

2500'

37° 20' W

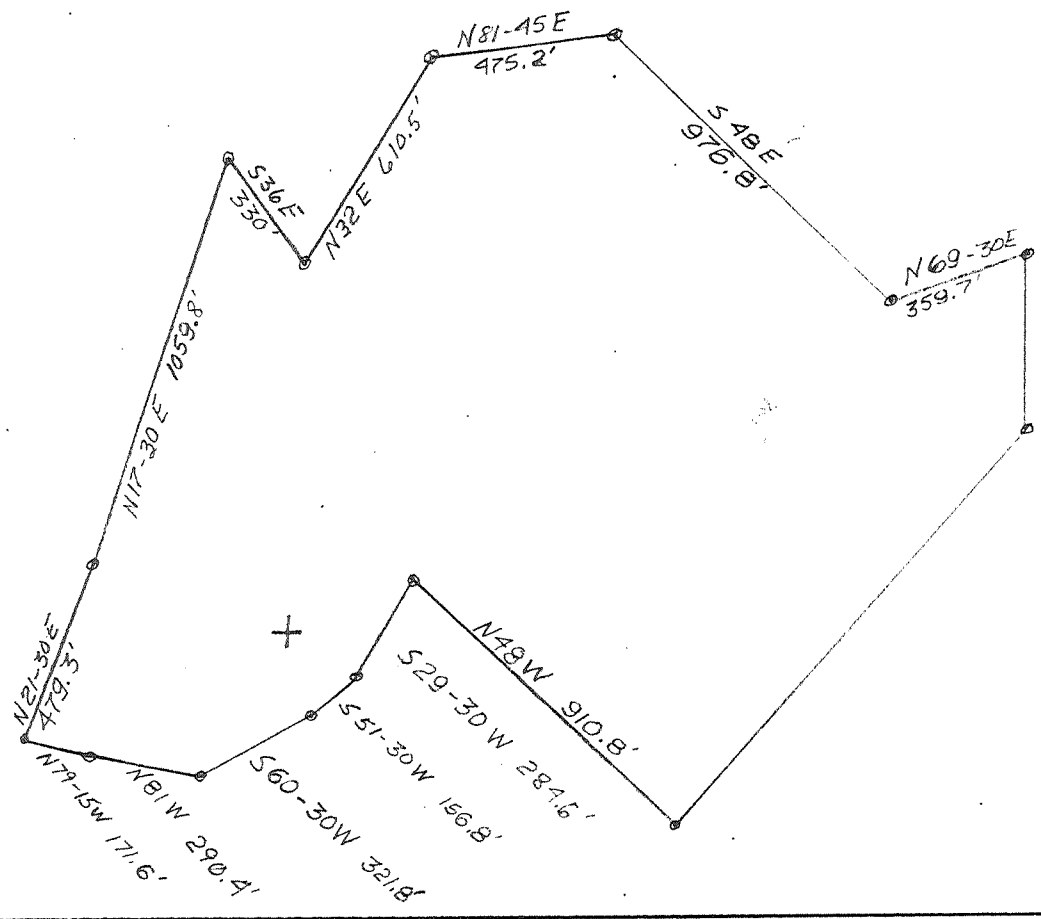
INSTRUCTIONS

- 1) Attach a photo copy of the location of the well on a 7.5 minute Quadrangle with the corresponding Longitude and Latitude.
- 2) Designate the location of the well with the symbol(+).



0525
0430

80° 50' 00"
2700'



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

SIGNED Kevin Snider

TITLE President

20294

DATE February 21, 19 95

OPERATORS WELL NO. C. Dotson #1

API WELL NO. 47-017-04186-N

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 902.5' WATER SHED LONG RUN
DISTRICT CENTRAL COUNTY DODDRIDGE
QUADRANGLE WEST UNION 671

SURFACE OWNER Brake, Samuel J. ACREAGE 72.2

OIL & GAS ROYALTY OWNER CISCO DOTSON HEIRS LEASE ACREAGE 72.2
LEASE NO. _____

PRODUCING FORMATION BIG INJUN TOTAL DEPTH 2000'

WELL OPERATOR Ritchie Petroleum Corporation DESIGNATED AGENT Kevin Snider

ADDRESS P.O. Box 545 ADDRESS P.O. Box 545

Pennsboro, W.V. 26415-0545 Pennsboro, W.V. 26415-0545

STATE OF WEST VIRGINIA
DIVISION OF ENVIRONMENTAL PROTECTION
SECTION OF OIL AND GAS

WELL REGISTER ASSIGNMENT

This API Number 47- 17-04186, issued to RITCHIE PETROLEUM CORP. is evidence of permission to operate the well that is referenced at the location described on the attached plat, subject to the provisions of Chapters 22 and 22B of the West Virginia Code of 1931, as amended, and all rules and regulations promulgated thereunder. The name and telephone number of the Oil and Gas Inspector for this well is MIKE UNDERWOOD -
304-782-1043.

Spills or emergency discharges must be reported to 1-800-654-3312.

Failure to abide by all statutory and regulatory provisions governing all duties and operations hereunder may result in suspension or revocation of your permits and in addition may result in civil and/or criminal penalties.

The enclosed WR-35 must be completed by you and returned to this office. In addition annual production reports must be submitted on this well and failure to do so may require you to plug the well.

Theodore M. Streit
Chief

By: 

Title: _____

Operator's Well No: C. DOTSON #1

Farm Name: BRAKE, SAMUEL J.

API Well Number : 47- 17-04186 N

Date Issued : 03/15/95

