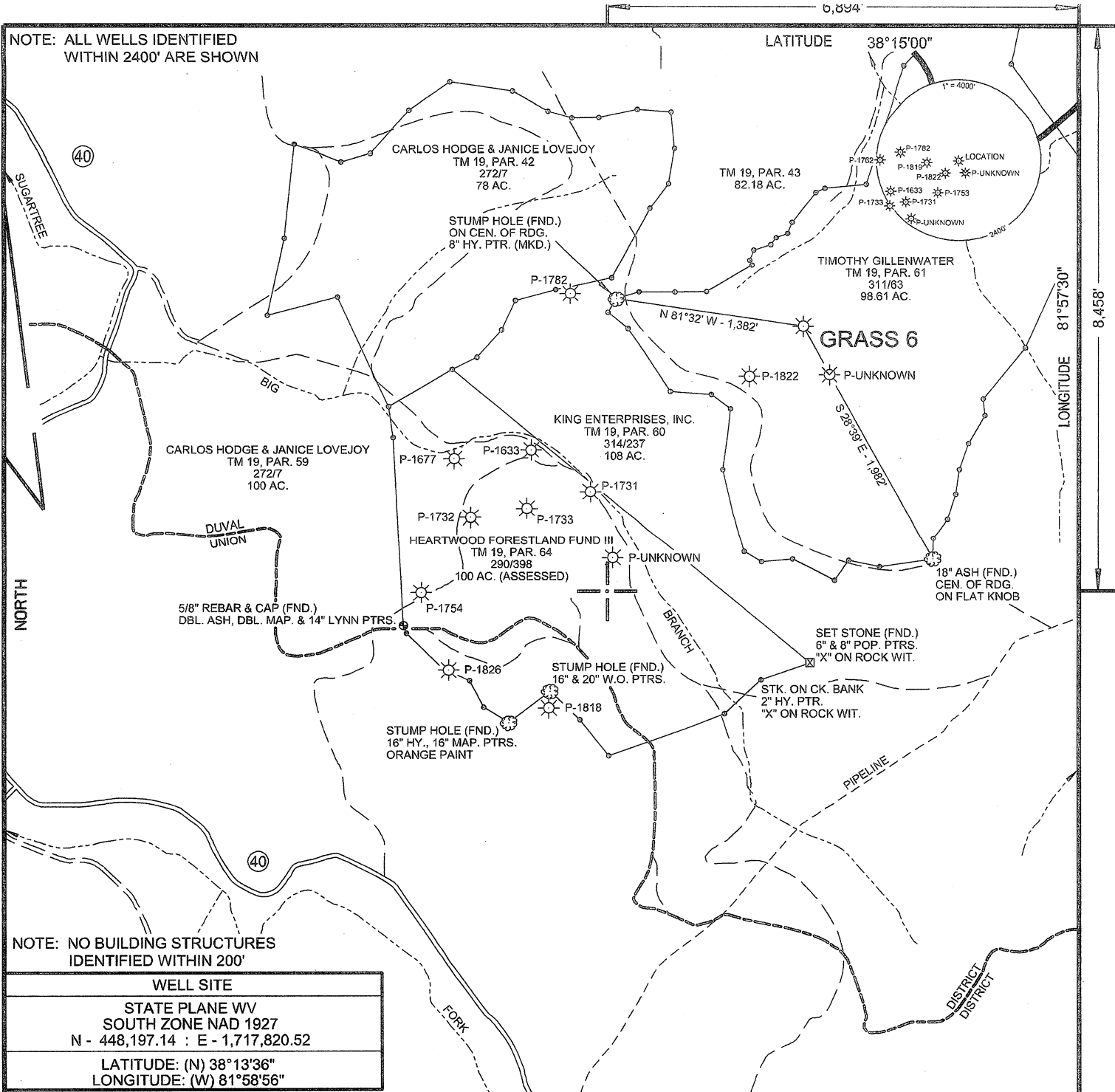


NOTE: ALL WELLS IDENTIFIED WITHIN 2400' ARE SHOWN



GRASS 6

NOTE: NO BUILDING STRUCTURES IDENTIFIED WITHIN 200'

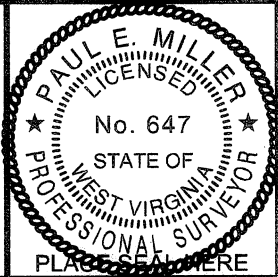
WELL SITE	
STATE PLANE WV SOUTH ZONE NAD 1927 N - 448,197.14 : E - 1,717,820.52	
LATITUDE: (N) 38°13'36" LONGITUDE: (W) 81°58'56"	

(+) DENOTES LOCATION OF WELL ON UNITED STATES TOPOGRAPHIC MAPS

FILE NO.	RC WO GRASS 6.DGN
DRAWING NO.	RC GRASS 6
SCALE	1" = 1000'
MINIMUM DEGREE OF ACCURACY	1:200
PROVEN SOURCE OF ELEVATION	MAPPING GRADE GPS

I THE UNDERSIGNED, HEREBY CERTIFY THAT THIS PLAT IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND SHOWS ALL THE INFORMATION REQUIRED BY LAW AND THE REGULATIONS ISSUED AND PRESCRIBED BY THE DEPARTMENT OF ENVIRONMENTAL PROTECTION.

(SIGNED) *Paul E. Miller*
R.P.E. _____ L.L.S. 647



STATE OF WEST VIRGINIA DIVISION OF ENVIRONMENTAL PROTECTION OIL AND GAS DIVISION		DATE <u>SEPTEMBER 30</u> , 20 <u>09</u>	
WELL TYPE: OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> LIQUID INJECTION <input type="checkbox"/> WASTE DISPOSAL <input type="checkbox"/>		OPERATOR'S WELL NO. <u>GRASS 6</u>	
(IF "GAS,") PRODUCTION <input checked="" type="checkbox"/> STORAGE <input type="checkbox"/> DEEP <input type="checkbox"/> SHALLOW <input checked="" type="checkbox"/>		API WELL NO. <u>47 043</u>	
LOCATION: ELEVATION <u>958'</u> WATER SHED <u>BIG BRANCH OF SUGARTREE FORK</u>		STATE <u>47</u> COUNTY <u>043</u> PERMIT <u>D2607-W</u>	
DISTRICT <u>DUVAL</u> COUNTY <u>LINCOLN</u>		CANCELLLED	
QUADRANGLE <u>GRIFFITHSVILLE, WV 7.5'</u>			
SURFACE OWNER <u>TIMOTHY GILLENWATER</u> ACREAGE <u>98.61</u>		COUNTY NAME	
OIL & GAS ROYALTY OWNER <u>KING ENTERPRISES, INC., et. al.</u> LEASE ACREAGE _____			
LEASE NO. _____		PERMIT	
PROPOSED WORK: DRILL <input type="checkbox"/> CONVERT <input type="checkbox"/> DRILL DEEPER <input type="checkbox"/> REDRILL <input type="checkbox"/> FRACTURE OR STIMULATE <input type="checkbox"/> PLUG OFF OLD FORMATION <input type="checkbox"/> PERFORATE NEW FORMATION <input type="checkbox"/> OTHER PHYSICAL CHANGE IN WELL (SPECIFY) _____ WORK OVER <input type="checkbox"/>			
PLUG AND ABANDON <input type="checkbox"/> CLEAN OUT AND REPLUG <input type="checkbox"/>		COUNTY NAME	
TARGET FORMATION <u>BEREA</u> ESTIMATED DEPTH _____			
WELL OPERATOR <u>RESEARCH CHEMICALS, INC.</u> DESIGNATED AGENT <u>RON LAIRD</u>			
ADDRESS <u>9 CHALMETT PLACE, HATTIESBURG, MS 39402</u> ADDRESS <u>SAME</u>		PERMIT	

FORM WVW-6