## STATE OF WEST VIRGINIA DEPARTMENT OF ENVIRONMENTAL PROTECTION OFFICE OF OIL AND GAS

## AFFIDAVIT OF PLUGGING AND FILLING WELL

AFFIDAVIT SHOULD BE IN TRIPLICATE, one copy mailed to the Department, one copy to be retained by the Well Operator and the third copy (and extra copies if required) should be mailed to each coal operator at their respective addresses.

Farm name:	Joseph R. E	liott	Oper	ator Well No ·	R-285				
LOCATION:	Elevation: 997	861		-					
	District: Mannington		Qua	Quadrangle: Glover Gap,WV 7.5'					
	District: Man	migion	Cou	inty: IVIai	rion				
	Latitude:	Feet	South of 39	Deg. 31	Min. 14.26	Sec.			
	Longitude:	Fee	t West of 80	Deg 25	Min. 14.26 Min. 18.41	Sec			
Well Type: (	OIL GAS					060.			
Company	Consolidation	Coal Co.	Coal Operator						
			or Owner	1 Bridge Stree			,		
,			Coal Operator	Monongah,W\					
Agent	David Roddy		or Owner						
Permit Issue	Permit Issued Date 07/19/2018								
STATE OF WEST VIRGINIA.  AFFIDAVIT									
County of Marior	ss:								
Eddle Rowe and Michael Banebeing first duly sworn according to law depose									
and say that the	v are experience	and Michael Ba	ne	being	first duly sworn	according to law deno	ise		
well operator a	and participated in	ا عم باسمید مط	. 00 2	on unu gas we	no and were emplo	yed by the above name	ed		
being first duly sworn according to law depose well operator, and participated in the work of plugging and filling oil and gas wells and were employed by the above named the 4th day of December 2018, and the well was plugged and filled in the following manner:									
TYPE					med in the lonowi	ng manner:			
Expandable Cement	FROM	TO		PIPE REMOVED		LEFT	1		
GEL SPACER	2640' 925'	925'	100	1930' SUCKER RODS		095' OF 7" CSG	ļ		
THIXOTROPIC CEMEN		856'		2550' 2 3/8" TUBING		13 3/8" CONDUCTOR			
EXPANDABLE CEMENT		456'		2070' 5 1/2" CSG					
395 SCKS CMENT		SURFA	GE. 6	675' OF 7" CSG		7"CSG 1770' TO 874'			
225SCKS CEMENT	_1	925'				7"CSG 856' TO 706'			
295SCKS CEMENT		SURFA	36						
Description of	monument: 77° of 7°	casing with company na	me, well #, API #, and date	e cemented.	and that the				
said well was cor	npleted on the 2N	D day of Febr	uary, 2	0 <u>19</u> .	_ and that the wor	rk of plugging and filling	J		
And further de	ponents saith not.	Esso	es Devino		COMMONW	EALTH OF PENNSYLVA	NIA		
		my	She		CENTER	NOTARIAL SEAL A. ASHCRAFT, NOTARY PUBLIC TOWNSHIP, GREENE COUNTY ISSION EXPIRES MAY 22, 2019			
Sworn and sub	scribe before me	this 12 day	or February	1 , 20 19		5550K EAF INES MAY 22, 2019			
My commission ex	rpires: May 25	1.2019		MMU YM Notary Pub	Micharage	-			
Affidavit reviewed	by the Office of C	il and Gas:	SON.	12. 5	P - 0 -				
				wood	Title:	OG Tropestor	- /07/2021		
						03/	10112021		

## State of West Virginia

## Department of Environmental Protection - Office of Oil and Gas Discharge Monitoring Report Oil and Gas General Permit

Company Name:	Consolidation Coal Company								
API No:	47-49-00942	County: Marion							
District:	Mannington	Well No: R-285							
Farm Name:	Joseph R. Elliot								
Discharge Date/s I	From:(MMDDYY) 02/07/2019	To: (MMDDYY) 02/07/2019							
Discharge Times.		To: 5:00 pm							
Total Volume to b	e Disposed from this facility (g	allons): 13,440							
Disposal Option(s)	) Utilized (write volumes in gall	ons):							
(1) Land Applicat	tion: 0	(Include a topographical map of the Area.)							
(2) UIC:	0	Permit No.							
(3) Offsite Dispos	sal: 13,440	Site Location: U-78-83							
(4) Reuse:	0	Alternate Permit Number:							
(5) Centralized Fa	acility: 0	Permit No.							
(6) Other method:	; 0	(Include an explanation)							
Follow Instructions below to determine your treatment category:									
Optional Pretreatment test: Cl- mg/l DO mg/l									
I. Do you have	permission to use expedited trea	tment from the Director or his representative?							
(Y/N)	If yes, who?	and place a four (4) on line 7.							
If not go to lin	ne Z	(MIRI)							
line 3.	nd of nowback put into the pit?	(Y/N) If yes, go to line 5. If not, go to							
3 Do you have a chloride value water to 1 10 gran									
If not, go to li	ine 5.	ee above)? (Y/N) If yes, go to line 4							
4. Is the Chlorid	le level less than 5000 mg/l? (Y/	N) If yes, then enter a one (1) on line 7.							
5. Do you have a	a pretreatment value for DO? (Se	ee above) (Y/N) If yes, go to line 6							
If not, enter a	three (3) in line 7.								
6. Is the DO leve	el greater than 2.5 mg/l?(Y/N)	If yes, enter a two (2) on line 7. If							
	arce (3) on line 7.								
<ul><li>7 is the category of your pit. Use the Appropriate section.</li><li>8. Comments on Pit condition:</li></ul>									
8. Comments	on Fit condition:								
Name of Principa	al Exec. Officer: David Roddy								
Title of Officer: Project Engineer									
Date Completed: 02/07/2019									
I certify unde	er penalty of law that I have pe	ersonally examined and am familiar with the							
information subn	nitted on this document and all i	the attachments and that, based on my inquiry							
or mose individu	ials immediately responsible for	r obtaining the information I believe that the							
submitting folge:	ue, accurate, and complete. I an	n aware that there are significant penalties for							
submitting false information, including the possibility of fine and imprisonment.									
	dele Tonio								
Signature of a Principal Exec. Officer or Authorized agent.									