

STATE OF WEST VIRGINIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS

AFFIDAVIT OF PLUGGING AND FILLING WELL

AFFIDAVIT SHOULD BE IN TRIPLICATE, one copy mailed to the Department, one copy to be retained by the Well Operator and the third copy (and extra copies if required) should be mailed to each coal operator at their respective addresses.

Farm name: Chapman, Adaline Operator Well No.: No. 2

LOCATION: Elevation: 931.1 ft. Quadrangle: Milton WV
District: Grant District County: Cabell
Latitude: 38.397398 Feet South of 38 Deg. 23 Min. 50.6328 Sec.
Longitude: -82.14604904093741 Feet West of 82 Deg. 08 Min. 45.7765 Sec.

Well Type: OIL _____ GAS x _____

Company Teavee Oil & Gas, Inc
P.O. Box 27
Winfield, WV 25213

Coal Operator NA
or Owner _____

Agent Duane K. Bowers

Coal Operator NA
or Owner _____

Permit Issued Date June 23, 2017

AFFIDAVIT

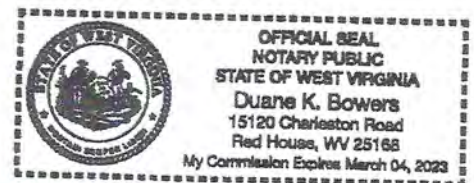
STATE OF WEST VIRGINIA,
County of Cabell ss:

Rickey Duckworth and Robert Stewart being first duly sworn according to law depose and say that they are experienced in the work of plugging and filling oil and gas wells and were employed by the above named well operator, and participated in the work of plugging and filling the above well say that said work was commenced on the 30th day of August, 2018, and the well was plugged and filled in the following manner:

TYPE	FROM	TO	PIPE REMOVED	LEFT
cement	2187'	1970'	210ft. 7 in.	1814ft.
cement	1450'	1350'		
cement	850'	750'		
cement	500'	280'		
cement	245'	145'		
cement	100'	surface		

Description of monument: 7 in. pipe with API no. on attached plate and that the work of plugging and filling said well was completed on the 5th day of October, 2018.

And further deponents saith not. Rickey Duckworth
Robert A. Stewart



Sworn and subscribe before me this 12 day of October, 2018

My commission expires: 03/04/2023

Duane K. Bowers
Notary Public

Affidavit reviewed by the Office of Oil and Gas:

[Signature]

Title: Inspector

State of West Virginia
Department of Environmental Protection - Office of Oil and Gas
Discharge Monitoring Report
Oil and Gas General Permit

Company Name: Teavee Oil & Gas, Inc.
API No: 47-011-00337-P County: Cabell
District: Grant District Well No: No. 2
Farm Name: Adaline Chapman

Discharge Date/s From: (MMDDYY) N/A To: (MMDDYY) N/A

Discharge Times. From: N/A To: N/A

Total Volume to be Disposed from this facility (gallons): No fluid to discharge

Disposal Option(s) Utilized (write volumes in gallons):

- (1) Land Application: _____ (Include a topographical map of the Area.)
- (2) UIC: _____ Permit No. _____
- (3) Offsite Disposal: _____ Site Location: _____
- (4) Reuse: _____ Alternate Permit Number: _____
- (5) Centralized Facility: _____ Permit No. _____
- (6) Other method: _____ (Include an explanation)

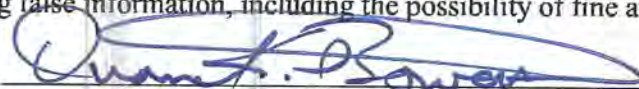
Follow Instructions below to determine your treatment category:

Optional Pretreatment test: _____ Cl- mg/l _____ DO mg/l

1. Do you have permission to use expedited treatment from the Director or his representative? (Y/N) _____ If yes, who? _____ and place a four (4) on line 7. If not go to line 2
2. Was Frac Fluid or flowback put into the pit? (Y/N) _____ If yes, go to line 5. If not, go to line 3.
3. Do you have a chloride value pretreatment (see above)? (Y/N) _____ If yes, go to line 4. If not, go to line 5.
4. Is the Chloride level less than 5000 mg/l? (Y/N) _____ If yes, then enter a one (1) on line 7.
5. Do you have a pretreatment value for DO? (See above) (Y/N) _____ If yes, go to line 6. If not, enter a three (3) in line 7.
6. Is the DO level greater than 2.5 mg/l? (Y/N) _____ If yes, enter a two (2) on line 7. If not, enter a three (3) on line 7.
7. _____ is the category of your pit. Use the Appropriate section.
8. Comments on Pit condition: Pit liner unused and removed upon reclamation of well site

Name of Principal Exec. Officer: Duane K. Bowers
Title of Officer: Vice President
Date Completed: 10/16/2018

I certify under penalty of law that I have personally examined and am familiar with the information submitted on this document and all the attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.



Signature of a Principal Exec. Officer or Authorized agent.

AF. 11-9-2018

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Category 1
Sampling Results
API No : 47-011-00337-P

Parameter	Predischarge		Discharge		Units
	Limits	Reported	Limits	Reported	
pH	6-10	_____	6-10	_____	S.U
Settling Time	5	_____	N/A	N/A	Days
Fe	6	_____	6	_____	mg/l
D.O.	2.5	_____	2.5	_____	mg/l
Settleable Sol.	0.5	_____	0.5	_____	mg/l
Cl	5,000	_____	5,000	_____	mg/l
Oil	Trace	_____	Trace	_____	Obs.
TOC**		_____	Monitor	_____	mg/l
Oil and Grease		_____	Monitor	_____	mg/l
Total Al***		_____	Monitor	_____	mg/l
TSS		_____	Monitor	_____	mg/l
Total Mn	Monitor	_____	Monitor	_____	mg/l
Volume		_____	Monitor	_____	Gal
Flow		_____	Monitor	_____	Gal/min
Disposal Area		_____	Monitor	_____	Acres

*** Al is only reported if the pH is above 9.0

Category 2
Sampling Results
API No : 47-011-00337-P

Parameter	Predischarge		Discharge		Units
	Limits	Reported	Limits	Reported	
pH	6-10	_____	6-10	_____	S.U
Settling Time	10	_____	N/A	N/A	Days
Fe	6	_____	6	_____	mg/l
D.O.	2.5	_____	2.5	_____	mg/l
Settleable Sol.	0.5	_____	0.5	_____	mg/l
Cl*	12,500	_____	12,500	_____	mg/l
Oil	Trace	_____	Trace	_____	Obs.
TOC**		_____	Monitor	_____	mg/l
Oil and Grease		_____	Monitor	_____	mg/l
Total Al***		_____	Monitor	_____	mg/l
TSS		_____	Monitor	_____	mg/l
Total Mn	Monitor	_____	Monitor	_____	mg/l
Volume		_____	Monitor	_____	Gal
Flow		_____	Monitor	_____	Gal/min
Disposal Area		_____	Monitor	_____	Acres

* Can be 25,000 with inspector's approval,

(Inspector's signature): _____ Date: _____
 ** Include a description of your aeration technique. Aeration Code: _____
 *** Al is only reported if the pH is above 9.0

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Category 3
Sampling Results
API No : 47-011-00337-P

Parameter	Predischarge		Discharge		Units
	Limits	Reported	Limits	Reported	
pH	6-10	_____	6-10	_____	S.U
Settling Time	20	_____	N/A	N/A	Days
Fe	6	_____	6	_____	mg/l
D.O.	2.5	_____	2.5	_____	mg/l
Settleable Sol.	0.5	_____	0.5	_____	mg/l
Cl*	12,500	_____	12,500	_____	mg/l
Oil	Trace	_____	Trace	_____	Obs.
TOC**		_____	Monitor	_____	mg/l
Oil and Grease		_____	Monitor	_____	mg/l
Total A1***		_____	Monitor	_____	mg/l
TSS		_____	Monitor	_____	mg/l
Total Mn	Monitor	_____	Monitor	_____	mg/l
Volume		_____	Monitor	_____	Gal
Flow		_____	Monitor	_____	Gal/min
Disposal Area		_____	Monitor	_____	Acres

* Can be 25,000 with inspector's approval,

(Inspector's signature): _____

Date: _____

** Include a description of your aeration technique.

Aeration Code: _____

*** A1 is only reported if the pH is above 9.0.

Category 4
Sampling Results
API No: 47-011-00337-P

Parameter	Predischarge		Discharge		Units
	Limits	Reported	Limits	Reported	
pH	6-10	_____	6-10	_____	S.U
Settling Time	1	_____	N/A	N/A	Days
Fe	Monitor	_____	Monitor	_____	mg/l
D.O.	Monitor	_____	Monitor	_____	mg/l
Settleable Sol.	Monitor	_____	Monitor	_____	mg/l
Cl*	12,500	_____	12,500	_____	mg/l
Oil	Trace	_____	Trace	_____	Obs.
TOC**		_____	Monitor	_____	mg/l
Oil and Grease		_____	Monitor	_____	mg/l
TSS		_____	Monitor	_____	mg/l
Total Mn	Monitor	_____	Monitor	_____	mg/l
Volume		_____	Monitor	_____	Gal
Flow		_____	Monitor	_____	Gal/min
Activated Carbon (0.175)		_____	N/A	N/A	lb/Bl
Date Site Reclaimed	N/A	N/A			10 days from dis.
Disposal Area		_____	Monitor	_____	Acres

* Can be 25,000 with inspector's approval,

(Inspector's signature): Allen Flowers

Date: 11/9/2018