

Permitting Oil and Gas Section

State of West Virginia DEPARTMENT OF ENERGY Division of Oil and Gas

Well Operator's Report of Well Work

Farm name: STRICKLING, EARL Operator Well No.: FREEMAN #1

LOCATION: Elevation: 1010.00 Quadrangle: WEST UNION

District: WESTUNION

County: DODDRIDGE

Latitude: 680 Feet South of 39 Deg. 20Min. 0 Sec. Longitude 1320 Feet West of 80 Deg. 47 Min. 30 Sec.

Company:QUAKER STATE CORPORATION 1226 PUTNAM HOWE DR. P O B 189 | Casing | Used in | Left | Cement BELPRE, OH 45714-0000 & | Fill Up|
Tubing | Drilling | in Well | Cu. Ft. | Agent: FRANK R. ROTUNDA Inspector: MIKE UNDERWOOD

Permit Issued: 02/01/90
Well work Commenced: 02/14/90
Well work Completed: 02/24/90 Verbal Plugging Permission granted on: N/A Rotary X Cable Rig
Total Depth (feet) 5090 Fresh water depths (ft) 70, 184

Salt water depths (ft) 1425

Is coal being mined in area (Y/N)?N Coal Depths (ft): N/A

	Diffing		In well Cu. Ft.		
	Size				
Control of the contro	9 5/8"	399'	 3991	c.t.s.	
source teaming functions and	7"	1238'	1238	c.t.s.	
MATERIAL SERVICES SERVICES SERVICES	4 1/2"	5024'	5024	120 sx.	
to Colizione Gibriotto Cilizando					

OPEN FLOW DATA

Producing formation Benson Pay zone depth (ft) 4859'
Gas: Initial open flow show MCF/d Oil: Initial open flow --- Bbl/d
Final open flow 80 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 Riley Pay zone depth (ft) 4515' Gas: Initial open flow show MCF/d Oil: Initial open flow --- Bbl/d Final open flow <u>comm.</u> 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

NOTE: ON BACK OF THIS FORM 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 ALL FORMATIONS, INCLUDING COAL ENCOUNTERED BY THE WELLBORE.

For: QUAKER STATE CORPORATION

By: Frank Rotunda, Designated Agent

Perf: 4859' - 4925' with 20 shots

Frac: 850 bbl. gel, 488 sx. sand, 145M SCF N2

Perf: 4515' - 4668' with 23 shots Frac: 223 bbl. fluid, 312 sx. sand, 358M SCF N2

LOG:	surface FEET	0	_	50
	shale	50		70
	sand	70		78
	shale	78	_	184
	sand	184	-	194
	silt/shale	194	****	497
٠.	sand	497	_	515
	shale	515	_	630
	sand	630		645
	shale	645		670
	sand	670		735
	shale	735		890
	sand	890	-	917
	shale	917	_	1070
	sand	1070		1096
	shale	1096		1135
	sand	1135	_	1175
	silt/shale	1175	_	1425
	salt sands	1425		1730
	silt/shale	1730		1888
	lime	1888		1983
	Big Injun	1983	***	2075
•	shale	2075		2216
	Weir	2216	-	2316
,	silt/shale	2316	_	5090

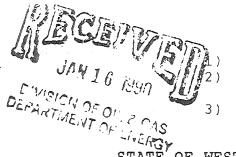
Isrued 2/01/90 017 - 3784 Expones 2/01/92 Page 4 of 10

(Type)

FORM WW-2B STATE OF WEST VIRGINIA

- CINAIN	E PERARTM	FET UP EN	K PERMIT	APPLICATION	3 2210 0210	
.a	(\$ 6.	Company work	77	·	400 (8)	670
.) Well Ope	rator:	Quaker Sta	ate Corporat	10n 70	400 (8)	
Operator	's Well N	umber: F	reeman #1		3); [†] Ele	vation: 1010'
) Well type	e: (a) 0	il_/	or Gas	XX/		•
	(b) I	f Gas: P	roduction Deep	/		a XX/
5) Proposed	Target F	ormation(s): Ber	uson, Riley		
S) Proposed	Proposed Total Depth: 5100 feet					
7) Approxim	ate fresh	water st	rata dept	hs: <u>350</u>		
8) Approxim	ate salt	water der	oths: 11	125		
			ths: N/A			
					ve mine? Ye	es/ No <u>XX</u> /
			and stimula			
,	WCII WO		and Stimure	TEC TICK WOTT		
12)		CASINO	G AND TUBI	NG PROGRAM		
TYPE	S	PECIFICAT	IONS	FOOTAGE IN	ITERVALS	CEMENT
	Size	Grade	Weight per ft.	For drilling	Left in well	Fill-up (cu. ft.)
Conductor						
Fresh Water	9 5/8''	H-40	29	400	400	C.T.S.
Coal	Account of the second of the s					360418-11-2
Intermediate	7"	H-40	20	1225	1225	C.T.S.
Production	4 1/2"	J-55	10.5	5100	5100	As required b
	<					
Tubing						-
Liners)	§		7	
PACKERS : Ki	nd zes		• •			
	pths set					
55				and Gas Use		, angelene.
					lamation Fur	
Plat	WW-9	WW-	-2B 1	Bond #50	Surety	_ I Agen

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Date: Janua	rv 3. 1989	
Operator's well	1 - 1	
Freeman #1		

API Well No: 47 - 017 - 3784 State - County - Permit

STATE OF WEST VIRGINIA DEPARTMENT OF ENERGY, DIVISION OF OIL AND GAS

	NOTICE AND APPLICATION FO	OR A WELL WORK PERMIT
4)	Surface Owner(s) to be served:	E) (n) (nn) (nn)
4)	· · · · · · · · · · · · · · · · · · ·	5) (a) Coal Operator:
	(a) Name <u>Earl Strickling</u>	Name N/A
	Address Starr Route	Address
	West Union, WV 26456	
	(b) Name	(b) Coal Owner(s) with Declaration
	Address	Name N/A
	whereastern continuous and the c	Address
	(c) Name	
	Address	Name
		Address
6)	Inspector <u>Harold Mike Underwood</u>	(c) Coal Lessee with Declaration
	Address Route 2, Box 114	Name N/A
	Salem WV 26426	Address
	Salem, WV 26426 Telephone (304)-782-1043	
	1010phone (304) <u>102 (04)</u>	
	TO THE PERSON(S) NAMED ABO	OTTE MAKE MOMICE MUAMA
	TO THE PERSON(S) NAMED ADD	OVE TAKE NOTICE THAT:
	Tambadad ta kha laasa sa l	
	Included is the lease or leases or	
	eacts by which I hold the right to	
XX	Included is the information require	ed by Chapter 22B, Article 1,
Secti	ion 8(d) of the Code of West Virgin	ia (see page 2)
	I certify that as required under C	hapter 22B of the West Virginia Code
I hav	ve served copies of this notice and	application a location plat and
30007	mpanying documents pages 1 through .	R on the share named nartice him
~~~~·	Dorsonn's Commiss ( ) Estidantis	O on the above named parties, by:
	✓ Personal Service (Affidavit a	
	Certified Mail (Postmarked post	
	Publication (Notice of Publication)	ation attached)
	I have read and understand Chapter	22B and 38 CSR 11-18, and I agree
to th	ne terms and conditions of any perm	it issued under this application.
	I certify under penalty of law that	t I have personally examined and am
fami]	liar with the information submitted	on this application form and all
attac	chments, and that based on my inqui-	ry of those individuals immediately
resno	onsible for obtaining the information	or I believe that the information
ie to	ue, accurate, and complete.	on, I believe that the infolmation
10 01	· · · · · · · · · · · · · · · · · · ·	
	I am aware that there are signification	ant penalties for submitting false
inroi	mation, including the possibility of	
	Well Operator	Quaker State Corporation
	By: <u>Frank Rotun</u>	ta Fruh Rotunda
	Its: <u>Designated</u>	Agent
	Address P.O. Bo	
	,	sburg, WV 26102
	Telephone (614)	
Subsc	cribed and sworn before me this //#/	
	and buttle before me this //bo	yanuary 13 10
	Delires L.	Par and a second
W		7 Tranch Notary Public
ий со	ommission expires Dolors L. Hetsy Public	
	hiy Commission Expir	es March 14, 1990