

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

API 47 - 091 - 01309 County Taylor District Courthouse  
Quad Grafton 7.5' Pad Name Veltri Field/Pool Name \_\_\_\_\_  
Farm name Anthony J. Veltri Well Number 4HM  
Operator (as registered with the OOG) Mountaineer Keystone, LLC  
Address 6031 Wallace Rd Ext., Suite 300 City Wexford State PA Zip 15090

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

Elevation (ft) 1476 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)  
NA

Date permit issued 09/26/2014 Date drilling commenced 2/09/2015 Date drilling ceased 2/09/2015  
Date completion activities began NA Date completion activities ceased NA  
Verbal plugging (Y/N) NA Date permission granted NA Granted by NA

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

Freshwater depth(s) ft None Reported Open mine(s) (Y/N) depths N  
Salt water depth(s) ft None Reported Void(s) encountered (Y/N) depths N  
Coal depth(s) ft None Reported Cavern(s) encountered (Y/N) depths N  
Is coal being mined in area (Y/N) N

\* to release permit for well transfer,  
Well not completed.

Reviewed by:  
**APPROVED**  
NAME: Gregualin Thonta  
DATE: 5/24/2017

API 47- 091 - 01309 Farm name Anthony J. Veltri Well number 4HM

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	30"	20"	80'	New	94.00	NA	Y
Surface	NA	NA	NA	NA	NA	NA	NA
Coal	NA	NA	NA	NA	NA	NA	NA
Intermediate 1	NA	NA	NA	NA	NA	NA	NA
Intermediate 2	NA	NA	NA	NA	NA	NA	NA
Intermediate 3	NA	NA	NA	NA	NA	NA	NA
Production	NA	NA	NA	NA	NA	NA	NA
Tubing	NA	NA	NA	NA	NA	NA	NA
Packer type and depth set		NA					

Comment Details Cement to surface on Conductor.

CEMENT DATA	Class/Type of Cement	Number of Sacks	Slurry wt (ppg)	Yield (ft <sup>3</sup> /sks)	Volume (ft <sup>3</sup> )	Cement Top (MD)	WOC (hrs)
Conductor	A	225	15.6	1.2	270	Surface	8+
Surface	NA	NA	NA	NA	NA	NA	NA
Coal	NA	NA	NA	NA	NA	NA	NA
Intermediate 1	NA	NA	NA	NA	NA	NA	NA
Intermediate 2	NA	NA	NA	NA	NA	NA	NA
Intermediate 3	NA	NA	NA	NA	NA	NA	NA
Production	NA	NA	NA	NA	NA	NA	NA
Tubing	NA	NA	NA	NA	NA	NA	NA

Drillers TD (ft) 80 Loggers TD (ft) NA  
 Deepest formation penetrated NA Plug back to (ft) NA  
 Plug back procedure NA

Kick off depth (ft) NA

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 \_\_\_\_\_  
20"- No centralizers

WAS WELL COMPLETED AS SHOT HOLE  Yes  No DETAILS \_\_\_\_\_  
 NA

WAS WELL COMPLETED OPEN HOLE?  Yes  No DETAILS \_\_\_\_\_  
 NA

WERE TRACERS USED  Yes  No TYPE OF TRACER(S) USED \_\_\_\_\_  
 NA

API 47-091 - 01309 Farm name Anthony J. Veltri Well number 4HM

PERFORATION RECORD

Stage No.	Perforation date	Perforated from MD ft.	Perforated to MD ft.	Number of Perforations	Formation(s)
NA					

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)
NA								

Please insert additional pages as applicable.

API 47- 091 - 01309 Farm name Anthony J. Veltri Well number 4HM

PRODUCING FORMATION(S)	DEPTHS
NA	TVD MD
_____	_____
_____	_____
_____	_____

Please insert additional pages as applicable.

GAS TEST  Build up  Drawdown  Open Flow OIL TEST  Flow  Pump

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

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

LITHOLOGY/ FORMATION	TOP DEPTH IN FT	BOTTOM DEPTH IN FT	TOP DEPTH IN FT	BOTTOM DEPTH IN FT	DESCRIBE ROCK TYPE AND RECORD QUANTITY AND TYPE OF FLUID (FRESHWATER, BRINE, OIL, GAS, H <sub>2</sub> S, ETC)
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NA	0	NA	0	NA	NA

Please insert additional pages as applicable.

Drilling Contractor Butch's Rat Hole  
Address 1428 Rt 519 City Eighty Four State PA Zip 15330

Logging Company \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cementing Company Universal Well Services  
Address 18360 Technology Dr. Box 4 City Meadville State PA Zip 16335

Stimulating Company \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please insert additional pages as applicable.

Completed by \_\_\_\_\_ Telephone \_\_\_\_\_  
Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

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

API 47-091-01310 County Taylor District Courthouse  
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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

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Production hole  Air  Mud  Fresh Water  Brine  
Mud Type(s) and Additive(s)  
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Please note: Operator is required to submit a plugging application within 5 days of verbal permission to plug

Freshwater depth(s) ft None Reported Open mine(s) (Y/N) depths N  
Salt water depth(s) ft None Reported Void(s) encountered (Y/N) depths N  
Coal depth(s) ft None Reported Cavern(s) encountered (Y/N) depths N  
Is coal being mined in area (Y/N) N

\* Interim to Release permit  
for Well Transfer, Well  
not completed.

**APPROVED** by:  
NAME: Jacquelin Thornton  
DATE: 5/24/2017

API 47-091 - 01310 Farm name Anthony J. Veltri Well number 5HM

CASING STRINGS	Hole Size	Casing Size	Depth	New or Used	Grade wt/ft	Basket Depth(s)	Did cement circulate (Y/N) * Provide details below*
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Surface	NA	NA	NA	NA	NA	NA	NA
Coal	NA	NA	NA	NA	NA	NA	NA
Intermediate 1	NA	NA	NA	NA	NA	NA	NA
Intermediate 2	NA	NA	NA	NA	NA	NA	NA
Intermediate 3	NA	NA	NA	NA	NA	NA	NA
Production	NA	NA	NA	NA	NA	NA	NA
Tubing	NA	NA	NA	NA	NA	NA	NA
Packer type and depth set		NA					

Comment Details Cement to surface on Conductor.

CEMENT DATA	Class/Type of Cement	Number of Sacks	Slurry wt (ppg)	Yield (ft <sup>3</sup> /sks)	Volume (ft <sup>3</sup> )	Cement Top (MD)	WOC (hrs)
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Surface	NA	NA	NA	NA	NA	NA	NA
Coal	NA	NA	NA	NA	NA	NA	NA
Intermediate 1	NA	NA	NA	NA	NA	NA	NA
Intermediate 2	NA	NA	NA	NA	NA	NA	NA
Intermediate 3	NA	NA	NA	NA	NA	NA	NA
Production	NA	NA	NA	NA	NA	NA	NA
Tubing	NA	NA	NA	NA	NA	NA	NA

Drillers TD (ft) <sup>80</sup> \_\_\_\_\_ Loggers TD (ft) <sup>NA</sup> \_\_\_\_\_  
 Deepest formation penetrated <sup>NA</sup> \_\_\_\_\_ Plug back to (ft) <sup>NA</sup> \_\_\_\_\_  
 Plug back procedure <sup>NA</sup> \_\_\_\_\_

Kick off depth (ft) <sup>NA</sup> \_\_\_\_\_

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

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NA								

Please insert additional pages as applicable.

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PRODUCING FORMATION(S)	DEPTHS	
NA	TVD	MD

Please insert additional pages as applicable.

GAS TEST  Build up  Drawdown  Open Flow OIL TEST  Flow  Pump

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

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

LITHOLOGY/ FORMATION	TOP DEPTH IN FT NAME TVD	BOTTOM DEPTH IN FT TVD	TOP DEPTH IN FT MD	BOTTOM DEPTH IN FT MD	DESCRIBE ROCK TYPE AND RECORD QUANTITY AND TYPE OF FLUID (FRESHWATER, BRINE, OIL, GAS, H <sub>2</sub> S, ETC)
NA	0	NA	0	NA	NA

Please insert additional pages as applicable.

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Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please insert additional pages as applicable.

Completed by \_\_\_\_\_ Telephone \_\_\_\_\_  
Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_