manual                                                                     |                                                              |
| All structures should be inspected regu<br>commercial timber is to be cut and stacke | larly and repaired if necessary. All                         |
| cut and removed from the site before dirt                                            | work begins.                                                 |
|                                                                                      |                                                              |
| REVEGE                                                                               | TATION                                                       |
| Tuestment Area I                                                                     | Treatment Area II                                            |
| Treatment Area I                                                                     | Lime 3 Tons/acre or correct to pH 6.5                        |
| or correct to pH 6.5                                                                 |                                                              |
| Fertilizer 500 lbs/acre (10-20-20 or equivalent)                                     | Fertilizer 500 lbs/acre (10-20-20 or equivalent)             |
| (10-20-20 or equivalent)                                                             | Mulch Hay 2.0 Tons/acre                                      |
| · · · · · · · · · · · · · · · · · · ·                                                | Milch Hay 21 Tall Faccus 30 lbs/acre                         |
| Seed* Ky 31 Tall Fescue 30 lbs/acre                                                  | Seed* Ky. 31 Tall Fascue 30 lbs/acre  Crownvetch 10 lbs/acre |
| Crownvetch 10 lbs/acre                                                               | De la Propertie 10 lbs/acre                                  |
| Annual Ryegrass 10 lbs/acre                                                          | Annual Ryegrass 10 lbs/acre                                  |
| *Inoculate all legumes such as vetch, tr                                             | efoil and clovers with the proper bacterium.                 |
| Inoculate with 3% recommended amount.                                                |                                                              |
|                                                                                      | AN PREPARED BY BOWMAN LAND SURVEYING CO. 12/01/2023          |
| MOTES: Please request landowners'                                                    | ADDRESS PO BOX 6                                             |
| cooperation to protect new                                                           | ALUM CREEK, W.UA 250                                         |
| seedling for one growing season.                                                     | MEUNI CALERY, TIME                                           |

Attach separate sheets as necessary for comments.



etch to include well location, existing access road, roads to be constructed, wellsite, filling pits and necessary structures numbered or lettered to correspond with the first art of this plan. Include all natural drainage.



APR

A

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)

| 6-014                   | Sent to Cay 6, 16                                             | Copp.   |
|-------------------------|---------------------------------------------------------------|---------|
| 84-44                   | Street and No. 32 Sanders                                     |         |
| U.S.G.P.O. 1984-446-014 | P.O., State and ZIP Code                                      | 25045   |
| S.G.F                   | Postage                                                       | \$ .56  |
| *                       | Certified Fee                                                 | 75      |
|                         | Special Delivery Fee                                          |         |
|                         | Restricted Delivery Fee                                       |         |
|                         | Return Receipt Showing to whom and Date Delivered             |         |
| 1982                    | Return receipt showing to whom, Date, and Address of Delivery |         |
| Feb. 1982               | TOTAL Postage and Fees                                        | \$ 1.31 |
| PS Form 3800,           | Postmark or Date                                              |         |

## P 142 296 237

## RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)

| 3-014                     | Sent to The UALLEY CA                                            | inp Corse |
|---------------------------|------------------------------------------------------------------|-----------|
| * U.S.G.P.O. 1984-446-014 | Street and No. 2971 E. Oup                                       | ind Aus   |
| .0. 19                    | P.O. State and ZIP Code Shrew Story LW                           | 25184     |
| S.G.P                     | Postage                                                          | \$56      |
| *                         | Certified Fee                                                    | 75        |
|                           | Special Delivery Fee                                             |           |
|                           | Restricted Delivery Fee                                          |           |
|                           | Return Receipt Showing to whom and Date Delivered                |           |
| 1982                      | Return receipt showing to whom,<br>Date, and Address of Delivery |           |
| Feb                       | TOTAL Postage and Fees                                           | \$/31     |
| Corm 3800                 | Postmark or Date                                                 |           |
| 0                         |                                                                  |           |

## P 142 296 236

# RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)

| 014                    | Sent to PAINCES & SULPER C                                       | onl G   |
|------------------------|------------------------------------------------------------------|---------|
| 84                     | Street and No.                                                   |         |
| .0. 19                 | P.O., State and ZIP Code                                         | 4       |
| S.G.P                  | Postage                                                          | \$ 5-6  |
| * U                    | Certified Fee                                                    | 75      |
|                        | Special Delivery Fee                                             |         |
|                        | Restricted Delivery Fee                                          |         |
|                        | Return Receipt Showing<br>to whom and Date Delivered             |         |
| 982                    | Return receipt showing to whom,<br>Date, and Address of Delivery |         |
| eb. 1                  | TOTAL Postage and Fees                                           | \$ 1.31 |
| 28 Earm 3800 Feb. 1982 | Postmark or Date                                                 |         |

# P 142 296 240

# RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)

| 4 S              | ent to SALLY L. J.                                            | To DD  |
|------------------|---------------------------------------------------------------|--------|
| 9                | treet and No.                                                 |        |
| 0. 198           | O. State and ZIP Code                                         |        |
| S.G.P.           | Postage                                                       | \$ 56  |
| * U.             | Certified Fee                                                 | 75     |
| -                | Special Delivery Fee                                          |        |
| 1                | Restricted Delivery Fee                                       |        |
|                  | Return Receipt Showing to whom and Date Delivered             |        |
| 382              | Return receipt showing to whom, Date, and Address of Delivery |        |
| Feb. 1982        | TOTAL Postage and Fees                                        | \$ 131 |
| PS Form 3800, Fe | Postmark or Date                                              |        |

FORM IV-2(A) 1) Date: April 1, ,19 85 Obverse 2) Operator's [8-83] Well No. Sally Todd #35 3) API Well No. 47 039-4/65 State County Permit STATE OF WEST VIRGINIA DEPARIMENT OF MINES, OFFICE OF OIL & GAS NOTICE OF APPLICATION FOR A WELL WORK PERMIT 4) SURFACE OWNER(S) OF RECORD TO BE SERVED 5(i) COAL OPERATOR See Attached (i) Name Address Sally L. D. Todd Address 6207 Three Chopt Rd 5(ii) COAL OWNER(S) WITH DECLARATION ON RECORD: Richmond, Virginia (ii) Name Address Address (iii) Name Name Address Address 5(iii) COAL LESSEE WITH DECLARATION ON RECORD: Name Address TO THE PERSON(S) NAMED ABOVE: You should have received this Form and the following documents: (1) The Application for a Well Work Permit on Form IV-2(B) (or Form IV-4 if the well is to be plugged, which sets out the parties involved in the drilling or other work, and describes the well and its location and, if applicable, the proposed casing and cementing program; (2) The plat (surveyor's map) showing the well location on Form IV-6; and (3) The Construction and Reclamation Plan on Form IV-9 )unless the well work is only to plug a well), which sets out the plan for erosion and sediment control and for reclamation for the site and access road. THE REASON YOU RECEIVED THESE DOCUMENTS IS THAT YOU HAVE RIGHTS REGARDING THE APPLICATION WHICH ARE SUMMARIZED IN THE "INSTRUCTIONS" ON THE REVERSE SIDE OF THE COPY OF THE APPLICATION (FORM IV-2(B) OR FORM 4, DESIGNATED FOR YOU. HOWEVER, YOU ARE NOT REQUIRED TO TAKE ANY Take notice that under Chapter 22 of the West Virginia Code, the undersigned well operator proposes to file or has filed this Notice and Application and accompanying documents for a Well Work Permit with the Administrator of the Office of Oil and Gas, West Virginia Department of Mines, with respect to a well at the location described on attached Application and depicted on attached Form IV-6. Copies of this Notice, the Application, the plat, and the Construction and Reclamation Plan 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 Administrator. 6) EXTRACTION RIGHTS Check and provide one of the following:

[ Included is the lease or leases or other continuing contract or contracts by which I hold the right to extract oil or gas. The requirement of Code 22-4-1-(c)(1) through (4). (See reverse side for specifics.) 7) ROYALTY PROVISIONS Is the right to extract, produce or market the oil or gas based upon a lease or leases or other contract or contracts providing for flat well royalty or any similar provision for compensation to the owner of the oil or gas in place which is not inherently related to the volume of oil or gas so extracted, produced or marketed? Yes If the answer above is No, nothing additional is needed. If the answer is Yes, you may use Affidavit Form IV-60. See the reverse side for line item instructions, and for instructions concerning the required copies of the Notice and Application, plat, and Construction and The truth of the information on the WELL Notice and Application is verified OPERATOR JACKSON DEVELOPMENT CO., INC. and sworn to and the Notice is signed on behalf of the Well Operator Lloyd G. Jackson in my County and State by Its President Address P.O. Box 498 this latiay of April Hamlin, WV 25523 My commission expires March 31 Telephone 824-3432

Notary Public,

State of

Lincoln

County,

12/01/2023

#### INSTRUCTIONS TO APPLICANT

#### CONCERNING THE LINE ITEMS:

- 1) Date of Notice.
- 2) Your well name and number.
- 3) To be filled out by the Office of Oil & Gas.
- 4) & 5) Use separate sheet if necessary.
  - 4) Surface owner(s) of record to be served with Notice and Application. However, see also Code § 22-4-lb(b) if "more than three tenants in common or other co-owners of interest described in subsection (a) of this section hold interests in such lands".

Total State (Mark La

- 5(i) "Coal Operator" means any person, firm, partnership, partnership association or corporation that proposes to or does operate a coal mine.
- 5(ii, iii) See Code § 22-4-20.
  - 6) See Code § 22-4-11(c). However, in lieu of filing the lease(s) or other continuing contract(s), the Applicant may fill out the information in the space provided below.
  - 7) See Code § § 22-4-11(d, e).

#### CONCERNING THE REQUIRED COPIES FOR FILING AND SERVICE:

Filing. Code § 22-4-lk and Regulation 7.02 provide that the original and required copies of the Notice and Application must be filed with the Administrator, accompanied by (i) a plat in the form prescribed by Regulation 11, (ii) a bond in one of the forms prescribed by Regulation 12, or in lieu thereof the other security allowed by Code § 22-4-lk(d) and the reclamation required by Code § 22-4-12b and Regulation 23, (iv) unless previously paid on the same well, the fees required by Code § 22-4-la(c) and 22-3-12a, and (v) if applicable, the consent required by Code § 22-4-8a from the owner of any water well on dwelling within 200 feet of the proposed well.

Service. In addition, service must be made on the surface owner(s) and the person(s) with an interest in the coal. See Code § § 22-4-lm, 22-4-2, 22-4-2a, and 22-4-2b.

# INFORMATION SUPPLIED UNDER CODE § 22-4-11(d) IN LIEU OF FILING LEASE(S) AND OTHER CONTINUING CONTRACT(S)

Under the oath required to make the verification on the obverse side of this Notice, I depose and say that I am the person who signed the Notice for the Applicant, and that-

- the tract of land is the same tract described in the Application to which this Notice
  applies, partly or wholly depicted in the accompanying plat, and described in the
  Construction and Reclamation Plan;
- (2) the parties and recordation data (if recorded) for lease(s) or other continuing contract(s) by which the Applicant claims the right to extract, produce or market the oil or gas are as follows:

Grantor, lessor, etc. Grantee, lessee, etc. Royalty Book Page
Margaret Y. Dickinson Jackson Development Co. 1/8 46 595

# Re: Margaret Dickinson Well #35

## COAL OWNERS:

Princess Susan Coal Company 4104-A MacCorkle Ave. Charleston, WV 25304

The Valley Camp Coal Company 2971 E. Dupont Ave. Shrewsbury, WV 25184

Union Carbide Corp., Metal Div. 32 Sanderson Road Clendenin, WV 25045

#### CAPITOL SOIL CONSERVATION DISTRICT

WESTMÖRELAND PLACE 400 ALLEN DRIVE CHARLESTON, WEST VIRGINIA 25302 DATE: APRIL 2, 1985

WELL SITE: TODD #35, Jackson Development Co. Box 498, Hamlin, WV25523 - 756-9410

QUADRANGLE: QUICK

LANDOWNER: SALLIE TODD

PLAN PREPARED BY: Bowman Land Surveying Company, Bryant Bowman

PLAN RECEIVED BY CAPITOL SCD ON: APRIL 1, 1985, delivered to Capitol SCD Office.

PLAN REVIEWED BY: Linda M. Cable, district manager, on APRIL 2, 1985.

SITE FIELD REVIEWED \_\_\_\_ YES DATE \_\_\_\_ NO X

#### RECLAMATION PLAN COMMENTS:

(1) Good Plan!

- (2) The existing road will be upgraded if needed according to the requirements used for the access road, and should be included in the plan.
- (3) The WV Dept. of Mines, Oil & Gas Div., has requested that all plans be prepared with BLACK INK ONLY. Pencil, red or blue ink will not XEROX.
- (4) The percent of slope at TREATMENT AREA II must be included in the skecth.
- (5) The pit should not be located in fill!

APR-4 1985

OIL & GAS DIVISION DEPT. OF MINES

R. C. Alford, CHAIRMAN

R. C. ALFORD, CHAIRMAN BOARD OF SUPERVISORS NOTE: ALL COMMENTS SHOULD BE STUDIED

SO THEY WILL NOT BE REPEATED

ON FUTURE PLANS!

cc: Office of Oil & Gas, WV Dept. of Mines Bryant Bowman, Bowman Land Surveying Company FORM 1V-48WC (02-84)

## STATE OF WEST VIRGINIA

# DEPARTMENT OF MINES, OIL AND GAS DIVISION AUG 15 1985

# COVER SHEET, STATE APPLICATION FOR WELL CLASSIFICATION

| Date: 7/23/ .19 85 24235                                                                                                                                                                             | AGENCY USE ONLY                                                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| Applicant's Name: Jackson Development Company                                                                                                                                                        | WELL DETERMINATION FILE NUMBER                                                                                                          |
| Address: P. O. Box 498                                                                                                                                                                               | 25.5.                                                                                                                                   |
| Hamlin, WV 25523                                                                                                                                                                                     | 850725 -1030-039-4165                                                                                                                   |
| Gas Purchaser Contract No.                                                                                                                                                                           | Use Above File Number on all<br>Communications Relating to This Well                                                                    |
| Oate of Contract (Month, day and year)                                                                                                                                                               |                                                                                                                                         |
| First Purchaser: Consolidated Gas Supply \$ 620                                                                                                                                                      | Designated Agent: Lloyd Jackson                                                                                                         |
| Address:                                                                                                                                                                                             | Address: P. O. Box 498                                                                                                                  |
| (Street or P.O. Box)                                                                                                                                                                                 | Hamlin, WV 25523                                                                                                                        |
| (City) (State) (Zip Code) FERC Seller Code                                                                                                                                                           | FERC Buyer Code                                                                                                                         |
| NAME AND TITLE OF PERSON TO WHOM QUESTIONS CONCERN BE ADDRESSED:                                                                                                                                     | ING THIS APPLICATION SHALL                                                                                                              |
| Name: Lloyd Jackson                                                                                                                                                                                  | President                                                                                                                               |
| Signature: (Print)                                                                                                                                                                                   | (Title)                                                                                                                                 |
| Address:  P. O. Box 498  (Street or P.O. Box)  Hamlin WV  (City) (State)  (Area Code) (Phone I                                                                                                       | 410                                                                                                                                     |
| (Certificate of Proof of Service to Purcha                                                                                                                                                           | iser)                                                                                                                                   |
| NGPA Catagory App                                                                                                                                                                                    | olied For                                                                                                                               |
| IGPA SECTION/SUBSECTION                                                                                                                                                                              |                                                                                                                                         |
| 102 New Natural Gas 102-2 2.5 Mile Test 102-3 1000 Foot Deeper Test 102-4 New Onshore Reservoir 103 New Onshore Production Well xx 103 New Onshore Production Well                                   | 108 Stripper Well Natural Gas  108- Stripper Well  108-1 Seasonally Affected  108-2 Enhanced Recovery  108-3 Temporary Pressure Buildup |
| 107 High Cost Natural Gas<br>107-0 Deep (more than 15,000 feet)                                                                                                                                      | AGENCY USE ONLY                                                                                                                         |
| 107-1 Geopressured Brine 107-2 Coal Seams 107-3 Devonian Shale 107-5 Production enhancement 107-6 New Tight Formation 107-7 Recompletion Tight Formation  DIVISION OF OIL & GAS DEPARTMENT OF ENERGY | 12/01/2023<br>QUALIFIED                                                                                                                 |
|                                                                                                                                                                                                      |                                                                                                                                         |

Date Received

Determination Date

