

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

API 47 - 103 - 01747 County WETZEL District GRANT
Quad PINE GROVE Pad Name L E DULANEY Field/Pool Name WILEYVILLE
Farm name ABLE, PAUL ETAL Well Number 201
Operator (as registered with the OOG) H G ENERGY LLC.
Address 5260 DUPONT RD City PARKERSBURG State WV Zip 26101

As Drilled location NAD 83/UTM Attach an as-drilled plat, profile view, and deviation survey
Top hole Northing 4,381,870 Easting 528,462
Landing Point of Curve Northing _____ Easting _____
Bottom Hole Northing _____ Easting _____

Elevation (ft) 1,276 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)
N/A

Date permit issued 8/28/13 Date drilling commenced N/A Date drilling ceased N/A
Date completion activities began 09/11/13 Date completion activities ceased 09/17/13
Verbal plugging (Y/N) N Date permission granted _____ Granted by _____

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

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

Reviewed by:

APPROVED

NAME: Jacquelin Thornton
DATE: 6/22/2016

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Environmental Protection

AX WS
06/23/16
06/24/2016

API 47- 103 - 01747 Farm name ABLE, PAUL ETAL Well number 201

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							
Surface	11"	8 5/8"	1150	existing	LS		Existing
Coal							
Intermediate 1							
Intermediate 2							
Intermediate 3							
Production	7 7/8"	4 1/2"	3218	existing	J-55 / 10.5		Existing
Tubing		2 3/4"	3016	N	J-55 / 4.7		
Packer type and depth set							

Comment Details packer set @ 3016'

CEMENT DATA	Class/Type of Cement	Number of Sacks	Slurry wt (ppg)	Yield (ft ³ /sks)	Volume (ft ³)	Cement Top (MD)	WOC (hrs)
Conductor							
Surface	Reg Neat	495	15.6	1.18	584	Surface	
Coal							
Intermediate 1							
Intermediate 2							
Intermediate 3							
Production	50:50 Pozmix	140	14.2	1.27	178	Existing	
Tubing							

Drillers TD (ft) 3321 Loggers TD (ft) N/A
 Deepest formation penetrated Gordon Plug back to (ft) N/A
 Plug back procedure N/A

Kick off depth (ft) N/A

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 _____

WAS WELL COMPLETED AS SHOT HOLE Yes No DETAILS _____

WAS WELL COMPLETED OPEN HOLE? Yes No DETAILS _____

WERE TRACERS USED Yes No TYPE OF TRACER(S) USED _____

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PRODUCING FORMATION(S)	DEPTHS	
Gordon	3122	3134
	TVD	MD

Please insert additional pages as applicable.

GAS TEST Build up Drawdown Open Flow OIL TEST Flow Pump

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

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

LITHOLOGY/ FORMATION	TOP	BOTTOM	TOP	BOTTOM	DESCRIBE ROCK TYPE AND RECORD QUANTITY AND TYPE OF FLUID (FRESHWATER, BRINE, OIL, GAS, H ₂ S, ETC)
	DEPTH IN FT NAME TVD	DEPTH IN FT TVD	DEPTH IN FT MD	DEPTH IN FT MD	
Sand/Shale	0		0		See Original WR35

Please insert additional pages as applicable.

Drilling Contractor _____
Address _____ City _____ State _____ Zip _____

Logging Company _____
Address _____ City _____ State _____ Zip _____

Cementing Company _____
Address _____ City _____ State _____ Zip _____

Stimulating Company _____
Address _____ City _____ State WV Zip _____

Please insert additional pages as applicable.

Completed by Roger Feldman Telephone 304-420-1107
Signature _____ Title Operations Manager Date 6/15/16

Submittal of Hydraulic Fracturing Chemical Disclosure Information Attach copy of FRACFOCUS Registry

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