

**THIS IS AN ESTIMATE ONLY
ACTUAL INFORMATION WILL BE SUBMITTED ON OG-10 UPON COMPLETION**

PROPOSED WORK ORDER TO XXX DRILL DEEPEN FRACTURE-STIMULATE

DRILLING CONTRACTOR: (If Known)

RESPONSIBLE AGENT:

NAME Adams Well Service

NAME J. Ellen Adams

ADDRESS P. O. Box 858, Cambridge, OH 43725

ADDRESS P.O. Box 131, Glenville, WV 26351

TELEPHONE (614) 432-7923

TELEPHONE (304) 462-5475

ESTIMATED DEPTH OF COMPLETED WELL: 5500'

ROTARY XXX CABLE TOOLS _____

PROPOSED GEOLOGICAL FORMATION: Devonian Shale

TYPE OF WELL: OIL _____ GAS _____ COMB. XXX STORAGE _____ DISPOSAL _____
RECYCLING _____ WATER FLOOD _____ OTHER _____

TENTATIVE CASING PROGRAM:

CASING AND TUBING SIZE	USED FOR DRILLING	LEFT IN WELL	CEMENT CHUTE UP OR SACKS - CUBIC FT.
20 - 16			
13 - 10			
9 - 5/8			
8 - 5/8	350'	350'	To Surface
7			
5 1/2			
4 1/2		5500'	400 Sacks
3			Perf. Top
2			Perf. Bottom
Liners			Perf. Top
			Perf. Bottom

APPROXIMATE FRESH WATER DEPTHS 50 FEET SALT WATER NA FEET

APPROXIMATE COAL DEPTHS None

IS COAL BEING MINED IN THE AREA? No BY WHOM? _____

TO DRILL:

SUBMIT FIVE (5) COPIES OF OG - 1, \$100.00 PERMIT FEE, PERFORMANCE BOND AND PERMANENT COPY OF PLAT.

TO DRILL DEEPER OR REDRILL:

SUBMIT FIVE (5) COPIES OF OG - 1, SHOWING ORIGINAL PERMIT NUMBER AND PERFORMANCE BOND. ON WELLS DRILLED PRIOR TO 1929, A PERMANENT COPY OF THE PLAT AND THE ORIGINAL WELL RECORD MUST ALSO BE SUBMITTED.

TO FRACTURE - STIMULATE:

OIL AND/OR GAS WELL ORIGINALLY DRILLED BEFORE JUNE 5, 1929, FIVE (5) COPIES OG - 1, PERFORMANCE BOND, PERMANENT PLAT AND ORIGINAL WELL RECORD.

OIL AND/OR GAS WELL ORIGINALLY DRILLED ON AND/OR AFTER JUNE 5, 1929, FIVE COPIES OG - 1, SHOWING ORIGINAL PERMIT NUMBER, AND PERFORMANCE BOND.

Required forms must be filed within ninety (90) days of completion for bond release. Inspector to be notified twenty four (24) hours in advance.

The following waiver must be completed by the coal operator if the permit is to be issued within ten days of receipt thereof.

WAIVER: I the undersigned, Agent for _____ Coal Company, Owner or Operator of the coal under this lease have examined and place on our mine maps this proposed well location.

We the _____ Coal Company have no objections to said well being drilled at this location providing operator has complied with all rules and regulations in Articles 4, 5, and 7, Chapter 22 of the West Virginia Code.

For Coal Company

Official Title



IV-35
(Rev 8-81)

Date 9-10-84
Operator's
Well No. 27-81
Farm State Farm
API No. 47-073 - 1185

State of West Virginia
Department of Mines
Oil and Gas Division

RECEIVED
SEP 24 1984

WELL OPERATOR'S REPORT
OF

OIL & GAS DIVISION
DEPT. OF MINES

DRILLING, FRACTURING AND/OR STIMULATING, OR PHYSICAL CHANGE

WELL TYPE: Oil / Gas / Liquid Injection / Waste Disposal
(If "Gas," Production / Underground Storage / Deep / Shallow)

LOCATION: Elevation: 1101' Watershed Ohio River
District: Union County Pleasants Quadrangle Raven Rock

COMPANY Berg Petroleum

ADDRESS Box 782, Cambridge, OH 43725

DESIGNATED AGENT J. Ellen Adams

ADDRESS Box 131, Glenville, WV 26351

SURFACE OWNER State Board of control

ADDRESS c/o George Stickler
New Martinsville, WV 26155

MINERAL RIGHTS OWNER State Farming Commission

ADDRESS c/o William Richards
St. Marys, WV 26170

OIL AND GAS INSPECTOR FOR THIS WORK Robert

Lowther ADDRESS Middlebourne, WV

PERMIT ISSUED 4-23-81

DRILLING COMMENCED 5-13-81

DRILLING COMPLETED 5-19-81

IF APPLICABLE: PLUGGING OF DRY HOLE ON
CONTINUOUS PROGRESSION FROM DRILLING OR
REWORKING. VERBAL PERMISSION OBTAINED
ON _____

Casing & Tubing	Used in Drilling	Left in Well	Cement fill up Cu. ft.
Size 20-16 Cond.			
13-10"			
9 5/8			
8 5/8	349'	349'	156 cu ft
7			
5 1/2			
4 1/2	3969	3969	552 cu ft
3			
2			
Liners used			

GEOLOGICAL TARGET FORMATION Devonian Shale Depth 5500 feet

Depth of completed well 4000 feet Rotary / Cable Tools _____

Water strata depth: Fresh 50 feet; Salt n/a feet

Coal seam depths: _____ Is coal being mined in the area? _____

OPEN FLOW DATA

Producing formation _____ Pay zone depth _____ feet

Gas: Initial open flow _____ Mcf/d Oil: Initial open flow _____ Bbl/d

Final open flow _____ Mcf/d Oil: Final open flow _____ Bbl/d

Time of open flow between initial and final tests _____ hours

Static rock pressure _____ psig (surface measurement) after _____ hours shut in

(If applicable due to multiple completion--)

Second producing formation _____ Pay zone depth _____ feet

Gas: Initial open flow _____ Mcf/d Oil: Initial open flow _____ Bbl/d

Final open flow _____ Mcf/d Oil: Final open flow _____ Bbl/d

Time of open flow between initial and final tests _____ hours

Static rock pressure _____ psig (surface measurement) after _____ hours shut in

(Continue on reverse side)

DETAILS OF PERFORATED INTERVALS, FRACTURING OR STIMULATING, PHYSICAL CHANGE, ETC.

As of this date, this well has not been frac'd

WELL LOG

FORMATION	COLOR	HARD OR SOFT	TOP FEET	BOTTOM FEET	REMARKS
					Including indication of all fresh and salt water, coal, oil and gas
Red rock, sand and shale			surface	1500	
Shale			1500	1646	
Maxon			1646	1686	
Shale			1686	1710	
Big Lime			1710	1756	
Keener			1756	1792	
Shale			1792	1798	
Big Injun			1798	1942	
Shale			1942	1952	
Squaw			1952	1976	
Shale			1976	2320	
Berea			2320	2324	
Shale			2324	2404	
Fifty Foot			2404	2471	
Shale			2471	2551	
Thirty Foot			2551	2607	
Shale			2607	2716	
Gordon Stray			2716	2726	
Shale			2726	2746	
Gordon			2746	2836	
Shale			2836	3750	
Balltown			3750	3819	
Shale			3819	3950	

(Attach separate sheets as necessary)

X

BERG PETROLEUM, INC.

Well Operator

By: Budby Edens, President

Date: September 17, 1984

Note: Regulation 2.02(i) provides as follows:
 "The term 'log' or 'well log' shall mean a systematic detailed geological record of all formations, including coal, encountered in the drilling of a well"

CEMENTING SERVICE REPORT

Ino #443



TREATMENT NUMBER	443	DATE	5-14-81
STAGE	Permit # 1185		

WELL NAME AND NO.	LOCATION-POOL-FIELD
2701E Form #27	Union
FORMATION	REPRESENTATIVE
SURFACE	Don Kemper
COUNTY	STATE
Pleasant	WV
NAME BERG PETROLEUM	

RIG NAME	Pen Eastern # 7					
WELL DATA						
HOLE SIZE	11"	CASING OR LINER	A	B	C	D
DEPTH	358	SIZE-WEIGHT	8 5/8		20#	
<input checked="" type="checkbox"/> ROT <input type="checkbox"/> CABLE		TOP				
BHST		BOTTOM				
BHLT		GRADE & THREAD	8RD		REG	
BHCT		CAPACITY	22			

AND

ADDRESS

ZIP CODE

MUD: TYPE	WT.	VISC.
SHOE FLOY	TYPE	DEPTH
STAGE TOOL	TYPE	DEPTH
<input type="checkbox"/> TBG <input type="checkbox"/> D.P.	HEAD & PLUGS	SQUEEZE JOB
SIZE	<input type="checkbox"/> DOUBLE <input type="checkbox"/> SINGLE	TOG TYPE
WEIGHT		DEPTH
GRADE	<input type="checkbox"/> SWAGE <input type="checkbox"/> KNOCKOFF	TAIL PIPE: IN. FT.
THREAD		PERF INTERVAL: FT.
<input type="checkbox"/> NEW <input type="checkbox"/> USED	TOP <input type="checkbox"/> R <input type="checkbox"/> W	TO
DEPTH	BOT <input type="checkbox"/> R <input type="checkbox"/> W	TO
CAPACITY	OTHER	TO

PRESSURE LIMIT **500** PSI BUMP PLUG TO _____ PSI MIN

ROTATE RPM RECIPROCATE FT CENTRALIZERS NO.

JOB SCHEDULED FOR: TIME: 0100 DATE: 5-14

ARRIVED ON LOCATION: TIME: 0100 DATE: 5-14

LEFT LOCATION: TIME: _____ DATE: 5-14-81

TIME	PRESSURE		VOLUME PUMPED	INJECT. RATE	SERVICE LOG DETAIL
	TBG OR D.P.	CASING			
0100					Arrive Loc Spot & Hook up units
0550		0		2-3	Pump H ₂ O pad
0555		0	15	0-2	H ₂ O pad in, BEGIN CMT @ 15.6ppg
0608		0	21	0-3	CMT mixed & pumped, shut down fill displ. tank.
0610		0		4	BEGIN Displ.
0615		100	22	2-3	Displ. in shut down, close out on SWAGE & BLEED LINE.
0617					Rig Down
0730					Job Complete

REMARKS

SYSTEM CODE	NO. OF SACKS	YIELD CU. FT./SK	COMPOSITION OF CEMENTING SYSTEMS		SLURRY MIXED	
			VOL	WT	VOL	WT
1.	120	118	Class A + 4% Cx12		21	15.0
2.						
3.						

BREAKDOWN FLUID	WT.	SACKS MIXED	100	PUMPED	All	PRESSURE MAX:	MIN:
<input type="checkbox"/> HESITATION SO.	<input type="checkbox"/> RUNNING SQ.	CIRCULATION LOST	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO		CEMENT CIRCULATED TO SURF.	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
BREAKDOWN	PSI	FINAL	PSI			CEMENT LEFT IN PIPE:	FT.
WASHED THRU	<input type="checkbox"/> YES <input type="checkbox"/> NO	TO	FT.	MEASURED	<input checked="" type="checkbox"/> DISPLACEMENT <input type="checkbox"/> WIRELINE	<input checked="" type="checkbox"/> AS PLANNED <input type="checkbox"/> UNAVOIDABLE	
TYPE OF WELL	<input checked="" type="checkbox"/> OIL <input type="checkbox"/> STORAGE <input type="checkbox"/> BRINE/WATER <input type="checkbox"/> WILDCAT	<input type="checkbox"/> GAS <input type="checkbox"/> INJECTION		CUSTOMER REPRESENTATIVE	DOES CUSTOMER CONSIDER SERVICE:		
				DAVE LOVER	<input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> UNSATISFACTORY <input type="checkbox"/> UNKNOWN		



WORK ORDER CONTRACT AND PRE-TREATMENT DATA

FORM 1908 R-2

A Division of Halliburton Company SUNCAN, OKLAHOMA 75333

ATTACH TO INVOICE & TICKET NO. 993235

DISTRICT Western

DATE 5-19-81

TO: HALLIBURTON SERVICES YOU ARE HEREBY REQUESTED TO FURNISH EQUIPMENT AND SERVICEMEN TO DELIVER AND OPERATE THE SAME AS AN INDEPENDENT CONTRACTOR TO: BECK PETROLEUM (CUSTOMER) AND DELIVER AND SELL PRODUCTS, SUPPLIES, AND MATERIALS FOR THE PURPOSE OF SERVICING

WELL NO. SF 42781 LEASE State Farm SEC. TWP. RANGE FIELD St. Marks COUNTY Beckett STATE WVA OWNED BY Beck Petroleum

THE FOLLOWING INFORMATION WAS FURNISHED BY THE CUSTOMER OR HIS AGENT

Table with columns: FORMATION NAME, TYPE, THICKNESS, FROM, TO, PACKER, TYPE, SET AT, TOTAL DEPTH, MUD WEIGHT, BORE HOLE, INITIAL PROD, PRESENT PROD, PERFORATIONS, NEW USED, WEIGHT, SIZE, FROM, TO, MAX. ALLOW. P.S.I., SHOTS/FT.

PREVIOUS TREATMENT: DATE TYPE MATERIALS TREATMENT INSTRUCTIONS: TREAT THRU TUBING ANNULUS CASING TUBING/ANNULUS HYDRAULIC HORSEPOWER ORDERED

Cement 4 1/2 casing

CUSTOMER OR HIS AGENT STATES THE WELL IS IN PROPER CONDITION TO RECEIVE THE PRODUCTS, SUPPLIES, MATERIALS, AND SERVICES THIS CONTRACT MUST BE SIGNED BEFORE WORK IS COMMENCED

- As consideration, the above-named Customer agrees: (a) To pay Halliburton in accord with the rates and terms stated in Halliburton's current price lists. (b) Halliburton shall not be responsible for and Customer shall secure Halliburton against any liability for damage to property of Customer and of the well owner... (k) Halliburton shall not be bound by any changes or modifications in this contract, except where such change or modification is made in writing by a duly authorized executive officer of Halliburton.

I HAVE READ AND UNDERSTAND THIS CONTRACT AND REPRESENT THAT I AM AUTHORIZED TO SIGN THE SAME AS CUSTOMER'S AGENT. SIGNED [Signature] CUSTOMER DATE 5-19-81 TIME 1500 A.M. P.M.

We certify that the Fair Labor Standards Act of 1938, as amended, has been complied with in the production of goods and/or with respect to services furnished under this contract.

HALLIBURTON SERVICES JOB SUMMARY

HALLIBURTON
DIVISION
HALLIBURTON
LOCATION Weston

BILLED ON
TICKET NO. 995235

WELL DATA

FIELD 51 SEC. _____ TWP. _____ RNG. _____ COUNTY Franklin STATE VA

FORMATION NAME _____ TYPE _____

FORMATION THICKNESS _____ FROM _____ TO _____

INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD _____

PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD _____

COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____

PACKER TYPE _____ SET AT _____

BOTTOM HOLE TEMP. _____ PRESSURE _____

MISC. DATA _____ TOTAL DEPTH 3965

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	<u>1</u>	<u>105</u>	<u>4 1/2</u>	<u>WA</u>	<u>2969</u>	<u>2500</u>
LINER						
TUBING						
OPEN HOLE						SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>5-19-81</u>	DATE <u>5-19-81</u>	DATE <u>5-19-81</u>	DATE <u>5-19-81</u>
TIME <u>0400</u>	TIME <u>0700</u>	TIME <u>1615</u>	TIME <u>1647</u>

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE	<u>1</u>	<u>Houder</u>
GUIDE SHOE		
CENTRALIZERS	<u>2</u>	<u>Houder</u>
BOTTOM PLUG		
TOP PLUG <u>4 1/2 12 PdB</u>	<u>1</u>	<u>Houder</u>
HEAD <u>4 1/2 PL</u>	<u>1</u>	<u>Houder</u>
PACKER		
OTHER <u>4 1/2 Cont. 4516</u>	<u>2</u>	<u>Houder</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>F. M. DANIS JR</u>	<u>OPER</u>	<u>Weston</u>
<u>R. RUPPEY</u>	<u>9508</u>	<u>11</u>
<u>D. R. HEN</u>	<u>3609</u>	<u>11</u>
<u>Ruppey</u>	<u>9142</u>	<u>11</u>

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB/GAL. API _____

DISPL. FLUID _____ DENSITY _____ LB/GAL. API _____

PROP. TYPE _____ SIZE _____ LB. _____

PROP. TYPE _____ SIZE _____ LB. _____

ACID TYPE _____ GAL. _____ % _____

ACID TYPE _____ GAL. _____ % _____

ACID TYPE _____ GAL. _____ % _____

SURFACTANT TYPE _____ GAL. _____ IN _____

NE AGENT TYPE _____ GAL. _____ IN _____

FLUID LOSS ADD. TYPE _____ GAL.-LB. _____ IN _____

GELLING AGENT TYPE _____ GAL.-LB. _____ IN _____

FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN _____

BREAKER TYPE _____ GAL.-LB. _____ IN _____

BLOCKING AGENT TYPE _____ GAL.-LB. _____

PERFPAC BALLS TYPE _____ QTY. _____

OTHER 10 GAL 2 1/2

OTHER _____

DEPARTMENT 16, ment

DESCRIPTION OF JOB Cont. 4 1/2 1 1/2

JOB DONE THRU: TUBING CASING ANNULUS TSG./ANN.

CUSTOMER REPRESENTATIVE X Ralph J. Smith

HALLIBURTON OPERATOR G. M. ... COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	TYPE	API CLASS	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>425</u>	<u>5/8" P</u>	<u>100</u>	<u>Down A</u>	<u>100</u>	<u>SPOT 12 1/2 4</u>	<u>1.54</u>	<u>12.5</u>

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT 2500 PRESLUSH: BBL-GAL. 55 TYPE _____

BREAKDOWN _____ MAXIMUM 2500 LOAD & BKDN: BBL-GAL. _____ PAD: BBL-GAL. _____

AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL-GAL. _____ DISPL: BBL-GAL. 65.6

SHUT-IN: INSTANT _____ 5-MIN. _____ 15-MIN. _____ CEMENT SLURRY: BBL-GAL. 116.5

HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL-GAL. 2371

ORDERED _____ AVAILABLE _____ USED _____ REMARKS SEE JOB LOG

AVERAGE RATES IN BPM _____

TREATING _____ DISPL. _____ OVERALL _____

CEMENT LEFT IN PIPE _____

FEET _____ REASON _____

CUSTOMER



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NOV 7 - 1984

OIL & GAS DIVISION
DEPT. OF MINES

State of West Virginia
Department of Mines
Oil and Gas Division
Charleston 25305

FINAL INSPECTION REPORT
INSPECTORS COMPLIANCE REPORT
October 22, 1984

COMPANY Berg Petroleum
P. O. Box 782
Cambridge, Ohio 43725

PERMIT NO 073-1185
FARM & WELL NO State Farm #27-81
DIST. & COUNTY Union/Pleasants

RULE	DESCRIPTION	IN COMPLIANCE	
		YES	NO
23.06	Notification Prior to Starting Work		
25.04	Prepared before Drilling to Prevent Waste		
25.03	High-Pressure Drilling		
16.01	Required Permits at Wellsite		
15.03	Adequate Fresh Water Casing		
15.02	Adequate Coal Casing		
15.01	Adequate Production Casing	✓	
15.04	Adequate Cement Strenght		
15.05	Cement Type		
23.02	Maintained Access Roads	✓	
25.01	Necessary Equipment to Prevent Waste	✓	
23.04	Reclaimed Drilling Pits	✓	
23.05	No Surface or Underground Pollution	✓	
23.07	Requirements for Production & Gathering Pipelines	✓	
16.01	Well Records on Site	✓	
16.02	Well Records Filed		
7.05	Identification Markings	✓	

I HAVE INSPECTED THE ABOVE CAPTIONED WELL AND RECOMMEND THAT IT BE RELEASED:

SIGNED R.A. Lowther
DATE Nov 1, 1984

Your well record was received and reclamation requirements approved. In accordance with Chapter 22, Article 4, Section 2, the above well will remain under bond coverage for the life of the well.

T.H. v. B.
Administrator-Oil & Gas Division

January 9, 1985

DATE

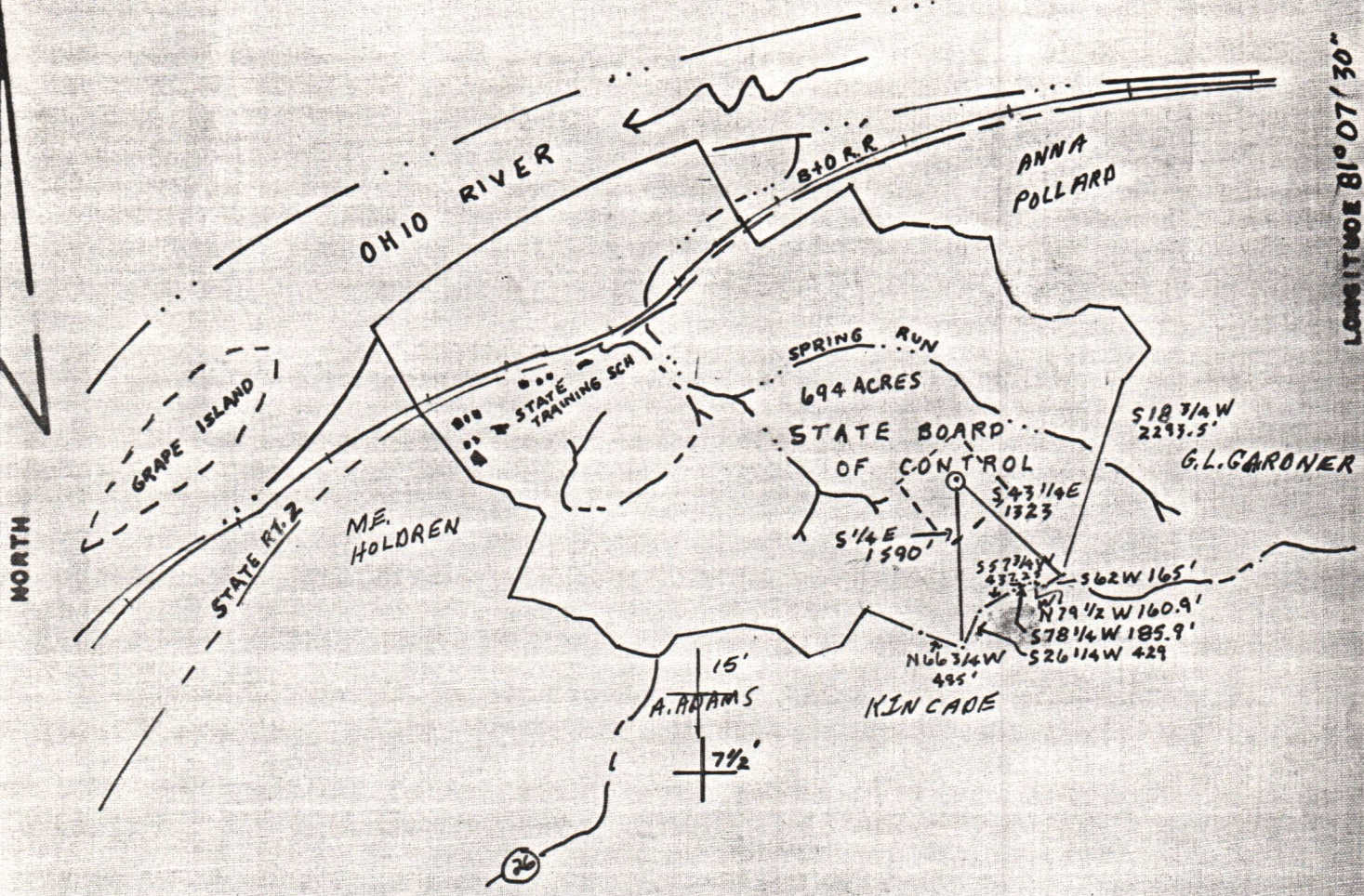
Ch 4/20

7,500'

LATITUDE 39° 27' 30"
10900' SOUTH
7500' WEST

LONGITUDE 81° 07' 30"

10,000'



FILE NO. SF 27
 DRAWING NO. _____
 SCALE 1"=2000
 MINIMUM DEGREE OF ACCURACY 1:200
 PROVEN SOURCE OF ELEVATION BM 623

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 MINES.
 (SIGNED) William Ambrose
 R.P.E. _____ L.L.S. 568

PLACE SEAL HERE

(+) DENOTES LOCATION OF WELL ON UNITED STATES TOPOGRAPHIC MAPS
 FORM IV-6
 (8-78)



DATE 6 APRIL, 1981
 OPERATOR'S WELL NO. SF 27-8
 API WELL NO. 47-073-1185
 STATE COUNTY PERMIT

STATE OF WEST VIRGINIA
 DEPARTMENT OF MINES

OIL AND GAS DIVISION

WELL TYPE: OIL GAS LIQUID INJECTION _____ WASTE DISPOSAL _____
 (IF "GAS", PRODUCTION _____ STORAGE _____ DEEP _____ SHALLOW
 LOCATION: ELEVATION 1101 WATER SHED SPRING RUN OF OHIO RIVER
 DISTRICT UNION COUNTY PLEASANTS
 QUADRANGLE RAVEN ROCK
 SURFACE OWNER STATE BOARD OF CONTROL ACREAGE 694
 OIL & GAS ROYALTY OWNER STATE FARMING COMM. LEASE ACREAGE 694
 LEASE NO. S.F. # 27-81
 PROPOSED WORK: DRILL CONVERT _____ DRILL DEEPER _____ REDRILL _____ FRACTURE OR STIMULATE _____ PLUG OFF OLD FORMATION _____ PERFORATE NEW FORMATION _____ OTHER PHYSICAL CHANGE IN WELL (SPECIFY) _____
 PLUG AND ABANDON _____ CLEAN OUT AND REPLUG _____
 TARGET FORMATION DEVONIAN SHALE ESTIMATED DEPTH 5500'
 WELL OPERATOR BEAG Petroleum Inc. DESIGNATED AGENT J. Ellen Adams
 ADDRESS P.O. Box 782 ADDRESS P.O. Box, 131
Cambridge, Ohio 43725 Glenville, W. Va. 26351

Date 8 April 19 81
Well No. STATE FARM 27-80
API No. 47 - 073 - 1185
State County Permit

STATE OF WEST VIRGINIA
OFFICE OF OIL AND GAS

Company Name BERG Petroleum Inc. Designated Agent J. Ellen Adams
Address P.O. Box 782, Cambridge, Ohio Address P.O. Box 131, Glenville, W. Va.
Telephone 614-432-5533 Telephone 304-462-5475
Landowner STATE FARMING COMM. Soil Cons. District _____

Revegetation to be carried out by BERG (Agent)

This plan has been reviewed by Upper Ohio SCD. All corrections
and additions become a part of this plan. 4/9/81 Zenneth F. McLean
(Date) (SCD Agent)

Access Road
Structure DETA RELIEF CULVERTA
Spacing _____
Page Ref. Manual 1:8
Structure _____ (B)
Spacing _____
Page Ref. Manual _____
Structure _____ (C)
Spacing _____
Page Ref. Manual _____

Location
Structure DEPT (1)
Material _____
Page Ref. Manual _____
Structure Brush & Tree Pile (2)
Material _____
Page Ref. Manual _____
Structure _____ (3)
Material _____
Page Ref. Manual DEPT. OF MINES

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APR 10 1981

All structures should be inspected regularly and repaired if necessary.

Revegetation

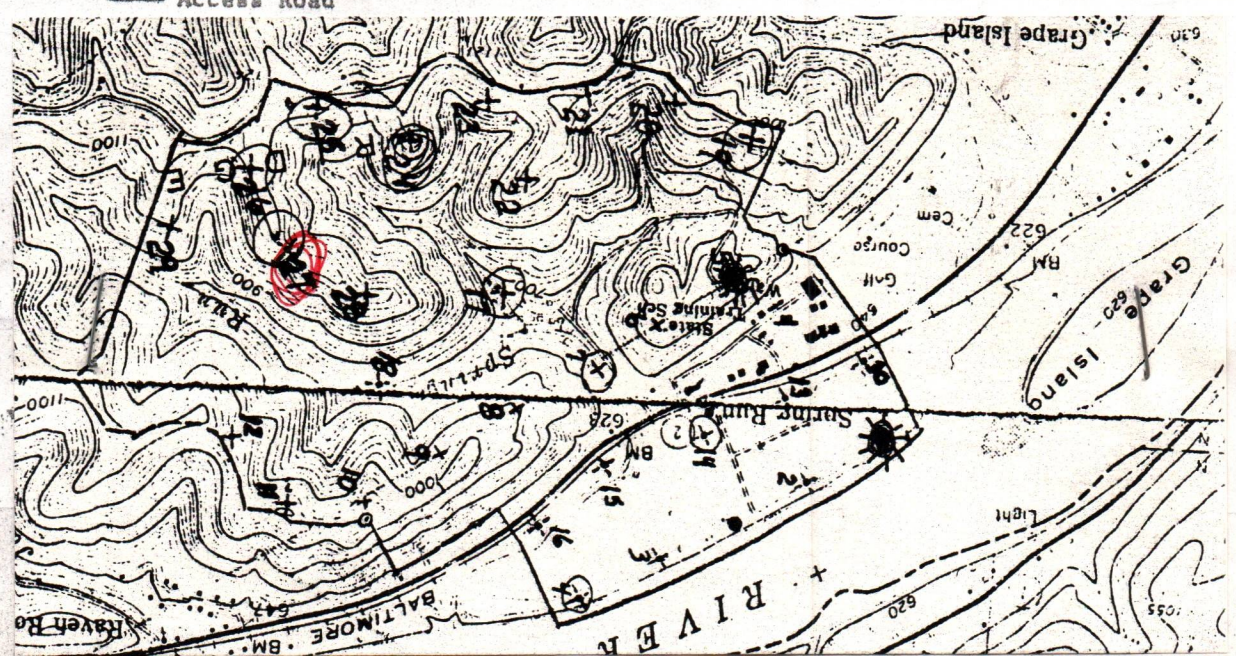
Treatment Area I
Lime _____ Tons/acre
or correct to pH 6.5
Fertilizer 500 lbs/acre
(10-20-20 or equivalent)
Mulch Hay Or Straw 2 Tons/Acre
Seed* KY 31 FESCUE 35 lbs/acre
RED TOP 5 lbs/acre
_____ lbs/acre

Treatment Area II
Lime _____ Tons/Acre
or correct to pH 6.5
Fertilizer 500 lbs/acre
(10-20-20 or equivalent)
Mulch Hay Or Straw 2 Tons/Acre
Seed* KY 31 FESCUE 35 lbs/acre
RED TOP 5 lbs/acre
_____ lbs/acre

*Inoculate all legumes such as vetch, trefoil and clovers with the proper bacterium. Inoculate with 3X recommended amount.

Attach or photocopy section of involved Topographic map. Quadrangle RAVEN ROCK.

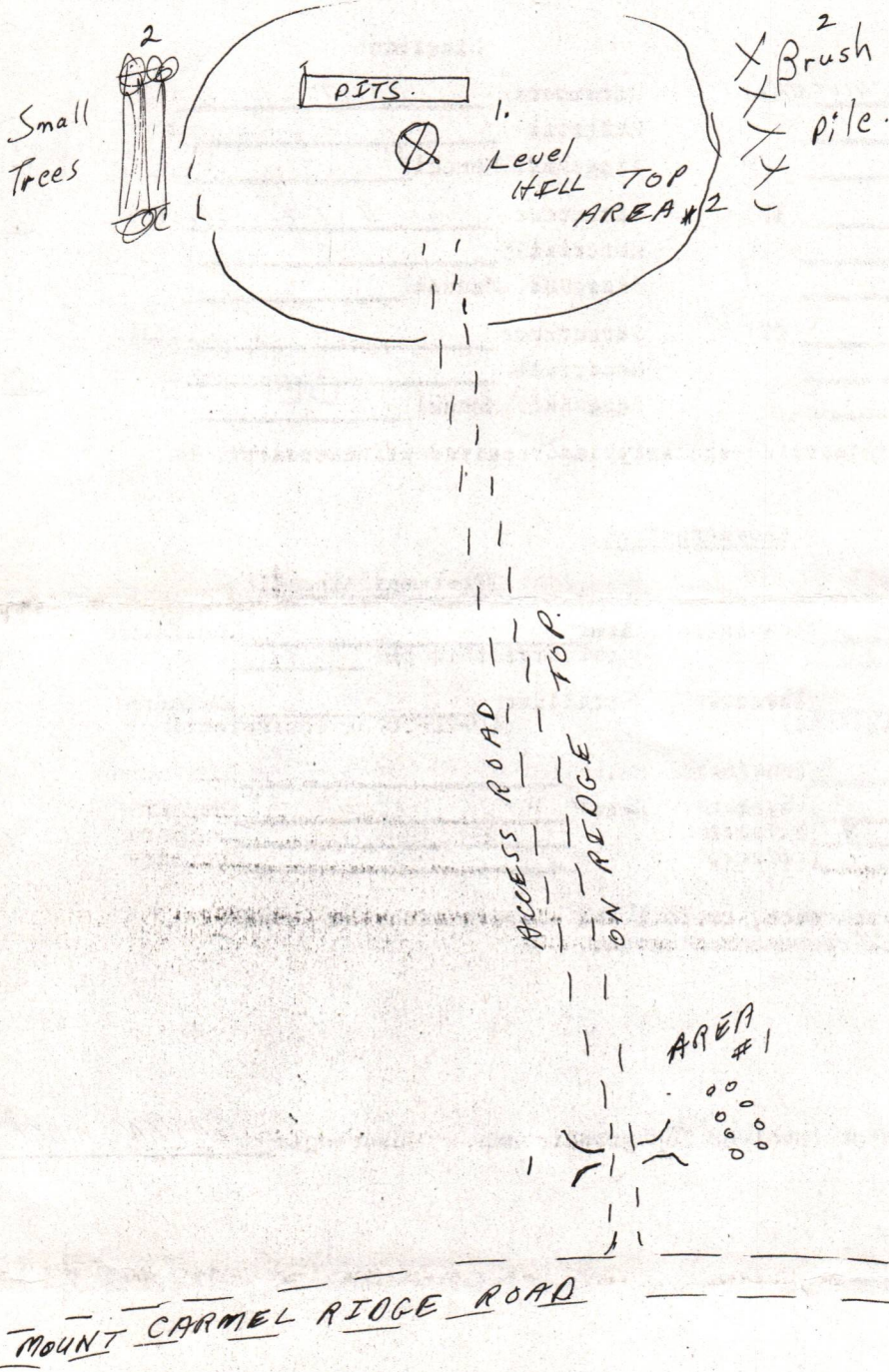
Legend:  Well Site
 Access Road



Well Site Plan

- | | | | |
|---------------------------|--|------------|--|
| Legend: Property Boundary | | Diversion | |
| Road | | Spring | |
| Existing Fence | | Wet Spot | |
| Planned Fence | | Building | |
| Stream | | Drain Pipe | |
| Open Ditch | | Waterway | |

Sketch to include well location, existing access road, roads to be constructed, wellsite, drilling pits and necessary structures numbered or lettered to correspond with first part of this plan. Include all natural drainage.



Comments: ACCESS ROAD LIES ON RIDGE TOP. LOCATION ON FAIRLY LEVEL HILL TOP. LOCATION HAS BRUSH & SMALL TREES ON IT. ROAD WILL BE STONED AT EXIT OFF RIDGE

Signature: Ralph J. Smith P.O. BOX 782, Cambridge, Oh. 614-432-5533

Agent Address Phone Number

Please request landowners cooperation to protect new seeding for one growing season.