





1095-1297 Issued 5/2/89 Expres 5/2/91 Page__of___

STATE OF WEST VIRGINIA DEPARTMENT OF ENERGY, DIVISION OF OIL AND GAS WELL WORK PERMIT APPLICATION

							
1) Well O	perator:_	STO	NEWALL GAS	COMPANY 4	7850 (5)	7 606	~
2) Operato	or's Well	Number:_	THOMAS	#1 (407-	·S) 3) E1	evation: 822	
			or Ga				
•	(p) -	If Gas:	Production Dec	on_X/ Underg	ground Storag Shallo	e/ w/	
5) Propose	ed Target	Formatio	n(s):	BENSON A		VECEUM VECEUM	回
6) Propose	ed Total I	Depth:	5100'	feet			
7) Approxi	imate fres	sh water :	strata dep	ths:	70:460	4 1939	'
.8) Approxi	mate salt	water de	epths:	970'	//	s.to en en en	
9) Approxi	mate coal	seam de	oths:	NA 🔏	151-454	1	
9) Approximate coal seam depths: NA 45/-454 10) Does land contain coal seams tributary to active mine? Yes_/ No_X/							
11) Proposed Well Work:							
12)					•		
		CASIN	IG AND TUB	ING PROGRAM			
TYPE	S	PECIFICAT	IONS	FOOTAGE I	NTERVALS	CEMENT	:
A1-4/1/17	Size	Grade	Weight per ft.	For drilling	Left in well	Fill-up	74 T
Conductor	11 3/4	ERW	42#	100'	100 · CK.	38 CSR 18-11.3	eT.
Fresh Water							
Coal					annat to Suboel	38CSRE11.2.	2
Intermediate	8 5/8	ERW	23#	1100'	1100'	38 CSR 18-11.3	ets
Production	4 1/2	ERW	10.5#	5100'	5100	738 CSR 18-11.1	
Tubing						•	
Liners					MR	RANDER	£ A
PACKERS : Kin					N.B.	D V ver	
	tes oths set				45 A	PR 1 4 1989	
6333	Fo	or Divisor	of Oil a	nd Gas Use		ON OF OIL & GAS MENT OF ENERGY	1
1 The Fee(s) paid: 1 Tel Well Work Permit 1 Tel Reclamation Fund 1 WPCP							
Plat WW-9 WW-28 NEW Bond 13/3-/ET TENT Agent							•
-		-			Therenge A		

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4)



Surface Owner(s) to be served:

DIVISION OF OIL & GAS 3) DEPARTMENT OF ENERGY

Date: APRIL 12, 1989		
Operator's well number		
THOMAS #1 (407-S)		
API Well No: 47 - 095	-	1297
State - County	_	Dermit

STATE OF WEST VIRGINIA DEPARTMENT OF ENERGY, DIVISION OF OIL AND GAS

NOTICE AND APPLICATION FOR A WELL WORK PERMIT

4)	Surface Owner(s (a) Name <u>CLIFF(</u>) to be served: ORD HINDERWOOD	5) (a) Coal Operator Name N/A	:
	Address PO BOX	X 92	Address	
-	(b) Name DONNA	<u>14, WV 26434</u>		
	(b) Name DONNA	J. THOMAS	(b) Coal Owner(s) with	th Declaration
	Address PO BOX		Name SAME AS SURFAC	E O P III / IE D
	SHIRLE	EY, WV 26434	Address	IECEINE!
	(c) Name			
	Address		Name	1 / 1090
			Address	4 555
			111/	1
5)	Inspector GLEN E	P. ROBINSON	(c) Coal Lessee with	Declaration
	Address RT 1,	#6 MT PLEASANT EST	Name N/A	
	ELKVI	EW, WV 25071	Address	
	Telephone (304)			
	TO THE	PERSON(S) NAMED AR	OVE TAKE NOTICE THAT:	
	war in the second control of the second cont		OVE TIME WOLLOW THAT.	
	Included is the	lease or leases or	other continuing conf	tract or
contr	acts by which I	hold the right to	extract oil and gas Of	o or
X	Included is the	information requir	ed by Chapter 22B, Art	<u>.</u> Fielo 1
Secti	on 8(d) of the	Code of West Virgin	is (see page 2)	ricle 1,
	I certify that	as required under C	hapter 22B of the <u>West</u>	
l has	re served copies	of this potion and	napter 228 of the west	Virginia Code
	nanving degumen	to page 1 through	application, a locat:	ion plat, and
20001	panying documen	cs pages I through	on the above named	parties, by:
	Personal S	ervice (Affidavit a	ttached)	
	X Certified	Mail (Postmarked po	stal receipt attached)
	Publication	n (Notice of Public	ation attached)	
	T 1-			
	i have read and	understand Chapter	22B and 38 CSR 11-18,	, and I agree
o tr	e terms and con-	ditions of any perm	it issued under this a	application.
_	I certify under	penalty of law tha	t I have personally ex	camined and am
amil	iar with the in	formation submitted	on this application	form and all
attac	inments, and that	t based on my inqui:	ry of those individual	ls immediately
cespo	nsible for obta	ining the information	on, I believe that the	information -
is tr	ue, accurate, a	nd complete.		
	I am aware that	there are signification	ant penalties for subr	nitting false
infor	mation, includi:	ng the possibility (of fine and imprisonme	ent.
		. Well Operator	STONEWALL GAS COMPAN	IY
		By: Bin A	bruth	
		Its: PRESIDE	ENT	
		Address PO I	RAWER R	
		JANF	E LEW, WV 26378-0080	
		Telephone 304-	884-7881	
Subsc	ribed and sworn	before me this 127	Hday of APRIL	, 1989
_ `	1 1	. 0	-	
لكند	down K. Ello	Line		X XXXXXXXXXXX XX
iy co	mmission expire	s <u>OCTOBER 14. 19</u>	993	COMMISSIONER
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