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Environmental Protection

State of West Virginia Department of Environmental Protection - Office of Oil and Gas Well Operator's Report of Well Work

API 47 - 051 - 0	1837 _{County} M	arshall	District Clay	
Quad Powhatan Poin		MND 1	Field/Pool Name	Marcellus
Farm name CNX Gas C				
Operator (as registered with				
Address 1001 Noble E		y Houston	State Texas	Zip 77070
As Drilled location NAD Top Landing Point of C Bottom Elevation (ft) 1152.08	hole Northing 39.849 Curve Northing Hole Northing	s-drilled plat, profile view	Easting	
Permit Type Deviated				
Type of Operation □ Conv	rert 🗆 Deepen 🗆 Dril	l □ Plug Back □ l	Redrilling Rework	□ Stimulate
Well Type Brine Dispos	al □ CBM	□ Secondary Recovery	□ Solution Mining □ S	Storage Other
Drilled with	ole		iate hole □ Air □ Mu	d □ Fresh Water □ Brine
Date permit issued05/2	27/2015 Date drilling	g commenced_ 08/02/	2015 Date drilling	g ceased 08/02/2015
Date completion activities b		Date completion		
Verbal plugging (Y/N)	n Date permission	granted	Granted by	
Please note: Operator is rec	5041	application within 5 days		plug na RECEIVED Ωffice of Oil and Gas
Salt water depth(s) ft		Void(s) encounte	red (Y/N) depths	halice of Off and date
Coal depth(s) ft	687-697	Cavern(s) encour	tered (Y/N) depths	na AUG 0 1 2017
Is coal being mined in area	(Y/N) A D E	DAVI		Revision of the partment of

CASING STRINGS	Holc Size	Casing Size	Depth	New or Used	Grade wt∕ft		Basket Depth(s)		nent circulate (Y/ N) ide details below*
Conductor	36"	30"	40'	New	LS/	117#			
Surface									
Coal						i			
ntermediate I									
ntermediate 2			,		<u> </u>				
ntermediate 3									
roduction									
Tubing							· . <u></u>		
acker type and d	epth set				Ł				
Comment Details	*set only the co	nductor.						· · · · · · · · · · · · · · · · · · ·	
CEMENT DATA	Class/Type of Cement	Numbe of Sack	•		/ield ³ /sks)	Volume (ft.²)		nent (MD)	WOC (hrs)
Conductor									
Surface									
Coal									
ntermediate I									
ntermediate 2									
ntermediate 3									
roduction									
ubing			<u> </u>						
				Loggers T Plug back					
Cick off depth	(ft) <u>NA</u>								
Check all wire	line logs run	□ caliper □ neutron	□ density □ resistivity			onal oi	nduction emperature	□sonie	:
Well cored	Yes 🗆 No	Convention	onal Sidev	vall	We	re cuttings	collected	□ Yes □	No No
DESCRIBE T	HE CENTRAL	IZER PLACEMI	ENT USED FO	R EACH CA	ASING ST	RING			
									RECEIVED
WAS WELL (COMPLETED	AS SHOT HOLE	∵ □ Yes □	No DE	ETAILS _			Offic	e of Oil and
									AUG 0 1 291
		00001110150	**						्राच्यांच्या चात्र व्याप्त
WAS WELL O	OMPLETED (OPEN HOLE?	□ Yes □ No	DET/	AILS		• .	1.4.1	/ Dapartme

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Rev.	8/23/13	

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API 47- 051 - 01837 Farm name CNX Gas Company, LLC ET AL Well number MND 1 EHS	API 47- 05	51 01837	Farm name CNX Gas	s Company, LLC ET AL	Well number MND 1 EHS
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PERFORATION RECORD

Stage No.	Perforation date	Perforated from MD ft.	Perforated to MD ft.	Number of Perforations	Formation(s)
NA					

Please insert additional pages as applicable.

STIMULATION INFORMATION PER STAGE

Complete a separate record for each stimulation stage.

Stage No.	Stimulations Date	Ave Pump Rate (BPM)	Ave Treatment Pressure (PSI)	Max Breakdown Pressure (PSI)	ISIP (PSI)	Amount of Proppant (lbs)	Amount of Water (bbls)	Amount of Nitrogen/other (units)
NA			, , ,					
				1				
								• •
		·						Rra
							Office	RECEIVED of Oil and Gas
								Oil and a
							A	TO A CONTRACTOR
				<u> </u>			144	20,7
					n	E	Dui Vil	?na
							AUITONING	nartment or
Please	insert additio	nal pages as ap	plicable.				.,0	Ppartment of Protection
		F240 an ab	F					"ection

API 47- 051	_ 01837	Farm	name CNX G	as Comp	any, LLC ET	AL Well numb	per MND 1	EHS
PRODUCING	FORMATION(S)	<u>DEPTHS</u>					
NA				TVD		MD		
		<u> </u>		_				
Please insert ad	Iditional pages a	as applicable.			-			
GAS TEST	□ Build up □	Drawdown	□ Open Flow		OIL TEST 0	Flow 🗆 Pur	np	
SHUT-IN PRE	SSURE Surf	face	_psi Botto	om Hole	psi	DURATION	OF TEST _	hrs
OPEN FLOW	Gas mcf				Water bpd			
LITHOLOGY/ FORMATION	TOP DEPTH IN FT NAME TVD	BOTTOM DEPTH IN FT TVD	DEPTH IN FT MD	BOTTON DEPTH IN MD	FT DESCRIBE		=	ANTITYAND IL, GAS, H₂S. ETC)
	0		0					<u> </u>
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							<u> </u>	7 50
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Please insert ad	ditional pages a	s annlicable						
	ctor							
						State	Zip	
Logging Compa	any							
Address			City			State	Zip	
Cementing Con Address	npany		City			State	Zip	
Stimulating Cor	mpany				_	0	71.	
Please insert ad	ditional pages a	s applicable.				State	ZIP	
Completed by	Dee Swiger				_ Telephone	724-820-30	61	
Signature	the De	19 cm	Title R	egulatory A	Analyst, III	Date	06/19/2017	
	draulic Fractur	ŧ		rmation	Attach copy of	of FRACFOCU	JS Registry	

