

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

API 47 - 095 - 02368 County Tyler District Centerville
 Quad Middlebourne 7.5' Pad Name Lemuel Field/Pool Name ----
 Farm name Thomas Flannery Et Al Well Number Midge Unit 1H
 Operator (as registered with the OOG) Antero Resources Corporation
 Address 1615 Wynkoop Street City Denver State CO Zip 80202

As Drilled location NAD 83/UTM Attach an as-drilled plat, profile view, and deviation survey
 Top hole Northing 4363654.30m Easting 507450.67m
 Landing Point of Curve Northing _____ Easting _____
 Bottom Hole Northing _____ Easting _____

Elevation (ft) 1158' GL Type of Well New Existing Type of Report Interim Final
 Permit Type Deviated Horizontal Horizontal 6A Vertical Depth Type Deep Shallow
 Type of Operation Convert Deepen Drill Plug Back Redrilling Rework Stimulate
 Well Type Brine Disposal CBM Gas Oil Secondary Recovery Solution Mining Storage Other _____
 Type of Completion Single Multiple Fluids Produced Brine Gas NGL Oil Other _____
 Drilled with Cable Rotary

Drilling Media Surface hole Air Mud Fresh Water Intermediate hole Air Mud Fresh Water Brine
 Production hole Air Mud Fresh Water Brine
 Mud Type(s) and Additive(s)

Date permit issued 8/17/2016 Date drilling commenced 12/10/2017 Date drilling ceased 12/10/2017
 Date completion activities began N/A Date completion activities ceased N/A
 Verbal plugging (Y/N) N/A Date permission granted N/A Granted by N/A

Please note: Operator is required to submit a plugging application within 5 days of verbal permission to plug

Freshwater depth(s) ft N/A Open mine(s) (Y/N) depths No
 Salt water depth(s) ft N/A Void(s) encountered (Y/N) depths No
 Coal depth(s) ft N/A Cavern(s) encountered (Y/N) depths No
 Is coal being mined in area (Y/N) No

Reviewed by:

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CASING STRINGS	Hole Size	Casing Size	Depth	New or Used	Grade wt/ft	Basket Depth(s)	Did cement circulate (Y/N) * Provide details below*
Conductor	26"	20"	80'	New	78.67#, A252	N/A	Y
Surface							
Coal							
Intermediate 1							
Intermediate 2							
Intermediate 3							
Production							
Tubing							
Packer type and depth set		N/A					

Comment Details _____

CEMENT DATA	Class/Type of Cement	Number of Sacks	Slurry wt (ppg)	Yield (ft ³ /sks)	Volume (ft ³)	Cement Top (MD)	WOC (hrs)
Conductor	Class A	204 sk	15.6	1.18	241	0'	8 Hrs.
Surface							
Coal							
Intermediate 1							
Intermediate 2							
Intermediate 3							
Production							
Tubing							

Drillers TD (ft) ^{80'} _____ Loggers TD (ft) _____
 Deepest formation penetrated _____ Plug back to (ft) *N/A* _____
 Plug back procedure *N/A* _____

Kick off depth (ft) _____

Check all wireline logs run caliper density deviated/directional induction
 neutron resistivity gamma ray temperature sonic

Well cored Yes No Conventional Sidewall Were cuttings collected Yes No

DESCRIBE THE CENTRALIZER PLACEMENT USED FOR EACH CASING STRING _____

Conductor - 0

WAS WELL COMPLETED AS SHOT HOLE Yes No DETAILS _____

WAS WELL COMPLETED OPEN HOLE? Yes No DETAILS _____

WERE TRACERS USED Yes No TYPE OF TRACER(S) USED *N/A* _____

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PERFORATION RECORD

Stage No.	Perforation date	Perforated from MD ft.	Perforated to MD ft.	Number of Perforations	Formation(s)
*PLEASE SEE ATTACHED EXHIBIT 1					

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)
*PLEASE SEE ATTACHED EXHIBIT 2								

Please insert additional pages as applicable.

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PRODUCING FORMATION(S)	DEPTHS	
	TVD	MD

Please insert additional pages as applicable.

GAS TEST Build up Drawdown Open Flow OIL TEST Flow Pump

SHUT-IN PRESSURE Surface _____ psi Bottom Hole _____ psi DURATION OF TEST _____ hrs

OPEN FLOW Gas _____ mcfpd Oil _____ bpd NGL _____ bpd Water _____ bpd GAS MEASURED BY Estimated Orifice Pilot

LITHOLOGY/ FORMATION	TOP	BOTTOM	TOP	BOTTOM	DESCRIBE ROCK TYPE AND RECORD QUANTITY AND TYPE OF FLUID (FRESHWATER, BRINE, OIL, GAS, H ₂ S, ETC)
	DEPTH IN FT NAME TVD	DEPTH IN FT TVD	DEPTH IN FT MD	DEPTH IN FT MD	
*PLEASE SEE ATTACHED EXHIBIT 3					

Please insert additional pages as applicable.

Drilling Contractor IDC Drilling
Address 20475 SH 249 Suite 300 City Houston State TX Zip 77070

Logging Company _____
Address _____ City _____ State _____ Zip _____

Cementing Company Express Energy Seivices
Address 9800 Richmond Avenue Suite 700 City Houston State TX Zip 77042

Stimulating Company _____
Address _____ City _____ State _____ Zip _____

Please insert additional pages as applicable.

Completed by Carly Marvel Telephone 303-357-7373
Signature *Carly Marvel* Title Permitting Agent Date 3/31/2023

Submittal of Hydraulic Fracturing Chemical Disclosure Information Attach copy of FRACFOCUS Registry