

State of West Virginia DEPARTMENT OF ENERGY

DIVISION OF ONLY CAS Division of Oil and Gas

DEPARTMENT OF LARRAY

Well Operator's Report of Well Work

						_	
Farm name:	LEASEBURG,	FORREST	ETUX.	Operator	Well No.: L	EASEBURG	#1
LOCATION:	Elevation:	919.00	Quad	rangle: SF	IIRLEY		
	District: Latitude: Longitude	12250 F	et Sou	th of 39	ounty: TYLEF Deg. 27Min. Deg. 50 Mir	30 Sec.	•
P.	ASTAL CORP., O. BOX 4119 RKERSBURG, W		-0000		Used in Drilling	Left	Cement Fill Up Cu. Ft.
Agent: WII	LLIAM E. CAR	PENTER		Tubing Size	DITTTING		
Inspector: GLEN P. ROBINSON Permit Issued: 12/05/89 Well work Commenced: 12/12/89			11 3/4	126	126	118 Cuft.	
Well work Completed: 12/27/89 Verbal Plugging		·····	8 5/8	 	1873 /	611 Cuft.	
Rotary X Cable Rig Total Depth (feet) 5090 Fresh water depths (ft) 100' 410'			4 1/2	 	 4978	503 Cuft.	
	depths (ft)					 - -	
Is coal be Coal Depth	ing mined ins (ft):	area (Y lone	<u></u> N		 	 	
OPEN FLOW	DATA	.					'
Gas:	cing formati Initial oper Final open f Time of oper c rock Press	flow 5! low 2' flow be	75 MCF tween i	r/d	Pay zone nitial open inal open f d final tes e pressure)	low	1) 4897 - 4902 0 Bb1/d 0 Bb1/d 24 Hours Hours
Gas:	d producing Initial oper Final open i Time of oper c rock Press	n flow flow_ n flow be	MCE MCE tween i	r/d F initial an	Pay zone nitial open inal open f d final tes e pressure)	flow low ts	Bbl/d Bbl/d Hours Hours
INTERVALS,	ACK OF THIS FRACTURING IS A SYSTI COAL ENCOUN	OR STIN EMATIC DE	IULATINO TAILED	GEOLOGIC	AL CHANGE,	ETC. 2).	THE WELL
		For:	By: V	L CORP., T	Chyente 189		
				/		JAN 19	1990

Formation	Color	Hard/Soft	Тор	Bottom	
Clay	Yellow	Soft	0	15	
Sand	White	Hard	15	75	
Shale	Red	Med	75	90	
Sand	Gray	Hard	90	110	wet 100'
R Shale	Reď	Med	110	131	•
Sand Shale	Gray	Med	131	163	* *
Sand	White	Hard	6114 U	200	
Shale	Red	Soft	200	205	
Shale	Gray	Soft	₹205	225	
Sandy Shale	Gray	Med	225	350	
Shale	Gray	Med	350	360	
Sandy Shale	GRay	Med	360	410	wet 410
sandy Shale	Gray	Med	410	540	
Shaeĺ	Gray	Med	540	580	
Sand	White	Hard	580	630	
Sand/Shale	Gray	Med	··· 630	770	
RR	Reď	Soft	770	810	
Shale	Blue/Gray	Med	810	1050	
RR	•	Soft	1050	1075	
Shale	Gray	Med	1075	1200	
Sand	Gray	Med	1200	1380	
Sandy Shale	Gray	Hard	1380	1400	
Sand	White	Hard	1400	1450	
Sandy Shale	Gray	Med	1450	1680	
Sand/Shale	Gray	Med	1680	1810	
Lime	White	Hard	1810	1908	
Lime/Sand	White	Hard	1908	2000	gas 1950
Sand	Gray	Hard	2000	2040	•
Sand/Shale	Dark	Med	2040	2225	
Sand	Gray	Hard	2225	2383	
SandyShale	Gray	Med	2383	3058	
Sand	Gray/Blue	Med	3058	4328	
Shale	Gray	Soft	4328	5090	

Single Stage Water Frac-Benson Formation

Shot 14 .39 holes from 4897° to 4902° and broke down with 500 gals of 15% Fe Acid at 1863 lbs. Ran 50 sacks of 80/100 mesh and 350 sacks of 20/40 mesh sand at a rate of 22.2 BPM for a total volumn of 565 bbls. Average treating pressure was 2758 lbs. with and ISIP of 2103 lbs.

Chang.

•					AC	05 1357
				S	12/05	95- 1357 5189
FORM WW-2B STATE OF WEST VIRGINIA EXPONENT (2/05/9) DEPARTMENT OF ENERGY, DIVISION OF OIL AND GAS WELL WORK PERMIT APPLICATION						
1) Well Op	erator:_	The Coas	tal Corporati	on 10/25	- (1) 6	06
	Logophung #1					
4) Well ty	pe: (a)	0i1_/	or Gas	<u>X</u> /		
(b) If Gas: Production/ Underground Storage/ Deep/ 425						
5) Propose	d Target	Formation	n(s):Ben			
6) Propose	d Total D	epth:	5100	feet		
7) Approxi	.mate fres	h water s	trata dept	hs: 230,	425/3241	
8) Approxi	.mate salt	: water de	pths:	1463, 14	188, 1562	
9) Approxi	mate coal	. seam dep	oths: 710	, 711' - 742	2,743'	
				,	1	es/ No <u>X_</u> /
11) Propose	ed Well Wo	ork: Dril	l and Stimula	ate <i>Mell W</i>	ell.	
12)						
mun n				ING PROGRAM	MMPDVALC	CEMENT
TYPE	<u>\</u>	BPECIFICAL	TONS	FOOTAGE I	IERVALS	CERENI
KIE PIE	Size	Grade	Weight per ft.	For drilling	Left in well	Fill-up (cu. ft.)
Conductor	11 3/4			120'	120'	CTS
Fresh Water						
Coal					CK S	38CSA18-11-2-2
Intermediate	8 5/8	ERW	23#	1860	1860'	By Rule 38 CSR 18. 3
Production	4 1/2	ERW	10.5#	5100	5100	By Rule 38 SCR 18.11-1
Tubing						
Liners Disciplination of the Liners Liners						
PACKERS: Kind						
Depths set						
For Divison of Oil and Gas Use Only DEPARTMENT CLENERGY						
Fee(s) paid: Well Work Permit Reclamation Fund WPCP						
Plat J WW-9 J WW-2B J Bond MARIANE Agent (Type)						

	المستعلمات والمرابعة فتنا فيها أميان المساء المرابعة المر	4 •
D 1 6		,
Page 1 of		Date: 12/4/89
Form WW2-A	2) DEC 05 1989	Operator's well number
(09/87)	DEO CO 1000	Leaseburg #1
File Copy	DIVISION OF 01. 3 GAS 3)	
	DEPARTMENT COUNERGY	State - County - Permit
	DEFAR MENT CALLERY	State County - Permit
	STATE OF WEST	VIDCINIA
	DEPARTMENT OF ENERGY, DI	VISION OF OIL AND GAS
	NOTICE AND APPLICATION F	OR A WELL WORK PERMIT
4) Surfa	ce Owner(s) to be served:	E\ (=\
(a) N	ame Formest E Leaseburg IT HV	5) (a) Coal Operator:
)ddro	S. Alma WV 20120	Name
Addres	ss Alma, WV 26120	Address N/A
(h) N		
(D) N	ame	(b) Coal Owner(s) with Declaration
Addre	SS	Name
		Address N/A
(c) Na	ame	
Addre	ss	Name
		Address
6) Inspec	ctor <u>Geln P. Robinson</u>	(c) Coal Lessee with Declaration
Addres	ss Rt I #6 Mt. Pleasant Est.	Name
	Mineralwells, WV 26150	Name
Teleni	hone (304) - 489-2736	Address
	469-2736	
	TO THE PERSON(S) NAMED ABO	
Includ	ded is the lease or leases or	other continuing contract or
contracts !	Dy Which I hold the right to a	extract oil and dae OP
X Includ	ded is the information require	ed by Chapter 228. Article 1
section 8(0	1) Of the Code of West Virgin	ia (see page 2)
I cert	tify that as required under Cl	hapter 22B of the West Virginia Code
I have serv	ved copies of this notice and	application, a location plat, and
accompanyi	og documents nages 1 through	on the above named parties, by:
Y I	Personal Service (Affidavit a	on the above named parties, by:
	Portified Wail (Date)	ttached)
	Certified Mail (Postmarked pos	stal receipt attached)
E	Publication (Notice of Publica	ation attached)
T 1		
ı nave	read and understand Chapter	22B and 38 CSR 11-18, and I agree
to the felt	us and conditions of any permi	it issued under this application
1 cert	ciry under penalty of law that	I have personally evamined and am
ramiliar W	ith the information submitted	on this application form and all
accacimence	o, and that based on my inquir	CV Of those individuals immediately
resbousinie	: IOI ODTAINING the intormatio	on, I believe that the information
is crue, at	curate, and complete.	
Iama	aware that there are significa	ant penalties for submitting false
information	, including the possibility of	of fine and impringment
	Wall Onerstor	The Constal Company:
	By:	The Coastal Corporation
		Meland.
		d Supervisor
	Address P.	U. BOX 4119
	— Par	kersburg, WV 26104
Subseribed	Telephone 304-	-428-3471
agnact Med	and sworn before me this uth	day of Docombon 19 so

___Notary Public