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**west virginia** department of environmental protection

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Office of Oil and Gas  
601 57th Street SE  
Charleston, WV 25304  
(304) 926-0450  
(304) 926-0452 fax

Earl Ray Tomblin, Governor  
Randy C. Huffman, Cabinet Secretary  
www.dep.wv.gov

December 08, 2015

**WELL WORK PERMIT**

**Field Assigned Number**

This permit, API Well Number: 47-1773517, issued to OPERATOR UNKNOWN, is evidence of permission granted to perform the specified well work at the location described on the attached pages and located on the attached plat, subject to the provisions of Chapter 22 of the West Virginia Code of 1931, as amended, and all rules and regulations promulgated thereunder, and to all conditions and provisions outlined in the pages attached hereto. Notification shall be given by the operator to the Oil and Gas Inspector at least 24 hours prior to the construction of roads, locations, and/or pits for any permitted work. In addition, the well operator shall notify the same inspector 24 hours before any actual well work is commenced and prior to running and cementing casing. Spills or emergency discharges must be promptly reported by the operator to 1-800-642-3074 and to the Oil and Gas inspector.

Please be advised that form WR-35, Well Operators Report of Well Work is to be submitted to this office within 90 days completion of permitted well work, as should form WR-34 Discharge Monitoring Report within 30 days of discharge of pits, if applicable. Failure to abide by all statutory and regulatory provisions governing all duties and operations hereunder may result in suspension or revocation of this permit and, in addition, may result in civil and/or criminal penalties being imposed upon the operators.

In addition to the applicable requirements of this permit, and the statutes and rules governing oil and gas activity in WV, this permit may contain specific conditions which must be followed. Permit conditions are attached to this cover letter.

Per 35CSR-4-5.2.g this permit will expire in two (2) years from the issue date unless permitted well work is commenced. If there are any questions, please feel free to contact me at (304) 926-0499 ext. 1654.

James Martin  
Chief

Operator's Well No:

Farm Name: THOMAS, PEARCY

**API Well Number: 47-1773517**

**Permit Type: Field Assigned Number**

Date Issued: 12/08/2015

**Promoting a healthy environment.**

**12/11/2015**

FORM IR-9  
12/4/96

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

**Abandoned Well Inspection Form**

API NUMBER \_\_\_\_\_ ASSIGNED NUMBER 47-017-73517  
 WELL OPERATOR unknown  
 NAME PearcyThomas WELLNUMBER \_\_\_\_\_  
 QUAD New Milton DISTRICT New Milton COUNTY Doddridge  
 GPS FIELD READING Latitude 39.230202 Longitude -80.68326  
 DATE AND TIME OF READING 9/29/2015 930AM

- |  |         |
|--|---------|
|  | Y N     |
| 1. Does this well appear to be <u>a potential</u> or immediate (circle one) threat to human health or safety?<br>If yes, describe the situation (i.e. accessible tanks, open drilling pits, hydrogen sulfide, electric lines, unstable/inoperable equipment, pressures, surface craters).  | (X) ( ) |
| 2. Is this well leaking oil, gas, or saltwater at the surface?<br>If yes, circle which one(s).   | (x) ( ) |
| 3. If yes to question #2, check the appropriate response below:<br>-leakage exceeds the limits of the well location or is increasing and is likely to exceed the limits of the well location _____<br>-significant leakage or increasing leakage that could become significant _____<br>-minor leakage restricted to the well location, not increasing ___ Odor ___  |         |
| 4. Is there evidence of groundwater contamination within 1000' of this well?   | ( ) (X) |
| 5. Does this well lack sound surface casing?   | (X) ( ) |
| 6. Does this well lack sound production casing?  | (X) ( ) |
| 7. Check the appropriate response below.<br>-planned or active mineral resource development within 1000' of well <u>X</u> _____<br>-planned or active mineral resource development within 2000' of well _____<br>-no planned or active mineral resource development within 2000' of well _____<br>Identify the type if applicable (oil, gas, coal, limestone, etc.). |         |
| 8. Check the appropriate response below if applicable.<br>-well is within 100' of a drinking water source _____<br>-well is within 500' of a drinking water source <u>X</u> _____<br>-well is within 1000' of a drinking water source _____  |         |
| 9. Check the appropriate response below if applicable.<br>-more than 20 people residing within 1000' of well _____<br>-10 to 20 people residing within 1000' of well <u>X</u> _____  |         |

10. Check the appropriate response below if applicable.  
 -well is within 100' of a lake, river or stream X  
 -well is within 500' of a lake, river or stream \_\_\_\_\_
11. What is the current land use? Circle one of the following. Industrial, commercial, agricultural, wooded, residential or public.
12. Give an approximate drill date for this well. PRE 1929
13. Give an approximate abandonment date for this well. UnKnown
14. Is there the presence of contaminated soil around wellhead? ( ) (X)  
 Provide the approximate size (square feet) of the contaminated area. \_\_\_\_\_
15. Is there refuse on the location? ( ) (X)
16. Provide sketches and/or comments concerning the well and/or location, including directions, which you feel may be pertinent
17. Put any other information that you received from your inspection, such as last known operator, landowner concerns, special instructions on plugging, or any other information that will be helpful in locating plugging and recovering the cost of the plugging
18. Describe which tool(s) were of the most benefit in locating this well (i.e. landowner, spot maps, inspector knowledge, operator, etc.).
19. If an individual assisted in locating this well, who do they indicate should be responsible for plugging it (i.e. state, landowner, operator, etc.).
20. Amount of time spent searching for this well. 1/2 Hour

Well reported by: Misty Thompson  
1164 Meathouse Fk  
New Milton, WV 264  
 Phone #: 304-873-2293

Form completed by: Dave Date: 10/13/2015  
 Scranage \_\_\_\_\_

12/11/2015



12/11/2015