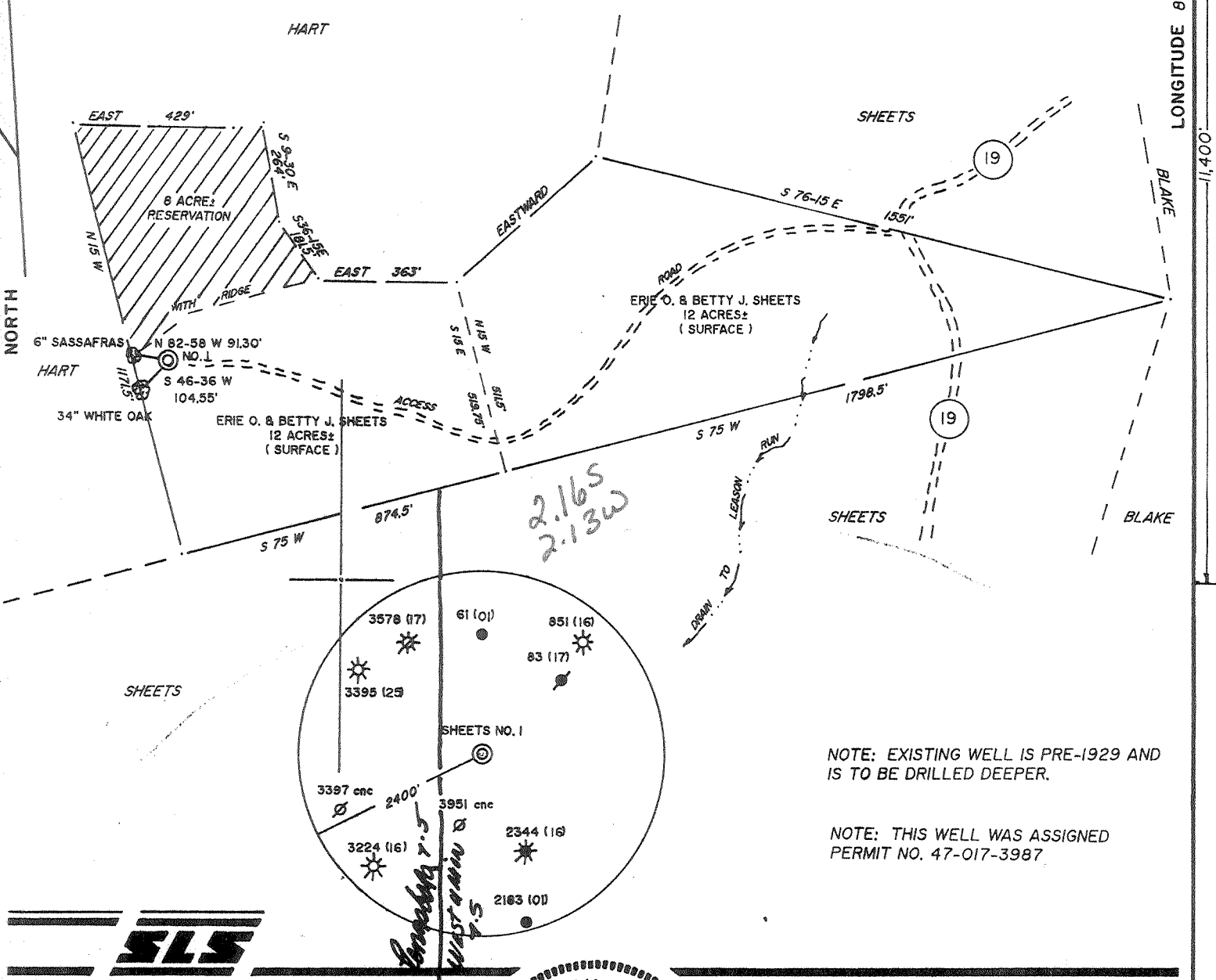


SHEETS LEASE SHEETS WELL NO. 1 24 ACRES±

Jamie
11/19/93



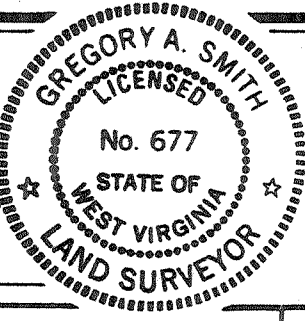
NOTE: EXISTING WELL IS PRE-1929 AND IS TO BE DRILLED DEEPER.

NOTE: THIS WELL WAS ASSIGNED PERMIT NO. 47-017-3987.



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 ENERGY.


L.L.S. 677 *Gregory A. Smith*



(+) DENOTES LOCATION OF WELL ON UNITED STATES TOPOGRAPHIC MAPS.
 DATE DECEMBER 21, 19 92
 OPERATORS WELL NO. SHEETS NO. 1
 API WELL NO. 47-017-3987
 STATE COUNTY PERMIT

MINIMUM DEGREE OF ACCURACY 1 / 200 FILE NO. 2951 (42-22)
 PROVEN SOURCE OF ELEVATION TOP OF KNOB ELEVATION 1307' SCALE 1" = 400'

STATE OF WEST VIRGINIA
 DEPARTMENT OF ENERGY
OIL AND GAS DIVISION



WELL TYPE: OIL GAS LIQUID INJECTION WASTE DISPOSAL IF "GAS" PRODUCTION STORAGE DEEP SHALLOW

LOCATION: ELEVATION 1157' WATERSHED LEASON RUN
 DISTRICT CENTRAL COUNTY DODDRIDGE QUADRANGLE WEST UNION 7.5'

SURFACE OWNER ERIE O. & BETTY J. SHEETS ACREAGE 12 of 24
 ROYALTY OWNER R.M. DOTSON HEIRS ET. AL. LEASE ACREAGE 24

PROPOSED WORK: LEASE NO. _____
 DRILL CONVERT DRILL DEEPER REDRILL FRACTURE OR STIMULATE PLUG OFF OLD FORMATION
 PERFORATE NEW FORMATION PLUG AND ABANDON CLEAN OUT AND REPLUG OTHER _____
 PHYSICAL CHANGE IN WELL (SPECIFY) _____ TARGET FORMATION INJUN
 ESTIMATED DEPTH 2600'

WELL OPERATOR CLARENCE W. MUTSCHELKNAUS DESIGNATED AGENT CLARENCE W. MUTSCHELKNAUS
 ADDRESS Rt. 1 BOX 351 SALEM, WV 26426 ADDRESS Rt. 1 BOX 351 SALEM, WV 26426

LONGITUDE 08° 05' 00" 11,400'

6-6 89

LATITUDE

391730

05 08

LONGITUDE

7.5' loc

2.15S
2.11W

7.5 OGIS topo location

7.5' loc	_____	15' loc	5.03S
	_____	(calc.)	2.11W

Company _____

Farm _____

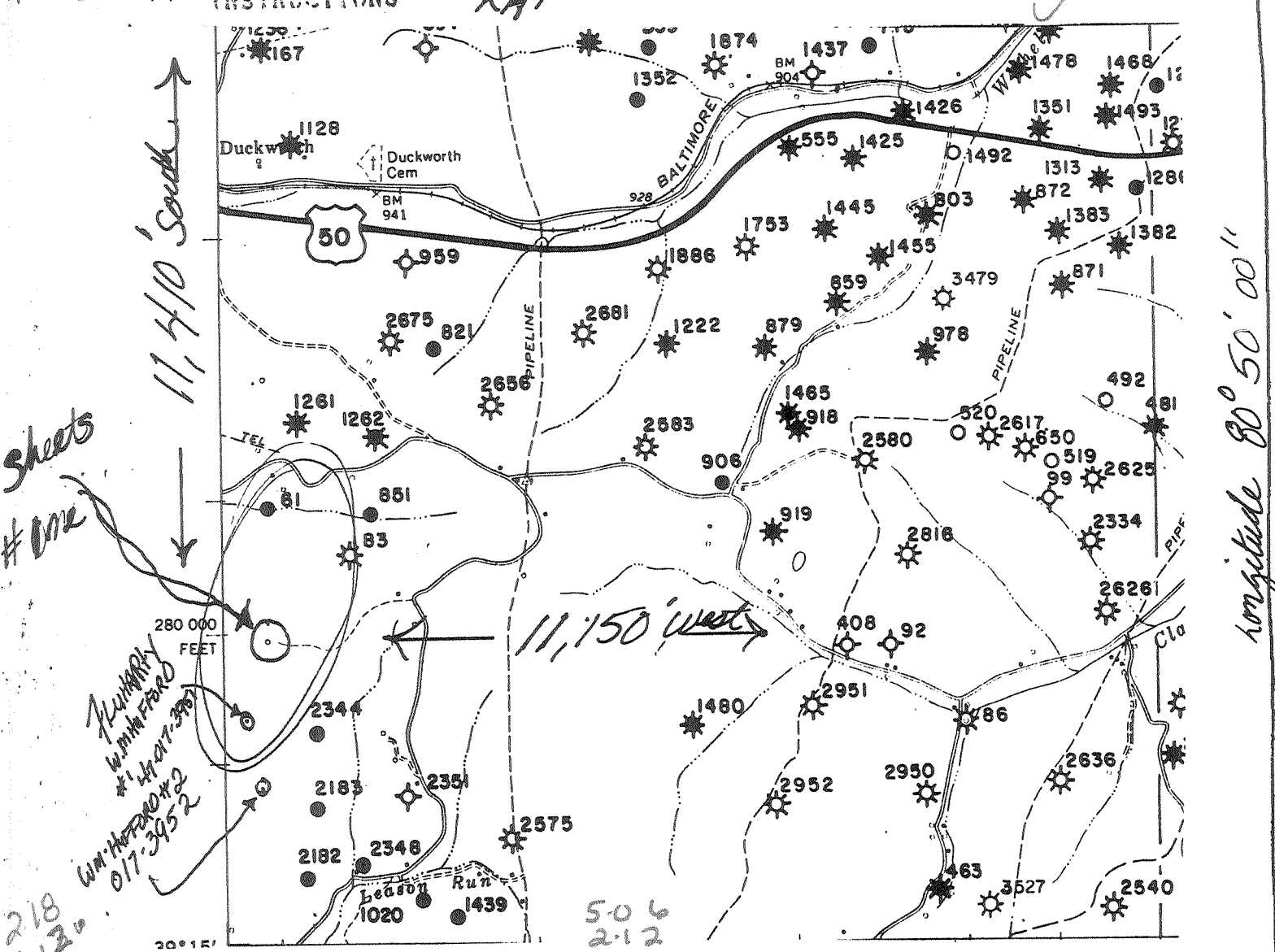
Quad W Union

County _____

District _____

WELL LOCATION MAP

File No. 017 3987



I, the undersigned, hereby certify that this plat is correct to the best of my knowledge and belief.

ADD to BOND.

SIGNED Clarence H. Mutschelknecht
TITLE Owner

assigned PERMIT No. _____

DATE October 1, 19 92

OPERATORS WELL NO. 1

API WELL NO. 47-017-3987

STATE OF WEST VIRGINIA
DEPARTMENT OF ENERGY
OIL AND GAS DIVISION

PRE 1929 Well

WELL TYPE: OIL GAS _____ LIQUID INJECTION _____ WASTE DISPOSAL _____
(IE "GAS" PRODUCTION _____ STORAGE _____ DEEP _____ SHALLOW _____)

LOCATION: ELEVATION 1160 WATER SHED Leason Run
DISTRICT Central COUNTY Doddridge
QUADRANGLE West Union 67° 15' 50"

SURFACE OWNER Dick Sheets ACREAGE (24A) 500 ft. approx

OIL & GAS ROYALTY OWNER _____ LEASE ACREAGE _____
LEASE NO. _____

PRODUCING FORMATION Inj TOTAL DEPTH 2300

WELL OPERATOR ~~_____~~ DESIGNATED AGENT Clarence Mutschelknecht

ADDRESS P.O. Box 351 ADDRESS P.O. Box 351
Salem, WV 26436 Salem, WV 26436

NOV 06 1995

State of West Virginia
Division of Environmental Protection
Section of Oil and Gas

WV Division of Environmental Protection
Farm name: SHEETS, ERIC & BETTY
Well Operator's Report of Well Work
Operator Well No.: SHEETS 1

LOCATION: Elevation: 1157.00 Quadrangle: WEST UNION

District: CENTRAL County: DODDRIDGE
Latitude: 11400 Feet South of 39 Deg. 17Min. 30 Sec.
Longitude: 11200 Feet West of 80 Deg. 50 Min. 0 Sec.

Company: MUTSCHELKNAUS, CLARENCE W
170 E. MAIN ST. P.O. BOX 351
SALEM, WV 26426-0351

Agent: CLARENCE W. MUTSCHELKNAUS

Inspector: MIKE UNDERWOOD
Permit Issued: 02/22/93
Well work Commenced: 10/1/92
Well work Completed: 2/29/93
Verbal Plugging
Permission granted on:
Rotary Cable X Rig
Total Depth (feet) 2360
Fresh water depths (ft)

Salt water depths (ft)

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

Casing & Tubing	Used in Drilling	Left in Well	Cement Fill Up Cu. Ft.
Size			180 foot of 7" cement
7"	1720	1720	
3 1/2"	2178	2178	cemented

OPEN FLOW DATA

2109-2195 open hole

Producing formation 2208-2220 Frack Pay zone depth (ft)

Gas: Initial open flow 5 MCF/d Oil: Initial open flow 2 Bbl/d
 Final open flow 2210 MCF/d Final open flow 2230 Bbl/d
 Time of open flow between initial and final tests _____ Hours
 Static rock Pressure 300 psig (surface pressure) after 24 Hours

Second producing formation none 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

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: Clarence W. Mutschelknaus
MUTSCHELKNAUS, CLARENCE W.

By: Clarence W. Mutschelknaus
Date: 2/26/95

NOV 13 1995

This well was drilled deeper. Cleaned out using 7" existing casing. Was cemented by running 1 1/2 tubing along the outside to a depth of 180 feet, then Dowell Cemented in the 7" casing and the 3 1/2 casing. Well was then fracked open hole.

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

Issued 2/22/93
Expires 2/22/95

- 1) Well Operator: Clarence W. Mutschelknaus 34125 (1) 670
- 2) Operator's Well Number: ~~Sheet #1~~ Sheet #1 3) Elevation: 1157'
- 4) Well type: (a) Oil or Gas
(b) If Gas: Production Underground Storage
Deep Shallow
- 5) Proposed Target Formation(s): Weir 387
- 6) Proposed Total Depth: 2500' feet
- 7) Approximate fresh water strata depths: 70'
- 8) Approximate salt water depths: ∅
- 9) Approximate coal seam depths: None
- 10) Does land contain coal seams tributary to active mine? Yes No
- 11) Proposed Well Work: Drill Deeper 2300 to 2500'
- 12)

RECEIVED
WV Division of
Environmental Protection
JAN 04 93
Permitting
Office of Oil & Gas

CASING AND TUBING PROGRAM

TYPE	SPECIFICATIONS			FOOTAGE INTERVALS		CEMENT
	Size	Grade	Weight per ft.	For drilling	Left in well	Fill-up (cu. ft.)
Conductor		Drill Deeper				
Fresh Water		Well has 7" casing to approximately 2000'				
Coal		Plan to drill well to 2500' will run				
Intermediate	4 1/2"	Casing and fracture.				
Production						
Tubing	No well record on file. Please show all existing					
Liners	Pipe 3 possible. Only dates casing logs					
PACKERS	Kind <u>NONE ON DRILL DEEPER WELL RECORD</u>					
	Sizes _____					
	Depths set _____					

For Division of Oil and Gas Use Only

5342

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

Plat WW-9 WW-2B Bond ILC #128 Agent (Type)

RECEIVED

WV Division of Environmental Protection

JAN 04 93

Permitting Office of Oil & Gas

Page 1 of 7 Form WW2-A (9/87) Permit Copy

1) Date: 12/29/92
2) Operator's well number C.W. Mutschelknaus
3) API Well No: 47 - 017 - 3987 -DD State - County - Permit

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

4) Surface Owner(s) to be served: (a) Name Eric O. + Betty J. Sheehy Address Rt 1 Box 39-A Greenwood WV 26360 (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 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 2 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 Clarence W. Mutschelknaus By: Clarence M. Mutschelknaus Its: owner/manager Address P.O. Box 351 170 E. Main St Salem WV 26426 Telephone 304-782-2707

Subscribed and sworn before me this 29th day of December, 1992. Notary Public My commission expires April 15, 2001