

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

DATE: 11/04/2011
API #: 47-087-03432 - W

Farm name: Hall Operator Well No.: 495

LOCATION: Elevation: 917.17 Quadrangle: Looneyville

District: Smithville County: Roane
Latitude: _____ Feet South of 38 Deg. 42 Min. 05.44 Sec.
Longitude _____ Feet West of -81 Deg. 20 Min. 11.99 Sec.

Company: Prime Operating Company

Address:	Casing & Tubing	Used in drilling	Left in well	Cement fill up Cu. Ft.
<u>Charleston, WV</u>	<u>8 5/8" Existing</u>		<u>410'</u>	<u>160 SKS</u>
Agent: <u>Halsey M. Whitney</u>	<u>4 1/2" Existing</u>		<u>2114'</u>	<u>350 SKS - 1665'</u>
Inspector: <u>Ed Gainer</u>	<u>2 3/8" Existing</u>		<u>1922'</u>	
Date Permit Issued: <u>10/24/11</u>				
Date Well Work Commenced: <u>10-30-11</u>				
Date Well Work Completed: <u>10-30-11</u>				
Verbal Plugging:				
Date Permission granted on:				
Rotary <input type="checkbox"/> Cable <input type="checkbox"/> Rig <input type="checkbox"/>				
Total Vertical Depth (ft):				
Total Measured Depth (ft):				
Fresh Water Depth (ft.):				
Salt Water Depth (ft.):				
Is coal being mined in area (N/Y)? <u>N</u>				
Coal Depths (ft.): <u>None</u>				
Void(s) encountered (N/Y) Depth(s) <u>N</u>				

APPROVAL
NAME: [Signature]
DATE: 5-25-17

OPEN FLOW DATA (If more than two producing formations please include additional data on separate sheet)

Producing formation None - Injection into Big Injun Pay zone depth (ft) 2060'
Gas: Initial open flow _____ MCF/d Oil: Initial open flow _____ Bbl/d
Final open flow _____ MCF/d Final open flow _____ Bbl/d
Time of open flow between initial and final tests _____ Hours
Static rock Pressure 0 psig (surface pressure) after 4 Hours

Second producing formation _____ Pay zone depth (ft) _____
Gas: Initial open flow _____ MCF/d Oil: Initial open flow _____ Bbl/d
Final open flow _____ MCF/d Final open flow _____ Bbl/d
Time of open flow between initial and final tests _____ Hours
Static rock Pressure _____ psig (surface pressure) after _____ Hours

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WV Department of
Environmental Protection

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.

[Signature]
Signature

6-14-16
Date

[Signature]
06/02/2017

