



I, the undersigned, hereby certify that this plat is correct to the best of my knowledge and belief.

SIGNED Carl E. Walters

TITLE Owner

RECEIVED
 Environmental Protection
 Division of
 West Virginia

AUG 27 1993
 Permitting
 Office of Oil & Gas

DATE August 12, 1993

OPERATORS WELL NO. 1

API WELL NO. 095-1570-N

STATE OF WEST VIRGINIA
 DEPARTMENT OF ENERGY
 OIL AND GAS DIVISION

C-475?
 (4834)
 Angie R. McIntyre

WELL TYPE: OIL GAS _____ LIQUID INJECTION _____ WASTE DISPOSAL _____
 "GAS" PRODUCTION _____ STORAGE _____ DEEP _____ SHALLOW _____

LOCATION: ELEVATION 1001 WATER SHED Indian Creek
 DISTRICT McElroy (5) COUNTY Tyler
 QUADRANGLE Center Point 284 +15 NW

SURFACE OWNER Bruce Noland ACREAGE _____

MINERAL & GAS ROYALTY OWNER NICK ARMS, ET AL LEASE ACREAGE 36
 LEASE NO. _____

PRODUCING FORMATION BIG INJUN TOTAL DEPTH 2216

OPERATOR Carl E. Walters DESIGNATED AGENT Same

ADDRESS HC 62 BOX 81B ADDRESS _____

Alvy, WV. 26322

17891

39° 11' 30"

1450'

80° 42' 30"

6700'

STATE OF WEST VIRGINIA
DIVISION OF ENVIRONMENTAL PROTECTION
SECTION OF OIL AND GAS

WELL REGISTER ASSIGNMENT

This API Number 47- 95-01570, issued to WALTERS, CARL E/JERRY L/DOROT is evidence of permission to operate the well that is referenced at the location described on the attached plat, subject to the provisions of Chapters 22 and 22B of the West Virginia Code of 1931, as amended, and all rules and regulations promulgated thereunder. The name and telephone number of the Oil and Gas Inspector for this well is MIKE UNDERWOOD - 304-782-1043.

Spills or emergency discharges must be reported to 1-800-654-3312.

Failure to abide by all statutory and regulatory provisions governing all duties and operations hereunder may result in suspension or revocation of your permits and in addition may result in civil and/or criminal penalties.

The enclosed WR-35 must be completed by you and returned to this office. In addition annual production reports must be submitted on this well and failure to do so may require you to plug the well.

Theodore M. Streit
Chief

By: 

Title: _____

Operator's Well No: A.B.McINTYRE #1

Farm Name: NOLAND, BRUCE

API Well Number : 47- 95-01570 N

Date Issued : 01/03/94