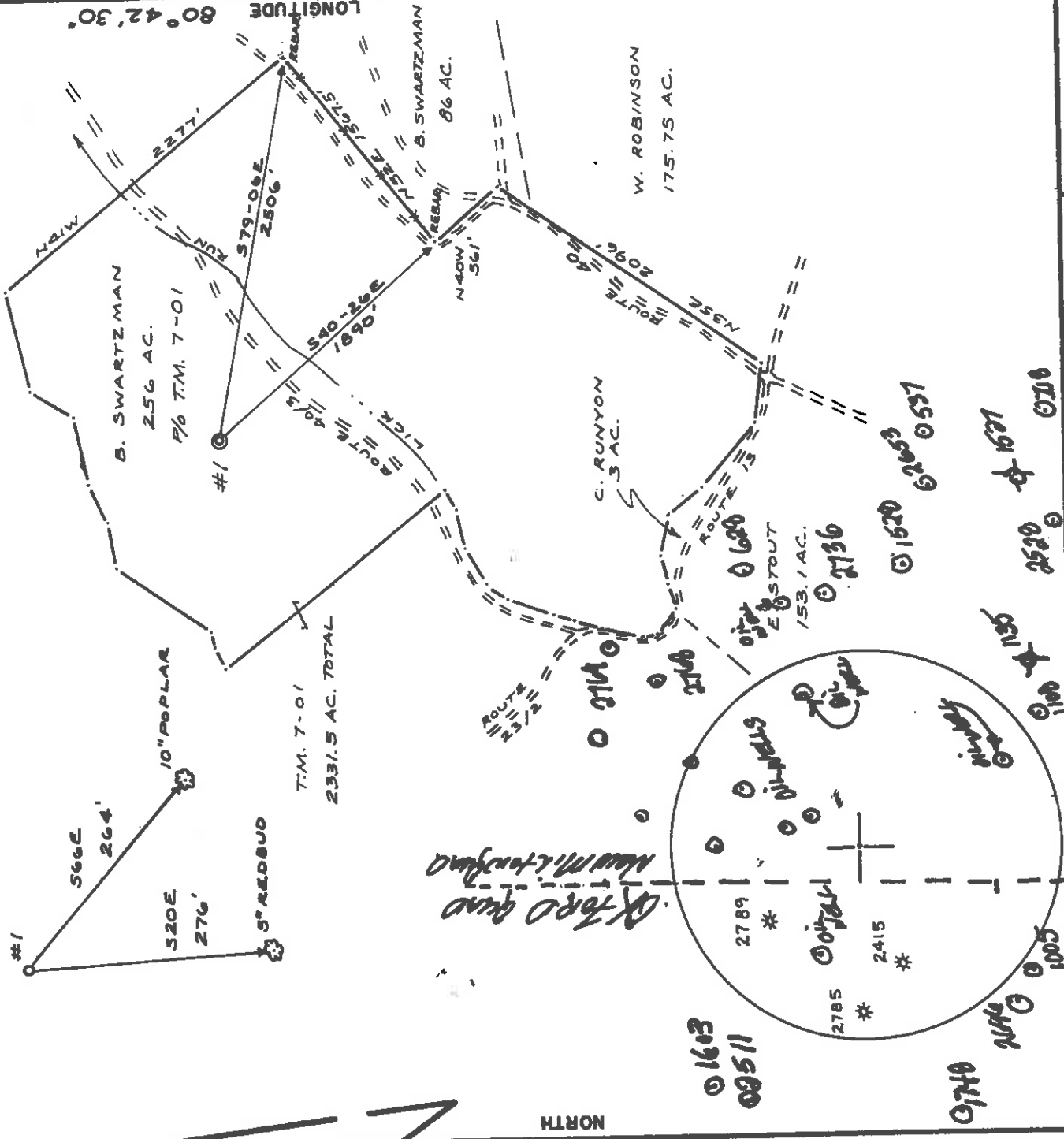


Jamie 8/2/90
REFERENCE POINTS

LATITUDE 39° 15'

LONGITUDE 80° 42' 30"



FILE NO. 90-33
 DRAWING NO. _____
 SCALE 1" = 1000'
 MINIMUM DEGREE OF ACCURACY 1/200
 PROVEN SOURCE OF ELEVATION 5M 1227'

I, THE UNDERSIGNED, HEREBY CERTIFY THAT THIS PLAT IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND SHOWS ALL THE INFORMATION REQUIRED BY LAW AND THE REGULATIONS ISSUED AND PRESCRIBED BY THE DEPARTMENT OF MINES.
 (SIGNED) *Neil Weyler*
 R.P.E. L.L.S. 632

(+) DENOTES LOCATION OF WELL ON UNITED STATES TOPOGRAPHIC MAPS
 FORM IV-6
 (8-78)



Department of Mines
 Oil & Gas Division

PLACE SEAL HERE

DATE APRIL 2, 1990
 OPERATOR'S WELL NO. P. MAXWELL
 API WELL NO. 47-017-3045
 STATE COUNTY PERMIT

Cancelled

WELL TYPE: OIL GAS LIQUID INJECTION WASTE DISPOSAL
 (IF "GAS", PRODUCTION STORAGE DEEP SHALLOW
 LOCATION: ELEVATION 1050 WATER SHED LICK RUN
 DISTRICT NEW MILTON COUNTY DODDRIDGE
 QUADRANGLE NEW MILTON 7 1/2
 SURFACE OWNER B. SWARTZMAN ACREAGE 2331.5
 OIL & GAS ROYALTY OWNER P. MAXWELL HEIRS LEASE ACREAGE 256
 LEASE NO. _____
 PROPOSED WORK: DRILL CONVERT DRILL DEEPER REDRILL FRACTURE OR STIMULATE PLUG OFF OLD FORMATION PERFORATE NEW FORMATION OTHER PHYSICAL CHANGE IN WELL (SPECIFY) _____
 PLUG AND ABANDON CLEAN OUT AND REPLUG ESTIMATED DEPTH 5300'
 TARGET FORMATION ALEXANDER
 WELL OPERATOR KEY OIL CO. INC. DESIGNATED AGENT JAN CHAPMAN
 ADDRESS 6 GARTON PLAZA ADDRESS GARTON PLAZA
 WESTON, WV 26452 WESTON, WV 26452

AUG 14 1992

5785 0000

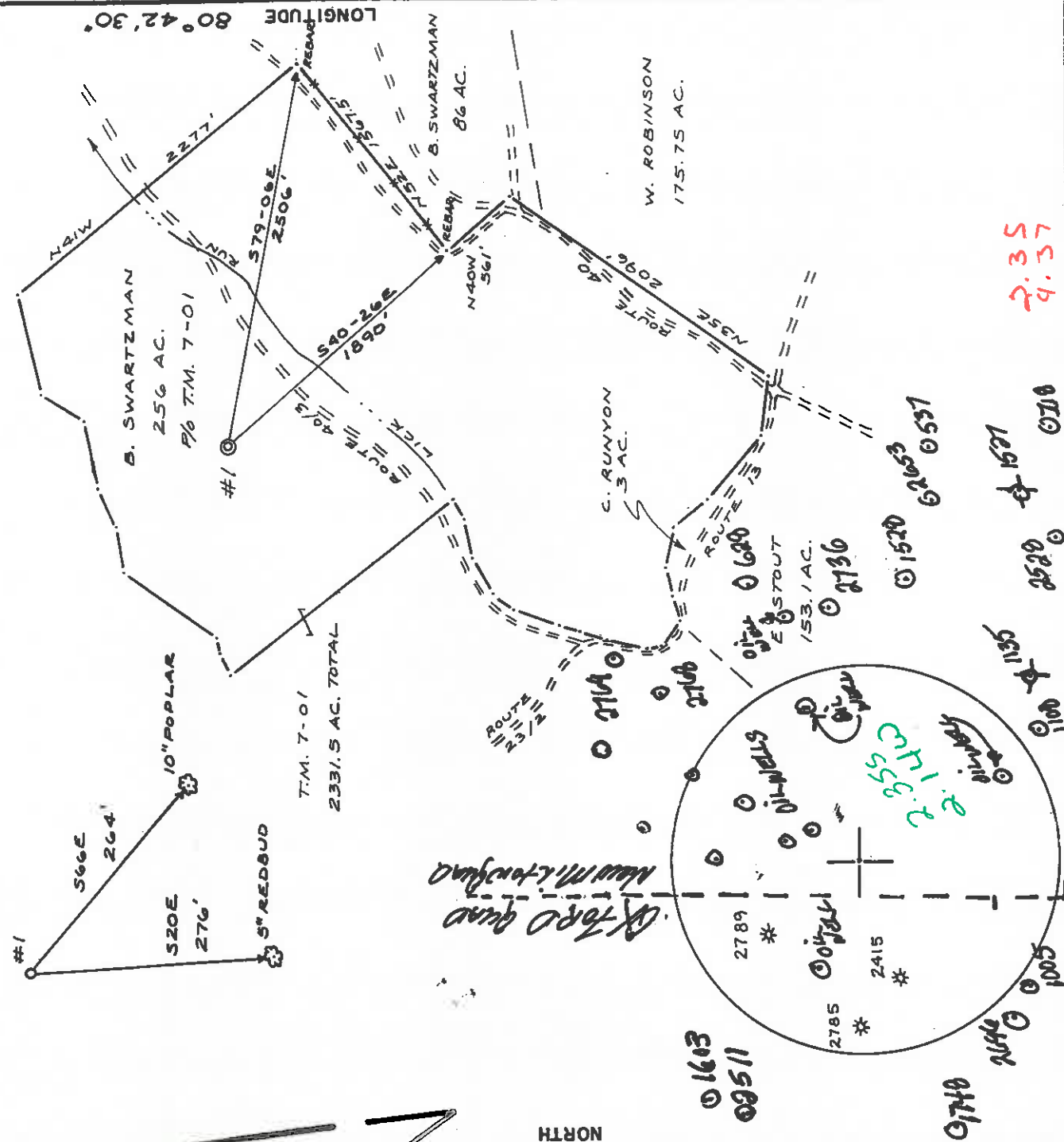
Jamie 8/2/90
REFERENCE POINTS

11,300'

LATITUDE 39°15'

12,450'

LONGITUDE 80°42'30"



NORTH

FILE NO. 90-33
DRAWING NO. _____
SCALE 1" = 1000'
MINIMUM DEGREE OF ACCURACY 1/200
PROVEN SOURCE OF ELEVATION BM 1227

I THE UNDERSIGNED, HEREBY CERTIFY THAT THIS PLAT IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND SHOWS ALL THE INFORMATION REQUIRED BY LAW AND THE REGULATIONS ISSUED AND PRESCRIBED BY THE DEPARTMENT OF MINES.
(SIGNED) Neal Hight
R.P.E. _____ L.L.S. 632

7.35
9.37

PLACE SEAL HERE

(+) DENOTES LOCATION OF WELL ON UNITED STATES TOPOGRAPHIC MAPS
FORM IV-6
(8-78)



DATE APRIL 2, 1990
OPERATOR'S WELL NO. P. MAXWELL
API WELL NO. 47-017-3845
STATE COUNTY PERMIT

Department of Mines
Oil & Gas Division

WELL TYPE: OIL GAS LIQUID INJECTION _____ WASTE DISPOSAL _____
(IF "GAS" PRODUCTION STORAGE DEEP _____ SHALLOW _____
LOCATION: ELEVATION 1050 WATER SHED LICK RUN
DISTRICT NEW MILTON COUNTY DODDRIDGE
QUADRANGLE NEW MILTON 7 1/2
SURFACE OWNER B. SWARTZMAN ACREAGE 2331.5
OIL & GAS ROYALTY OWNER P. MAXWELL HEIRS LEASE ACREAGE 256

PROPOSED WORK: DRILL CONVERT _____ DRILL DEEPER _____ REDRILL _____ FRACTURE OR STIMULATE PLUG OFF OLD FORMATION _____ PERFORATE NEW FORMATION _____ OTHER PHYSICAL CHANGE IN WELL (SPECIFY) _____

PLUG AND ABANDON _____ CLEAN OUT AND REPLUG _____
TARGET FORMATION ALEXANDER ESTIMATED DEPTH 5300' AUG 6 1990
WELL OPERATOR KEY OIL CO. INC. 475 DESIGNATED AGENT JAN CHAPMAN
ADDRESS G. GARTON PLAZA WESTON, WY 26452

ALLEN BLUEPRINT Co.

Charleston, WV

47-017-3845
 Issued 8/2/90
 Expires 8/2/92

FORM WW-2B

STATE OF WEST VIRGINIA
 DEPARTMENT OF ENERGY, DIVISION OF OIL AND GAS
 WELL WORK PERMIT APPLICATION

- 1) Well Operator: KEY OIL, INC. 25655 (6) 510
- 2) Operator's Well Number: Porter Maxwell #1 3) Elevation: 1050
- 4) Well type: (a) Oil X / or Gas X /
 (b) If Gas: Production X / Underground Storage /
 Deep / Shallow X /
- 5) Proposed Target Formation(s): Alexander
- 6) Proposed Total Depth: 5400 feet
- 7) Approximate fresh water strata depths: 30', 100', 593'
- 8) Approximate salt water depths: N/A
- 9) Approximate coal seam depths: N/A Coal seam 593'
- 10) Does land contain coal seams tributary to active mine? Yes / No X /
- 11) Proposed Well Work: Drill, Produce, Stimulate New Well

12) CASING AND TUBING PROGRAM

TYPE	SPECIFICATIONS			FOOTAGE INTERVALS		CEMENT
	Size	Grade	Weight per ft.	For drilling	Left in well	
Conductor	11-3/4	Used	42	42	0	Fill-up (cu. ft.) <u>0.6 MC.</u>
Fresh Water	8-5/8	ERW	23	1200	1200	245 sacks to surface
Coal					<u>1250' is MAX.</u>	
Intermediate						<u>505' to 1250'</u> <u>30' SPIE 11.1</u>
Production	4-1/2	J-55	10.50	5400	5400	535 sacks
Tubing	2-3/8					<u>50' SPIE 11.1</u>
Liners						

PACKERS : Kind _____
 Sizes _____
 Depths set 12-16 17

REC'D
 Division of Oil and Gas

For Division of Oil and Gas Use Only

Fee(s) paid: Well Work Permit Reclamation Fund WPCP

Plat WW-9 WW-2B Bond Shirley Della (M.V.N.E.) Agent

1) Date: April 20, 1990
2) Operator's well number
Porter Maxwell #1
3) API Well No: 47 - 017 - 3845
State - County

STATE OF WEST VIRGINIA
DEPARTMENT OF ENERGY, DIVISION OF OIL AND GAS
NOTICE AND APPLICATION FOR A WELL WORK PERMIT

RECEIVED
Division of Energy
JUN 25 90
Permitting
Oil and Gas Section

4) Surface Owner(s) to be served:
(a) Name Beatrice Schwartzman
Address 2520 30th St., N.W.
Washington, D.C. 20008
(b) Name _____
Address _____
(c) Name _____
Address _____
6) Inspector Mike Underwood
Address Rt. 2 Box 135
Salem, WV 26426
Telephone (304) - 782-1043
5) (a) Coal Operator:
Name None
Address _____
(b) Coal Owner(s) with Declaration
Name _____
Address _____
(c) Coal Lessee with Declaration
Name _____
Address _____

TO THE PERSON(S) NAMED ABOVE TAKE NOTICE THAT:

Included is the lease or leases or other continuing contract or contracts by which I hold the right to extract oil and gas. OR
 Included is the information required by Chapter 22B, Article 1, Section 8(d) of the Code of West Virginia (see page 2)
I certify that as required under Chapter 22B of the West Virginia Code I have served copies of this notice and application, a location plat, and accompanying documents pages 1 through _____ on the above named parties, by:
 Personal Service (Affidavit attached)
 Certified Mail (Postmarked postal receipt attached)
 Publication (Notice of Publication attached)

I have read and understand Chapter 22B and 38 CSR 11-18, and I agree to the terms and conditions of any permit issued under this application.
I certify under penalty of law that I have personally examined and am familiar with the information submitted on this application form and all 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.
I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Well Operator _____
By: Jan E. Chapman Jan E. Chapman
Its: Vice President
Address 6 Garton Plaza
Weston, WV 26452

Subscribed and sworn before me this 20th day of April 1990
Alvera J. Pollock
My commission expires October 19, 1998

OFFICIAL SEAL NOTARY PUBLIC
STATE OF WEST VIRGINIA
AUCIA S. POLLOCK
ROUTE 3, BOX 261-H
WESTON, WV 26452
My Commission Expires Oct. 19, 1998