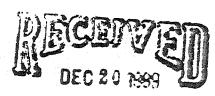


## State of West Virginia DEPARTMENT OF ENERGY Division of Oil and Gas

Well Operator's Report of Well Work

Farm name: ELMORE, BILLY RAY Operator Well No.: SANDY 5-423-S LOCATION: Elevation: 1270.00 Quadrangle: WEST UNION District: GRANT County: DODDRIDGE Latitude: 4800 Feet South of 39 Deg. 22Min. 30 Sec. Longitude 6485 Feet West of 80 Deg. 45 Min. 0 Sec. Company: STONEWALL GAS CO. P. O. BOX 1575 Casing Used in Left RICHMOND, VA 23213-1575 |Fill Up| Tubing | Drilling | in Well | Cu. Ft. Agent: JESSE A. SHELL Size Inspector: MIKE UNDERWOOD Permit Issued: 10/03/89 Well work Commenced: 10-22-89 11 3/4 171 171 | 85 SKS Well work Completed: \_10-27-89 Verbal Plugging Permission granted on: 8 5/8 1407 1407 320 SKS Rotary X Cable Total Depth (feet) Fresh water depths (ft) 5292 5292 695 SKS Salt water depths (ft) 2075 Is coal being mined in area (Y/N)? N DEC 20 199A Coal Depths (ft): N/A - Fatto carol-02-02-1-048. DEPARTMENT OF CIVERGY OPEN FLOW DATA Producing formation BENSON Pay zone depth (ft) 5250 Gas: Initial open flow \* MCF/d Oil: Initial open flow N/A Bbl/d Final open flow 1905 MCF/d Final open flow N/A Time of open flow between initial and final tests Bbl/d Static rock Pressure 1600 psig (surface pressure) after 168 Hours Second producing formation RILEY Gas: Initial open flow \* MCF/d Oil: Initial open flow N/A Bbl/d Final open flow 1905 MCF/d Final open flow N/A Bbl/d Time of open flow between initial and final tests 1 Hours Static rock Pressure 1600 psig (surface pressure) after 168 Hours \* UNABLE TO DETERMINE DUE TO INJUN FORMATION FLOWING 267 MCF/D NATURAL NOTE: ON BACK OF THIS FORM PUT THE FOLLOWING: 1). DETAILS OF PERFORATED INTERVALS, FRACTURING OR STIMULATING, PHYSICAL CHANGE, ETC. 2). THE WELL LOG WHICH IS A SYSTEMATIC DETAILED GEOLOGICAL RECORD OF ALL FORMATIONS, INCLUDING COAL ENCOUNTERED BY THE WELLBORE. For: STONEWALL GAS CO. Date:

FRAC WATER	STAGE TWO	DATE NOV	/EMBER 1,	, 1989
ZONES	PERFS	HOLES	BBL	SAND BD ISIP
BENSON	5240-5234	19	700	60,000 2350 PSI 1670 PSI
RILEY	4800-4795	15	500	40,000 2070 PSI 1750 PSI
FORMATION	COLOR	HARD/SOFT	TOP FT	BOTTOM FT REMARKS
INJUN SHALE	REDDISH GREY BROWN TAN GREY & RR TAN GREY GREY TAN TAN GREY GREY GREY GREY TAN GREY GREY GREY GREY GREY	SOFT SOFT HARD HARD SOFT SOFT HARD HARD HARD HARD HARD HARD HARD HARD	0 10 15 170 204 2325 7655 9585 11180 11280 11280 11280 1135 12115 12115 12120 2225 2988 4800 52140 5550 5500 5500 5500 5500 5500 5600 56	10 50' ½" H <sub>2</sub> 0 15 DAMP @ 1030 1½-2" STREAM SALT WATER 242 @ 2075 320 325 GAS CK @ 2233 NO SHOW 765 825 GAS CK @ 2294 50/10 950 2" W/H <sub>2</sub> 0 1085 GAS CK @ 2948 44/10 1115 GAS CK @ 2948 44/10 1280 2" W/H <sub>2</sub> 0 1390 1490 GAS CK @ 3009 68/10 1735 2" W/H <sub>2</sub> 0 1831 2115 GAS CK @ 4034 40/10 2135 2" W/H <sub>2</sub> 0 2220 GAS CK @ 4839 42/10 2250 2" W/H <sub>2</sub> 0 2250 2" W/H <sub>2</sub> 0 2989 GAS CK @ 5306 44/10 270 W/H <sub>2</sub> 0 4800 5210 GAS CK @ TD 40/10 5240 2" W/H <sub>2</sub> 0



DEPARTMENT OF CLASS

Issued 10/03/89 3749

STATE OF WEST VIRGINIA

Expres 10103/91
OIL AND GAS

DEPARTMENT OF ENERGY, DIVISION OF OIL AND GA

76 A		Jyar Ma	A W ON W AVA	VE VAM
WELL	WORK	PERMIT	APPLI	CATION

		WARLE W	AND EEDDAY	AFFUL VALLY		′
1) Well Op	erator:_	STONE	WALL GAS C	OMPANY 47	950, 3,6	70
2) Operato	r's Well	Number:_	SANDY #5		3) Ele	evation: 1270'
4) Well ty	pe: (a)	011_/	or Ga	s <u>X</u> /		
¢ <sup>©</sup>	(b) -	If Gas:		$n \times / Undergraps / Undergraps$	ound Storage Shallo	
5) Proposed	d Tarast		n(s): BE	44 Cataconical	Sugitor	
			5450'			one of the second secon
				teet ths:150'	2891	
<b>.</b>	-		_		. 2	
us qs				1390	1,126/	
			-	N/A		And a second contract of the second and a second place to the second contract to a second contract to a second
		/1	1 1	1)		es/ No_X_/
11) Proposed	l Well Wor	ck: ///	Ill Soll	mulate N	lennholl .	
12)		-	•		· · · · · · · · · · · · · · · · · · ·	
	•		•	ING PROGRAM		·
TYPE	<u>\$</u>	PECIFICAT	CIONS	FOOTAGE IN	ITERVALS	CEMENT
	Size	Grade	Weight per ft.	For drilling	Left in well	Fill-up (cu. ft.)
Conductor	11 3/4"	ERW	42#	170°	170	38 CSR 18-11.3
Fresh Water						0.K24/
Coal						
Intermediate	8 5/8"	ERW	23#	1425'	1425'	38 CSR 18-11.3
Production	4 1/2"	ERW	10.5#	5450 '	5450'	38 CSR 18-11.1
Tubing		·				•
Liners					Tax	
PACKERS : Kin	a				B)	EGGUVE
Siz	es					OCT 03 1989
199 nep	ths set _					DIVISION OF OIL & GA
9.1		U		ind cas Use	•	EPARTMENT OF ENER
Fee(s) p	aid:	$\sim 0$	ork Permit	Recl	amation Fund	WPCP
Plat V	ZT WW-9	WW-	28 F	sonal Hankf	Mene	Agent Agent

Page	1 of
Form	WW2-A
(09/8	7)
File	Сору

DI			VE		1)
46	OCT	03	1989	JAY.	2)

Date: SEPTEMBER 28, 1989
Operator's well number

Operator's well number SANDY #5 (423-S)

API Well No: 47 - 017 - 3749

State - County - Permit

DIVISION OF OIL & GAS DEPARTMENT OF ENERGY

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

3)

	NOTICE AND APPLICATION F	OR A WELL WORK PERMIT	
4)	Surface Owner(s) to be served: (a) Name <u>BILLY RAY ELMORE</u> Address <u>RT 1, BOX 211</u> WASHINGTON, WV 26181	5) (a) Coal Operator: Name <u>N/A</u> Address	
	(b) Name KERMIT DAVID ELLISON Address C/O BILLY RAY ELMORE RT 1, BOX 211	(b) Coal Owner(s) wit Name <u>SAME AS SURF</u> Address	ACE
	(c) Name <u>WASHINGTON</u> , <u>WV 26181</u> Address	Name Address	
6)	Inspector MIKE UNDERWOOD  Address RT 2, BOX 135  SALEM, WV 26426  Telephone (304)-782-1043	(c) Coal Lessee with Name N/A Address	
	TO THE PERSON(S) NAMED AB	OVE TAKE NOTICE THAT:	
cont X Sect I ha	Included is the lease or leases or racts by which I hold the right to Included is the information requirion 8(d) of the Code of West Virgin I certify that as required under Cove served copies of this notice and mpanying documents pages 1 through  X Personal Service (Affidavit and Companying Mail (Postmarked proposed publication (Notice of Publication)	extract oil and gas OR ed by Chapter 22B, Art iia (see page 2) Chapter 22B of the West i application, a locati on the above named attached) estal receipt attached)	virginia Code on plat, and parties,by:
fami atta resp is t	I have read and understand Chapter he terms and conditions of any perm I certify under penalty of law the liar with the information submitted chments, and that based on my inquionsible for obtaining the information rue, accurate, and complete.  I am aware that there are significant that including the possibility well Operator	nit issued under this a at I have personally ex d on this application of ary of those individual ion, I believe that the cant penalties for subr	application. camined and am form and all ls immediately e information mitting false
	By:	- acknown	
	Address <u>PO DR</u> JANE	AWER R LEW, WV 26378-0080	
Subs	Telephone $30$ cribed and sworn before me this $28T$		, 19 <u>89</u>
R.	ichard K. Elamile		
My c	commission expires OCTOBER 14, 19	93	