

PROPOSED WORK ORDER

THIS IS AN ESTIMATE ONLY:
ACTUAL INFORMATION MUST BE SUBMITTED ON FORM IV-35 UPON COMPLETION

DRILLING CONTRACTOR (IF KNOWN)

Gene Stalnaker, Inc.

Address

P.O. Box 178

Glennville, WV 26351

2024/03/05

GEOLOGICAL TARGET FORMATION

Marcellus Shale

Estimated depth of completed well 5200 feet. Rotary Cable tools /
Approximate water strata depths: Fresh, 150 feet; salt, _____ feet.
Approximate coal seam depths: _____ feet. Is coal being mined in this area: Yes No

CASING AND TUBING PROGRAM

CASING OR TUBING TYPE	SPECIFICATIONS		FOOTAGE INTERVALS	CEMENT FILL	PACKERS
	Weight	For Drill - Left in UP OR SACKS			
Conductor	Size	Grade	per ft	New	Used
Fresh water	8 5/8		X	1100'	1100'
Coal					
Intermed.					
Production	4 1/2		X	5200'	As Required
Tubing					
Liners					
Perforations:					
Top					
Bottom					

NOTE: Regulation 7.02 of the Department of Mines provides that the original and four copies of Form IV-2 must be filed with the Department, accompanied by (i) a plat in the form prescribed by Regulation 11, (ii) a bond in one of the forms prescribed by Regulation 12, or in lieu thereof the other security allowed by Code §22-4-2, (iii) Form IV-9, "Reclamation Plan" applicable to the reclamation required by Code §22-4-12b and Regulation 23, (iv) unless previously paid on the same well, the fee required by Code §22-4-8a from the owner of any water well or drilling within 200 feet of the proposed well.

A separate Form IV-2 shall not be required for fracturing or stimulating a well where fracturing or stimulating is to be part of the work for which a permit is sought and is noted as such on the Form IV-2 filed in connection therewith.

The following waiver must be completed by the coal operator and by any coal owner or coal lessee who has recorded a declaration under Code §22-4-20, if the permit is to be issued within fifteen (15) days of receipt thereof:

W A I V E R

The undersigned coal operator / owner / lessee / of the coal under this well location has examined this proposed well location. If a mine map exists which covers the area of the well location, the well location has been added to the mine map. The undersigned has no objection to the work proposed to be done at this location, provided the well operator has complied with all applicable requirements of the West Virginia Code and the governing regulations.

Date: _____, 19____

By: _____

Its: _____

SEPTEMBER 28, 1982

WELL NO. J.N. SWADLEY NO. 2

API NO. 47-085-5931

State of West Virginia
Department of Mines
Oil and Gas Division

CONSTRUCTION AND RECLAMATION PLAN

DESIGNER GENE Stalnaker, Inc.
P.O. Box 178 - 220 W. MAIN ST.
Address Glenville, W.VA. 26351
Telephone 462-5701

DESIGNATED AGENT Gene Stalnaker, Inc.
P.O. Box 178 - 220 W. MAIN ST
Address Glenville, W.VA. 26351
Telephone 462-5701

OWNER J.N. Swadley, heirs

SOIL CONS. DISTRICT Little Kanawha

Vegetation to be carried out by Gene Stalnaker, Inc. (Agent)

This plan has been reviewed by Little Kanawha SCD. All corrections
additions become a part of this plan: 9-28-82
(Date)

Jarrett Newton
(SCD Agent)

ACCESS ROAD

LOCATION

Structure EARTHEN & STONE (A) Structure Diversion Ditch
Material EARTHEN
Page Ref. Manual (2-14) Page Ref. Manual 2-12

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Structure DRAINAGE DITCH (B) Structure Rock-rip-rap
Material Rock
Page Ref. Manual (2-10)(6) Page Ref. Manual 2-16(C-4)

OIL & GAS DIVISION
DEPT. OF MINES

Structure (1) 16" x 24' CMP CULVERT (C) Structure Pit
Material EARTHEN
Page Ref. Manual (2-1)(2-3) Page Ref. Manual N/A

All structures should be inspected regularly and repaired if necessary. All commercial timber is to be cut and stacked and all brush and small timber to be cut and removed from the site before dirt work begins.

REVEGETATION

Treatment Area I

Treatment Area II

Lim 2 Tons/acre
or correct to pH 6.5
Fertilizer 600 lbs/acre
(10-20-20 or equivalent)
(Hay) 2 Tons/acre
Seed* ladino Clover 2 lbs/acre
Ky 31 40.30 lbs/acre
lbs/acre

Lim 2 Tons/acre
or correct to pH 6.5
Fertilizer 600 lbs/acre
(10-20-20 or equivalent)
Mulch (Hay) 2 Tons/acre
Seed* ladino Clover 05/03/2024 lbs/acre
Ky 31 40.30 lbs/acre
lbs/acre


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


MARK C. ECHARD
PLAN PREPARED BY Star Rte 71, Box 6

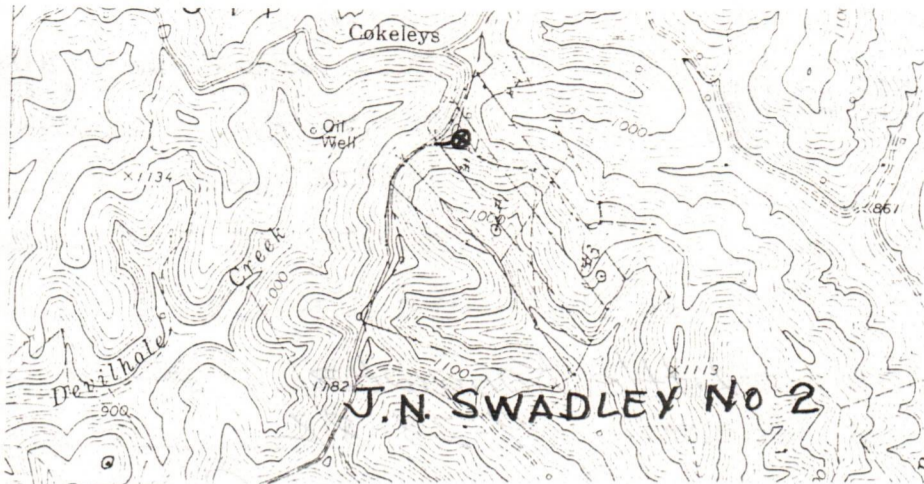
Please request landowners'

ADDRESS Glenville, W.Va. 26351

LEGEND

Well Site 


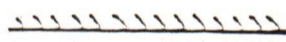










Access Road 

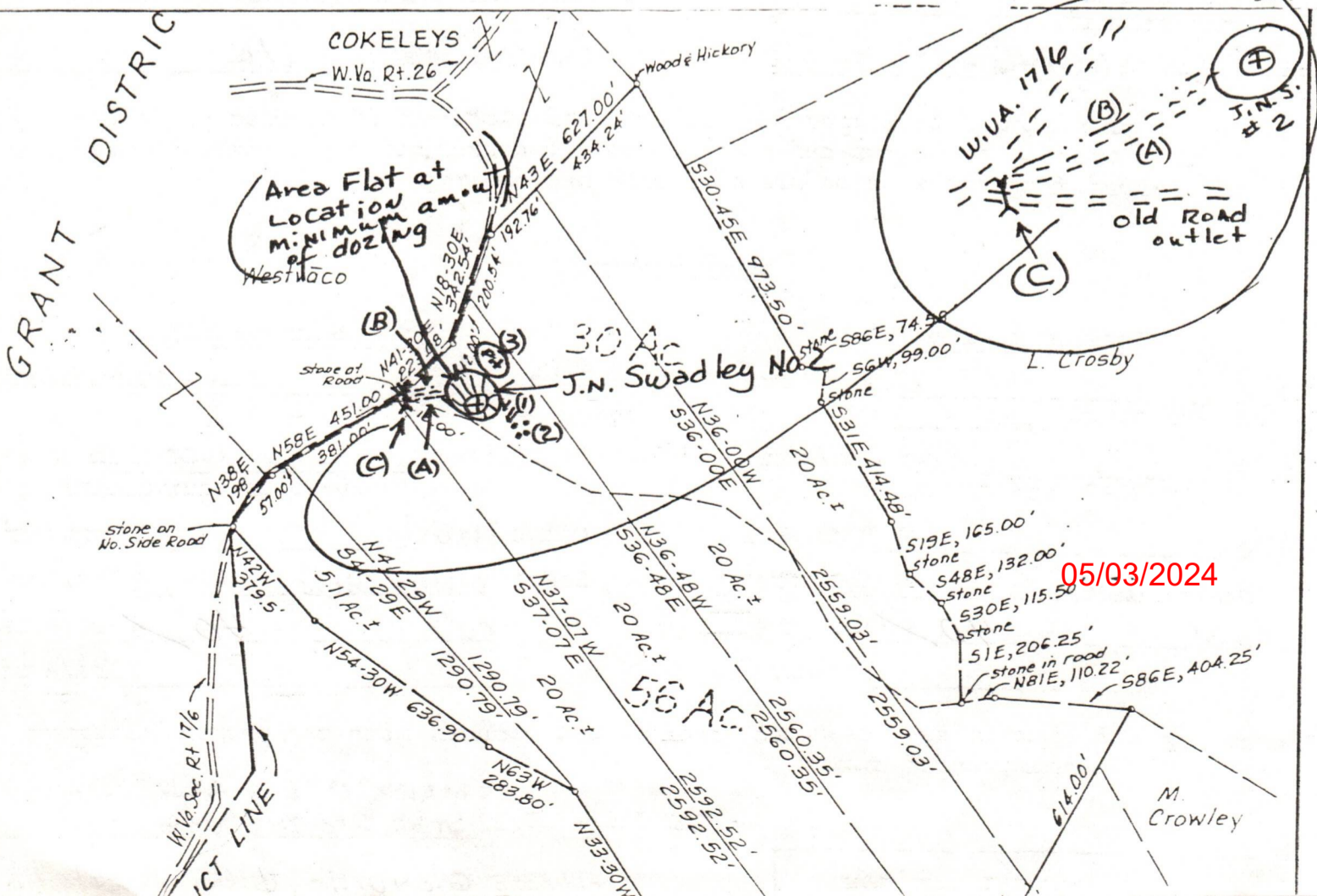


WELL SITE PLAN

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

LEGEND

Property boundary 	Diversion 
Road 	Spring 
Existing fence 	Wet spot 
Planned fence 	Building 
Stream 	Drain pipe 
Open ditch 	Waterway 



FORM IV-60
(6-82)



DATE: September 30, 1982
OPERATOR'S
WELL NO.: Swadley #2
API NO: 47 - 085 - 5931
State County Permi:

State of West Virginia

OFFICE OF OIL AND GAS
DEPARTMENT OF MINES

State of West Virginia

County of Gilmer

AFFIDAVIT

I, GENE STALNAKER (the above designated owner or operator, or authorized representative thereof) hereby verifies that the owner or owners of the mineral estate upon which this proposed well is to be located will receive minimum one-eighth (1/8) royalty payments for any gas or oil extracted therefrom. Copies of the Permit Application and the enclosed plat and reclamation plan have been mailed by registered mail or delivered by hand to the above-named coal operator, co-owner(s), and coal lessee on or before the day of the mailing or delivery of this Permit Application to the Department of Mines at Charleston, West Virginia.

Signed: Gene Stalaker
(Owner, Operator, or Authorized Representative)

Notary: Susan J. Bailey (Signed)
Commissioned as Susan J. Bailey
My commission expires February 22, 1990

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OCT 04 1982

OIL & GAS DIVISION
DEPT. OF MINES

05/03/2024



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SEP 16 1985
DIVISION OF OIL & GAS
DEPARTMENT OF ENERGY

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

This is to acknowledge that the wells listed on the reverse of this form are hereby transferred from Gene Stalnaker, Inc. (the transferor) to Subsurface Energy, Inc., 1967 Glamorgan St., Alliance, Oh. 44601 (the transferee).

The transferee by this document is accepting all responsibility for compliance with the provisions of Chapter 22 Article 4 of the West Virginia Code and all rules and regulations promulgated thereunder, for the listed wells.

The transferee's designated agent (name) Johnny Mike, (address) Rt. 3, Box 74C, Mannington, WV 26582, is on file with the Office of Oil and Gas.

The transferee has bonded the said wells by securities, cash, or surety (circle one) bond identified below by amount, effective date, issuing authority, and any identifying number. Surety Bond effective 05-25-84 issued through Transamerica Insurance Company in the amount of \$50,000.00 under Bond number 5632 3727.

(Transferee) Subsurface Energy, Inc.
By Phil Reid Phil Reid
Its President

Taken, subscribed and sworn to before me this 13th day of September 19 85
Notary Public [Signature]
My commission expires April 9 19 89

(Transferor) Gene Stalnaker, Inc.
By Gene Stalnaker
Its President

Taken, subscribed and sworn to before me this 5 day of April 19 85
Notary Public Barbara C. Smith
My commission expires November 9, 19 92

ACCEPTED THIS 22 DAY OF 10, 19 85
BY: [Signature]
Director - Division of Oil and Gas 05/03/2024

IV-35
(Rev 8-81)

FERC file



State of West Virginia
Department of Mines
Oil and Gas Division

Date _____
Operator's _____
Well No. #2
Farm J. N. Swadley
API No. 47 - 085 - 5931

WELL OPERATOR'S REPORT
OF
DRILLING, FRACTURING AND/OR STIMULATING, OR PHYSICAL CHANGE

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

LOCATION: Elevation: 1205 Watershed Indian Run
District: Murphy County Ritchie Quadrangle Harrisville 7.5

COMPANY Galleria Energy
ADDRESS P. O. Box 83 Harrisville, WV.
DESIGNATED AGENT A. D. Stead
ADDRESS P. O. Box 83, Harrisville, WV.
SURFACE OWNER J. N. Swadley
ADDRESS _____
MINERAL RIGHTS OWNER J. N. Swadley
ADDRESS _____
OIL AND GAS INSPECTOR FOR THIS WORK Sam
Hersman ADDRESS P. O. Box 66, Smithville
WV.
PERMIT ISSUED _____
DRILLING COMMENCED _____
DRILLING COMPLETED 10/18/82
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"	1320	1320	as required
7"			
5 1/2"			
4 1/2"			as required
3"			
2"			
Liners used			

GEOLOGICAL TARGET FORMATION Devonian Shale Depth 2554 - 5400 feet
Depth of completed well 5400 feet Rotary x / Cable Tools _____
Water strata depth: Fresh _____ feet; Salt _____ feet
Coal seam depths: _____ Is coal being mined in the area? no

OPEN FLOW DATA
Producing formation Devonian Shale Pay zone depth _____ feet
Gas: Initial open flow _____ Mcf/d Oil: Initial open flow _____ Bbl/d
Final open flow 336 Mcf/d Final open flow _____ Bbl/d
Time of open flow between initial and final tests 4 hours
Static rock pressure 1100 psig (surface measurement) after 24 hours shut in
(If applicable due to multiple completion-r)
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

05/03/2024

(Continue on reverse side)

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

WELL LOG

FORMATION	COLOR	HARD OR SOFT	TOP FEET	BOTTOM FEET	REMARKS
					Including indication of all fres and salt water, coal, oil and ga
Soil			0	15	
Sandstone & shale			15	100	
Sandstone & shale			100	500	
Sandstone & shale			500	1000	
Sandstone, shale & lime			1000	1500	
Sandstone, shale & lime			1500	1978	
Shale & sandstone			1978	2000	
Sandstone, shale & lime			2000	2100	
Greenbrier limestone			2100	2240	
Big Injun			2240	2267	
Shale			2267	2374	
Wier			2374	2448	
Shale			2448	2552	
Berea			2552	2554	
Shale			2554	2600	
Shale & silty shale			2600	2700	
Silty shale			2700	2800	
Silty shale			2800	2900	
Siltstone			2900	3022	
Fifth sand			3022	3033	
Silty shale			3033	3100	
Shale			3100	3200	
Shale			3200	3300	
Shale			3300	3400	
Shale			3400	3500	
Shale			3500	3600	
Shale			3600	3700	
Shale			3700	3800	
Shale			3800	3900	
Shale			3900	4000	
Silty shale			4000	4100	
Shale & silty shale			4100	4200	
Shale			4200	4300	
Shale			4300	4400	
Shale & silty shale			4400	4500	
Shale			4500	4600	
Shale			4600	4700	
Shale			4700	4800	
Shale			4800	4900	
Shale			4900	5000	
(Attach separate sheets as necessary)					
Shale			5000	5100	
Shale			5100	5200	
Shale			5200	5300	
Shale			5300	5400	

Well Operator

By: _____

Date: _____

05/03/2024

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 those encountered in the drilling of a well."

STATE OF WEST VIRGINIA
DEPARTMENT OF MINES
OIL AND GAS WELLS DIVISION

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OCT 20 1982

OIL AND GAS DIVISION
WV DEPARTMENT OF MINES

INSPECTOR'S WELL REPORT

85-5931
Permit No. 5931

Oil or Gas Well _____
(KIND)

Company <u>Gene Stalnaker Inc.</u>	CASING AND TUBING	USED IN DRILLING	LEFT IN WELL	PACKERS
Address _____	Size			
Farm <u>J. N. Swadley</u>	16			Kind of Packer _____
Well No. <u>2</u>	13			
District <u>Murphy</u> County <u>Ritchie</u>	10			Size of _____
Drilling commenced <u>10-12-82</u>	8 1/4			
Drilling completed _____ Total depth _____	6 3/8			Depth set _____
Date shot _____ Depth of shot _____	5 3/16			
Initial open flow _____ /10ths Water in _____ Inch	3			Perf. top _____
Open flow after tubing _____ /10ths Merc. in _____ Inch	2			Perf. bottom _____
Volume _____ Cu. Ft.	Liners Used			Perf. top _____
Rock pressure _____ lbs. _____ hrs.				Perf. bottom _____
Oil _____ bbls., 1st 24 hrs.	CASING CEMENTED _____ SIZE _____ No. FT. _____ Date _____			
Fresh water _____ feet _____ feet	NAME OF SERVICE COMPANY _____			
Salt water _____ feet _____ feet	COAL WAS ENCOUNTERED AT _____ FEET _____ INCHES			
	_____ FEET _____ INCHES _____ FEET _____ INCHES			
	_____ FEET _____ INCHES _____ FEET _____ INCHES			

Drillers' Names S. Rush / S. J. Rush / Larry Myers
Gene Stalnaker Rig #6 Steel Pusher
Jim Barr

Remarks:
Ran 1309 foot of 8 5/8 casing
Newsco run 250 sacks with 2% cal
100 sacks with 3% cal total 350 sacks
7:00 P.M Plug Down

10-14-82
DATE

Samuel N. Hersman 05/03/2024
DISTRICT WELL INSPECTOR

STATE OF WEST VIRGINIA
DEPARTMENT OF MINES
OIL AND GAS WELLS DIVISION

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OIL & GAS DIVISION
DEPT. OF MINES

INSPECTOR'S WELL REPORT

Permit No. 85-5931

Oil or Gas Well _____
(KIND)

Company Gene Stalvaber Inc.

Address _____

Farm J. Swadley 2nd

Well No. _____

District Murphy County Ritchie

Drilling commenced _____

Drilling completed _____ Total depth _____

Date shot _____ Depth of shot _____

Initial open flow _____ /10ths Water in _____ Inch

Open flow after tubing _____ /10ths Merc. in _____ Inch

Volume _____ Cu. Ft.

Rock pressure _____ lbs. _____ hrs.

Oil _____ bbls., 1st 24 hrs.

Fresh water _____ feet _____ feet

Salt water _____ feet _____ feet

CASING AND TUBING	USED IN DRILLING	LEFT IN WELL	PACKERS
Size			
16			Kind of Packer _____
13			
10			Size of _____
8 1/4			
6 1/2			Depth set _____
5 3/16			
3			Perf. top _____
2			Perf. bottom _____
Liners Used			Perf. top _____
			Perf. bottom _____

CASING CEMENTED _____ SIZE _____ No. FT. _____ Date _____

NAME OF SERVICE COMPANY _____

COAL WAS ENCOUNTERED AT _____ FEET _____ INCHES

_____ FEET _____ INCHES FEET _____ INCHES

_____ FEET _____ INCHES FEET _____ INCHES

Drillers' Names _____

Remarks: Final inspection

O. & Release.

Need well record

9-8-83
DATE

[Signature]
05/03/2024
DISTRICT WELL INSPECTOR



State of West Virginia

Department of Mines

Oil and Gas Division

Charleston 25305

April 10, 1985

Barton B. Lay Jr.
Director

Gene Stalnaker, Inc.
P. O. Box 178
Glennville, West Virginia 26351

Theodore M. Streit
Administrator

In Re: PERMIT NO: 47-085-5931

FARM Swadley

WELL NO: 2

DISTRICT: Murphy

COUNTY: Ritchie

ISSUED: 10-05-82

Gentlemen;

The FINAL INSPECTION REPORT for the above captined well has been received in this office. Only the column checked below applies:

 The well designeated by the above permit number has been released under your Blanket Bond.

 Please return the enclosed cancelled single bond which covered the well designated by the above permit number to the surety company who executed said bond in your behalf, in order that they may give you credit on their records.

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

Very truly yours,

Theodore M. Streit, Administrator
Office of Oil & Gas--Dept. Mines

TMS/ nw

05/03/2024

1.0 API well number: (If not available, leave blank. 14 digits.)	47- 085-5931												
2.0 Type of determination being sought: (Use the codes found on the front of this form.)	107 Section of NGPA												
3.0 Depth of the deepest completion location: (Only needed if sections 103 or 107 in 2.0 above.)	5200												
4.0 Name, address and code number of applicant: (35 letters per line maximum. If code number not available, leave blank.)	a Texas Corp. Galleria Energy dba Formula Oil & Gas, Inc Name P. O. Box 83 Street Harrisville, WV 26362 City State Zip Code												
5.0 Location of this well: (Complete (a) or (b).) (a) For onshore wells (35 letters maximum for field name.)	Indian Run Field Name Ritchie County WV State												
(b) For OCS wells:	Area Name _____ Block Number _____ Date of Lease: _____ Mo. Day Yr. OCS Lease Number _____												
(c) Name and identification number of this well: (35 letters and digits maximum.)	J. N. Swadley # 2												
(d) If code 4 or 5 in 2.0 above, name of the reservoir: (35 letters maximum.)	_____												
6.0 (a) Name and code number of the purchaser: (35 letters and digits maximum. If code number not available, leave blank.)	Consolidated Gas Supply Name Buyer Code _____												
(b) Date of the contract:	Pending _____ Mo. Day Yr.												
(c) Estimated annual production:	36.5 MMcf.												
7.0 Contract price: (As of filing date. Complete to 3 decimal places.)	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:25%;">(a) Base Price (\$/MMBTU)</th> <th style="width:25%;">(b) Tax</th> <th style="width:25%;">(c) All Other Prices [Indicate (+) or (-).]</th> <th style="width:25%;">(d) Total of (a), (b) and (c)</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> </tr> <tr> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> </tr> </tbody> </table>	(a) Base Price (\$/MMBTU)	(b) Tax	(c) All Other Prices [Indicate (+) or (-).]	(d) Total of (a), (b) and (c)	---	---	---	---	---	---	---	---
(a) Base Price (\$/MMBTU)	(b) Tax	(c) All Other Prices [Indicate (+) or (-).]	(d) Total of (a), (b) and (c)										
---	---	---	---										
---	---	---	---										
8.0 Maximum lawful rate: (As of filing date. Complete to 3 decimal places.)	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:25%;">(a) Base Price (\$/MMBTU)</th> <th style="width:25%;">(b) Tax</th> <th style="width:25%;">(c) All Other Prices [Indicate (+) or (-).]</th> <th style="width:25%;">(d) Total of (a), (b) and (c)</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> </tr> <tr> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> <td style="text-align: center;">---</td> </tr> </tbody> </table>	(a) Base Price (\$/MMBTU)	(b) Tax	(c) All Other Prices [Indicate (+) or (-).]	(d) Total of (a), (b) and (c)	---	---	---	---	---	---	---	---
(a) Base Price (\$/MMBTU)	(b) Tax	(c) All Other Prices [Indicate (+) or (-).]	(d) Total of (a), (b) and (c)										
---	---	---	---										
---	---	---	---										
9.0 Person responsible for this application:	A.D. Steed Name Title _____ Signature _____ Date Application is Completed Phone Number												

High cost natural gas
 Category Code
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 AUG 24 1983

DEPT. OF MINES

05/03/2024

NOV 18 1983

BUYER-SELLER CODE

PARTICIPANTS:

a Texas Corp. DATE:

WELL OPERATOR: Galleria Energy dba Formula Oil & Gas, Inc.

FIRST PURCHASER: Consolidated Gas Supply

OTHER:

Devonian

W. Va. Department of Mines, Oil & Gas Division
WELL DETERMINATION FILE NUMBER

830824-107-085-5931

Use Above File Number on all Communications
Relating to Determination of this Well

~~As per~~ ~~No log~~
~~no work sheet~~
~~submitting~~

QUALIFIED

CHECK EACH ITEM AS COMPLETE OR NOTE WHAT IS MISSING

ITEM NO.

- 1. FERC -121 Items not completed - Line No. All 7.0 + 8.0
- 2. IV-1 Agent A. D. Stead
- 3. IV-2 Well Permit _____
- 4. IV-6 Well Plat _____
- 5. IV-35 Well Record Drilling Deepening _____
- 6. IV-36 Gas-Oil Test: Gas Only _____ Was Oil Produced? _____ Ratio _____
- 7. IV-39 Annual Production _____ years
- 8. IV-40 90 day Production _____ Days off line: _____
- 9. IV-48 Application for certification. Complete?
- 10-17. IV Form 51 - 52 - 53 - 54 - (55) - 56 - 57 - 58 Complete? Affidavit Signed
- 18-28. Other: Survey _____ Logs _____ Geological Charts _____
Structure Map _____ 1: 4000 Map _____ Well Tabulations _____
Gas Analyses _____
- (5) Date commenced: _____ Date completed 10-18-82 Deepened _____
- (5) Production Depth: _____ T.D. 5400
- (5) Production Formation: Devonian Shale
- (5) Final Open Flow: 336 MCF
- (5) After Frac. R. P. 1100# 24hrs.
- (6) Other Gas Test: _____
- (7) Avg. Daily Gas from Annual Production: _____
- (8) Avg. Daily Gas from 90-day ending w/1-120 days _____
- (8) Line Pressure: _____ PSIG from Daily Report _____
- (5) Oil Production: _____ From Completion Report _____
- 10-17. Does lease inventory indicate enhanced recovery being done NO
- 10-17. Is affidavit signed? Notarized? 05/03/2024
- Does official well record with the Department confirm the submitted information? yes
- Additional information _____ Does computer program confirm? _____
- Was Determination Objected to _____ By Whom? _____

DEVONIAN SHALE GAMMA RAY LOG ANALYSIS
APPLICATION FOR DETERMINATION OF THE MAXIMUM LAWFUL
PRICE UNDER THE NATURAL GAS POLICY ACT

Operator: Galleria Energy Agent: A. D. Stead

Type Determination being sought - 107 (Devonian Shale)

API Well No.: 47-085-5931 = Well Name: Swadley #2

West Virginia Office of Oil and Gas County: Ritchie
References: SJA File No.

Vol. _____ Page _____ Line _____

I. NOTE: A Gamma Ray Log has been marked with the (a) Shale Base Line, (b) a line representing 0.7 x (Shale Base Line), (c) intervals with Gamma Ray units less than 0.7 x (Shale Base Line) and that log is included with this analysis.

II. Gamma Ray elevation indices:

A. Shale Base Line (API Units)

1. GR Value at Base Line = _____ * API Units

2. Remarks: *Gamma Ray shifts at following points*

2554 - 2610 = 160 = 112	2996 - 3454 = 160 = 112	4380 - 4440 = 160 = 112	<i>see below</i>
2610 - 2634 = 175 = 122.5	3454 - 3592 = 150 = 105	4440 - 4516 = 180 = 126	
2634 - 2816 = 150 = 105	3592 - 4113 = 160 = 112	4516 - 4656 = 165 = 115.5	
2816 - 2912 = 157 = 109.9	4113 - 4240 = 162 = 113.4	4656 - 4674 = 185 = 129.5	
2912 - 2996 = 145 = 101.5	4240 - 4380 = 165 = 115.5	4674 - 5135 = 177 = 123.9	

1. GR Value = _____ * API Units

2. Calculation: 0.7 (GR Value at Base Line)
0.7 (_____ *) = _____ API Units

III. Intervals with GR index less than 0.7 x (Value at Base Line):

Interval		Thickness of Interval	Feet of less than* 0.7 (Shale Base Line)
From**	To***	Feet	Feet
2554	5400	2846	21

Total Devonian Interval 2846

Total Less Than 0.7 (Shale Base) 21

% Less Than 0.7 (Shale Base Line) = .0073 x 100 = .73%

*Marked on log included with analysis.

**Top of Devonian Section Recorded on First Interval in this Column.

***Lesser of TD or Bottom of Devonian Section Recorded as last Interval in this column.

5135 - 5190 = 180 = 126
5190 - 5340 = 180 = 126
5340 - 5400 = 190 = 133

05/03/2024

Note: We don't have any logs for this well,
You may check with Galleria Energy at
214-385-9266

STATE OF WEST VIRGINIA
DEPARTMENT OF MINES, OIL AND GAS DIVISION

Date _____, 19__

Operator's Well No. # 2

API Well No. 47 - 085 - 5931
State County Permit

STATE APPLICATION FOR WELL CLASSIFICATION

Previous File No. _____
(If Applicable)

WELL OPERATOR a Texas Corp.
Galleria Energy dba Formula Oil & Gas
ADDRESS P. O. Box 83
Harrisville, WV 26362

DESIGNATED AGENT A. D. Stead
ADDRESS P. O. Box 83
Harrisville, WV 26362

Gas Purchase Contract No. Pending and Date _____
(Month, day and year)

Meter Chart Code _____

Name of First Purchaser Consolidated Gas Supply Corp.
445 West Main Street
(Street or P. O. Box)
Clarksburg, WV 26301
(City) (State) (Zip Code)

FERC Seller Code _____ FERC Buyer Code _____

TYPE OF DETERMINATION BEING SOUGHT:

- (1) Initial determination (See FERC Form 121.) 107 Section of NGPA High Cost Natural gas Category Code
- (2) Determination that increased production is the result of enhanced recovery technology.
- (3) Determination of a seasonally affected well.

A. D. Stead Designated Agent
Name (Print) Title
Signature _____
P. O. Box 83
Street or P. O. Box
Harrisville, WV 26362
City State (Zip Code)
() Phone Number
Area Code

(Certificate of Proof of Service to Purchaser)

(All of the above to be completed by the Operator/Applicant)

(To be completed by Jurisdictional Agency. Executed copy to be returned to Operator/Applicant and purchaser, if known).

The Department of Mines has received a request for certification of the above described well as meeting the requirements of Section _____ under the Natural Gas Policy Act of 1975 (NGPA); or for determination that increased production is the result of enhanced recovery technology under Section 108 of (NGPA); or for determination of a seasonally affected well under Section 109 of (NGPA).

All interested parties are hereby notified that on the _____ day of _____, 19____, at the office of the Oil and Gas Division in Charleston, West Virginia, or as soon thereafter as it may be heard, there will be a public hearing, if requested, or if objection is filed.

This Application is assigned File No. _____

Initial review of information submitted indicates the well is, is not entitled to certification as claimed under the Natural Gas Policy Act (NGPA). A review of this evidence and any additional evidence will be made at the time appointed for a public hearing or as soon thereafter as the matter may be heard.

Unless objections are timely filed or a request for a hearing is made within fifteen (15) days, a hearing will not be held except on ex parte motion of the department and the matter will go to determination.

WEST VIRGINIA DEPARTMENT OF MINES

AUG 24 1983

By [Signature] Director
Title _____
05/03/2024

Date received by Jurisdictional Agency _____

CALCULATION OF BOTTOM HOLE PRESSURE

085-5931

$$P_f = P_{we} \quad (\text{XGLS})$$

Where:

P_f = shut-in formation pressure (psia)

P_w = pressure at the wellhead (psia)

e = napierian logarithm base (2.71828)

G = specific gravity of gas .70

L = length of casing to mid-point of the perforations (feet)

S = supercompressibility of gas at the mean temperature and pressure
(average of wellhead and bottom hole temperature and pressure) .78

$X = \frac{1}{53.34 T}$ where T = average wellhead and bottom hole temperature ($^{\circ}\text{R}$) $95 + ^{\circ}\text{R}$

$$(.0000337 \times .7 \times .78 \times 4500)$$

$$P_f = 1100 e$$

$$P_f = 1100 e \quad (.083)$$

$$P_f = 1100 e$$

$$P_f = 1100 (1.086)$$

$$P_f = 1194.6\#$$

05/03/2024

WELL CLASSIFICATION FORM
HIGH COST GAS WELL - DEVONIAN SHALE
NGPA Section 107

DESIGNATED AGENT A. D. Stead

ADDRESS P. O. Box 83
Harrisville, WV 26362

LOCATION Elevation 1205

WELL OPERATOR a Texas Corp. Galleria Energy dba Formula Oil & Gas Watershed Indian Run

ADDRESS P. O. Box 83 Harrisville, WV 26362
Dist. Murphy County Ritchie Quad. Harrisville 7

Gas Purchase Contract No.

GAS PURCHASER Consolidated Gas Supply Meter Chart Code

ADDRESS 445 West Main Street Clarksburg, WV 26301
Date of Contract Pending

* * * * *

Date surface drilling began:

Indicate the bottom hole pressure of the well and explain how this was calculated.

SEE ATTACHED

AFFIDAVIT

I, A. D. Stead, having been first sworn according to law, state that I have calculated the percentage of footage of the producing interval which is not Devonian Shale as indicated by a Gamma Ray index of less than 0.7 if a Gamma Ray log described in subparagraph (3)(i) or (3)(ii)(A) has been filed, or as indicated by the report described in subparagraph (3)(ii)(B); I have demonstrated that the percentage of potentially disqualifying non-shale footage is equal to or less than five (5) percent of the gross Devonian age interval; and I have no knowledge of any information not described in the application which is inconsistent with a conclusion that the well qualifies as a high-cost natural gas well.

[Signature]

STATE OF WEST VIRGINIA

COUNTY OF Ritchie, TO-WIT:

I, Bethel Aline Stewart, a Notary Public in and for the state and county aforesaid, do certify that A. D. Stead, whose name is signed to the writing above, bearing date the 19th day of July, 1983, has acknowledged the same before me, in my county aforesaid.

Given under my hand and official seal this 19th day of July 05/03/2024.
My term of office expires on the 11th day of June, 1991.

(NOTARIAL SEAL)

[Signature: Bethel Aline Stewart]
Notary Public
(comm. Bethel Aline Stewart)

