Well Operator's Report of Well Work



Well Number:

API:	47	-	-

Submission: Initial Amended

Notes:



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

API <u>47</u>	County	District	·····	
Quad	Pad Name	Field/Pool Name		
Farm name		Well Number		
Operator (as registered with the OOG)				
Address	City	State	Zip	
Landing Point of Curve N	forthing	v, and deviation survey Easting Easting Easting		
Elevation (ft) GL	Type of Well □New □ Existing	Type of Report	□Interim □Final	
Permit Type Deviated Ho	rizontal 🗆 Horizontal 6A 🗆 Vertic	cal Depth Type	□ Deep □ Shallow	
Type of Operation \Box Convert \Box De	epen 🗆 Drill 🗆 Plug Back 🗆 R	Redrilling	Stimulate	
Well Type Brine Disposal CBM	□ Gas □ Oil □ Secondary Recovery	□ Solution Mining □ Sto	orage 🗆 Other	
Type of Completion Given Single Mult Drilled with Cable Rotary Drilling Media Surface hole Air Production hole Air Mud Mud Type(s) and Additive(s)			 Other Fresh Water Brine 	
-	Date drilling commenced	-		
	Date completion			
Verbal plugging (Y/N) D	ate permission granted	Granted by		
Please note: Operator is required to sul	omit a plugging application within 5 days	of verbal permission to p	lug	
Freshwater depth(s) ft	Open mine(s) (Y/N) depths		
Salt water depth(s) ft	Void(s) encounte	ered (Y/N) depths		
Coal depth(s) ft	Cavern(s) encour	ntered (Y/N) depths		
Is coal being mined in area (Y/N)			Deviewed by:	

Reviewed by:



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API 47		Farm nameWell number									
CASING STRINGS	Hole Size	Casing Size	Depth (GL		lew or Used	Grade wt/ft		Basl Depth	ket (s) (GL)		nent circulate (Y/ N) ide details below*
Conductor											
Surface											
Coal											
Intermediate 1											
Intermediate 2											
Intermediate 3											
Production											
Tubing											
Packer type and d	epth set										
Comment Details											
CEMENT DATA Conductor	Class/Type of Cement	Numb of Sac		Slurry wt (ppg)		ield ³ /sks)	Volum $(ft^{\frac{3}{2}})$	e	Cemer Top (Gl		WOC (hrs)
Surface											
Coal											
Intermediate 1											
Intermediate 2											
Intermediate 3											
Production											
Tubing											
Drillers TD (ft)											
-	ion penetrated edure					o (ft)					
Kick off depth Check all wire		□ caliper		2		ed/direction		induc		□soni	ic.
Image: Instant sector of the sector of th											
DESCRIBE T	HE CENTRALI	ZER PLACEN	IENT U	USED FOR E	ACH CA	ASING ST	FRING _				
WAS WELL (COMPLETED A	AS SHOT HOL	E	Yes 🗆 No	DE						
WAS WELL COMPLETED OPEN HOLE? □ Yes □ No DETAILS											
WERE TRAC	WERE TRACERS USED Ves No TYPE OF TRACER(S) USED										
										11	/19/2021

API 47 Farm name			ne	Well number			
			PERFORATI				
Stage No.	Perforation date	Perforated from MD ft.	Perforated to MD ft.	Number of Perforations	Formation(s)		

Please insert additional pages as applicable.

STIMULATION INFORMATION PER STAGE

Complete a separate record for each stimulation stage.

Stage No.	Stimulations Date	Ave Pump Rate (BPM)	Ave Treatment Pressure (PSI)	Max Breakdown Pressure (PSI)	ISIP (PSI)	Amount of Proppant (lbs)	Amount of Water (bbls)	Amount of Nitrogen/other (units)
110.	Date	Rate (DI WI)	Tressure (TSI)	Tressure (151)	1511 (151)	Toppant (103)	water (0013)	Turogen/onier (units)

Please insert additional pages as applicable.

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API 47		Farm 1	name			_Well number_	
PRODUCING	FORMATION(S	<u>S)</u>	DEPTHS				
				_TVD _		MD	
Please insert ad	lditional pages a	s applicable.					
GAS TEST							
SHUT-IN PRE	SSURE Surfa	ace	_psi Botto	om Hole	psi I	OURATION O	F TEST hrs
OPEN FLOW		Oil pd b		vbpd	Vater bpd	GAS MEASU	
LITHOLOGY/	TOP	BOTTOM	TOP	BOTTOM			
FORMATION	DEPTH IN FT NAME TVD	DEPTH IN FT TVD	DEPTH IN FT MD	DEPTH IN FT MD			RECORD QUANTITYAND ER, BRINE, OIL, GAS, H ₂ S, ETC)
						(,,,,,
Please insert ad	lditional pages a	s applicable.					
	ictor					G	7.
Address			City			_ State	Zip
	any					_State	Zip
	npany					_State	Zip
	menting mpany						
Address						State	Zip
Please insert additional pages as applicable.							
Completed by Telephone Signature Date							
	O			· · · · · · · · · · · · · · · · · · ·			·
Submittal of H	ydraulic Fracturi	ng Chemical I	Disclosure Info	rmation A	Attach copy of l	FRACFOCUS	Registry 11/19/2021

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API 47	Farm name	Well number		
Drilling Contractor Address	City	_State	_ Zip	
Logging CompanyAddress	City	_State	Zip	
Logging CompanyAddress	City	_State	Zip	
Drilling Contractor Address	City	State	_Zip	