

WR-35
Rev (9-11)

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

DATE: 8/30/12
API #: 047-005-02241

Farm name: Boone East Development Co. Operator Well No.: NREC # 46

LOCATION: Elevation: 1698.19' Quadrangle: Wharton 7.5'

District: Crook County: Boone
Latitude: 3923 Feet South of 37 Deg. 57 Min. 30 Sec.
Longitude: 9892 Feet West of 81 Deg. 42 Min. 30 Sec.

Company: New River Energy Corp.

Address:	Casing & Tubing	Used in drilling	Left in well	Cement fill up Cu. Ft.
125 Hurricane Branch Rd Chapmanville, WV 25508	16	30	0	
Agent: Timothy E. Comer	13 3/8	180	Open Hole	
Inspector: Barry Stollings				
Date Permit Issued: 11/09/2007				
Date Well Work Commenced: 7/23/07				
Date Well Work Completed: 7/24/07				
Verbal Plugging: Yes, Per Carlos Hively				
Date Permission granted on: 7/23/07				
Rotary <input checked="" type="checkbox"/> Cable <input type="checkbox"/> Rig <input type="checkbox"/>				
Total Vertical Depth (ft): 180'				
Total Measured Depth (ft): 180'				
Fresh Water Depth (ft.): N/A				
Salt Water Depth (ft.): N/A				
Is coal being mined in area (N/Y)? Y				
Coal Depths (ft.): N/A				
Void(s) encountered (N/Y) Depth(s) N				

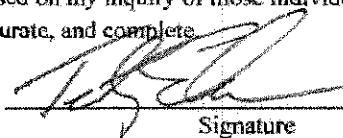
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OPEN FLOW DATA (If more than two producing formations please include additional data on separate sheet)

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

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

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

9/4/12
Date

09/14/2012

Were core samples taken? Yes _____ No

Were cuttings caught during drilling? Yes _____ No

Were Electrical, Mechanical or Geophysical logs recorded on this well? If yes, please list None

NOTE: IN THE AREA BELOW PUT THE FOLLOWING: 1). DETAILS OF PERFORATED INTERVALS, FRACTURING OR STIMULATING, PHYSICAL CHANGE, ETC. 2). THE WELL LOG WHICH IS A SYSTEMATIC DETAILED GEOLOGICAL RECORD OF THE TOPS AND BOTTOMS OF ALL FORMATIONS, INCLUDING COAL ENCOUNTERED BY THE WELLBORE FROM SURFACE TO TOTAL DEPTH.

Perforated Intervals, Fracturing, or Stimulating:

Plug Back Details Including Plug Type and Depth(s):

<u>Formations Encountered:</u>	<u>Top Depth</u>	<u>Bottom Depth</u>
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Surface:

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