WR-35 Rev. 8/23/13

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

API 47 - 103 - 00220 W County Wetzel	District Proctor
Quad Wileyville Pad Name	Field/Pool Name Victory A
Farm name McMahon, Augustus III	Well Number 4386
Operator (as registered with the OOG) Columbia Gas Tra	
Address 1700 MacCorkle Ave SE City Ch	arleston State WV Zip 25325-1273
As Drilled location NAD 83/UTM Attach an as-drille Top hole Northing Landing Point of Curve Northing Bottom Hole Northing	Easting
Elevation (ft) 1110 GL Type of Well	
Permit Type Deviated Horizontal Horizon	ntal 6A & Vertical Depth Type Deep Shallow
Type of Operation Convert Deepen Drill	•
Well Type □ Brine Disposal □ CBM □ Gas □ Oil □ Sec	condary Recovery
Type of Completion Single □ Multiple Fluids Produ Drilled with □ Cable □ Rotary	
Drilling Media Surface hole □ Air □ Mud □Fresh Wa Production hole □ Air □ Mud □ Fresh Water □ Brind Mud Type(s) and Additive(s)	
Date permit issued6/07/13 Date drilling comm	nencedDate drilling ceased
Date completion activities began8/22/13	Date completion activities ceased 9/30/13
	d Granted by
Please note: Operator is required to submit a plugging applic	ation within 5 days of verbal permission to plug
Freshwater depth(s) ft	Open mine(s) (Y/N) depths
Salt water depth(s) ft	Void(s) encountered (Y/N) depths
Coal depth(s) ft	Cavern(s) encountered (Y/N) depths
Is coal being mined in area (Y/N)	
	RECEIVED Reviewed by: Office of Oil & Gas

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WR-35 Page ___ of ___ Rev. 8/23/13 API 47-103 _ 00220 Farm name McMahon, Augustus III Well number_ **CASING** Hole Casing New or Grade Basket Did cement circulate (Y/N) **STRINGS** Size Size Used wt/ft Depth Depth(s) * Provide details below* Conductor Surface Coal Intermediate 1 Intermediate 2 Intermediate 3 Production Tubing Packer type and depth set Comment Details No existing casing was altered and no additional casing installed during permitted well work. CEMENT Class/Type Number Slurry Yield Volume Cement WOC DATA of Cement (ft ³/sks) of Sacks wt (ppg) Top (MD) (hrs) Conductor Surface Coal Intermediate 1 Intermediate 2 Intermediate 3 Production Tubing Drillers TD (ft) Loggers TD (ft) Deepest formation penetrated Plug back to (ft) Plug back procedure Kick off depth (ft)_ Check all wireline logs run a caliper density □ deviated/directional □ induction neutron resistivity 🗆 gamma ray a temperature **□sonic** Well cored □ Yes □ No □ Conventional □ Sidewall DESCRIBE THE CENTRALIZER PLACEMENT USED FOR EACH CASING STRING WAS WELL COMPLETED AS SHOT HOLE □ Yes ■ No DETAILS WAS WELL COMPLETED OPEN HOLE? ■ Yes □ No DETAILS WERE TRACERS USED □ Yes ■ No TYPE OF TRACER(S) USED

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API 47- 103 - 00220	Farm nameMcMahon, Augustus III	_Well number
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PERFORATION RECORD

Stage No.	Perforation date	Perforated from MD ft.	Perforated to MD ft.	Number of Perforations	Formation(s)
					
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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)
1	9/27/13	0.1	1400	N/A	N/A	0	0	400 gal acid
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						HEC	EIVED	
						Office of	OIRG	as
						1		
Please	insert additio	nal pages as ar	oplicable.			0010	1 2013	

Please insert additional pages as applicable.

WV Department of Environmental Protection 11/01/2013

WR-35 Page of Rev. 8/23/13 Farm name McMahon, Augustus III Well number 4386 API 47- 103 _ 00220 PRODUCING FORMATION(S) **DEPTHS** Maxton (storage) 1876 - 1912 TVD MD Please insert additional pages as applicable. **GAS TEST** □ Build up □ Drawdown □ Open Flow OIL TEST | Flow | Pump SHUT-IN PRESSURE Bottom Hole Surface DURATION OF TEST hrs _psi **OPEN FLOW** Oil NGL Water GAS MEASURED BY mcfpd bpd bpd bpd □ Estimated □ Orifice □ Pilot LITHOLOGY/ TOP **BOTTOM** TOP **BOTTOM FORMATION** DEPTH IN FT DEPTH IN FT DEPTH IN FT DEPTH IN FT DESCRIBE ROCK TYPE AND RECORD QUANTITYAND NAME TVD TVD MD MD TYPE OF FLUID (FRESHWATER, BRINE, OIL, GAS, H2S, ETC) 0 0 Please insert additional pages as applicable. Drilling Contractor _____ Address ____ City State _____ Zip _____ Logging Company _____ Address ____ City State Zip Cementing Company Address City State ____ Zip Stimulating Company Universal Well Services Address Route 5, Hail Rd Buckhannon State WV Zip 26201 City Please insert additional pages as applicable. Completed by Jim Amos Telephone 304-483-0073 Signature Title Senior Engineer Date 10/01/13 Submittal of Hydraulic Fracturing Chemical Disclosure Information Attach copy of FRACFOCUS Registry