FORM IV-1

A-1

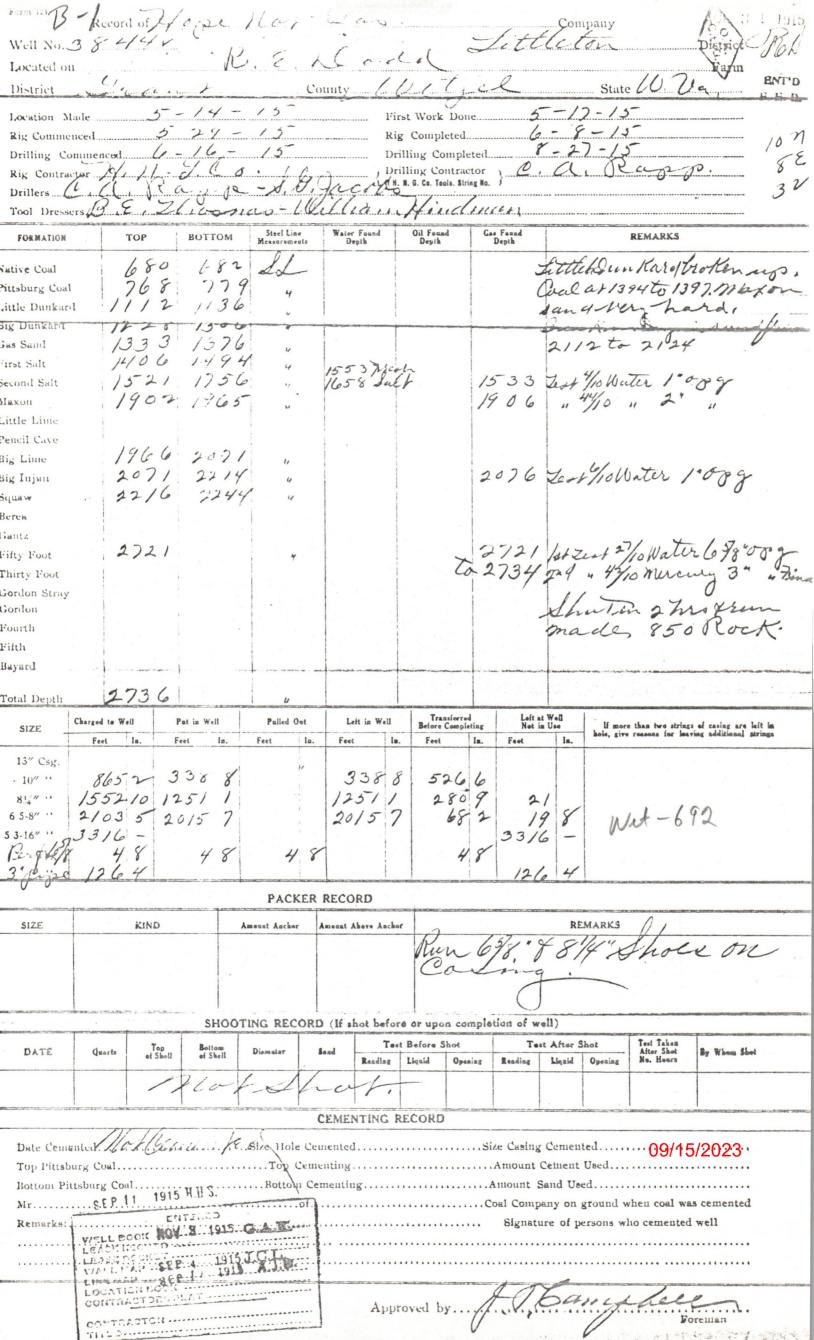
STATE OF WEST VIRGINIA DEPARTMENT OF MINES, OIL AND GAS DIVISION

DESIGNATION OF AGENT BY WELL OWNER OR OPERATOR

Well Operator X / Owner X / Consolidated Gas Supply Corporation
Address 445 West Main Street
Clarksburg, West Virginia 26301
Pursuant to the provisions of Code 8 22 4 11
Pursuant to the provisions of Code g 22-4-lk, and subject to the requirements of Regulation 7.01, the undersigned hereby designates the following assumption
purpose of receiving process, notices, orders and other communications which may be issued under Chapte
Designated Agent J. W. Hendrickson
Address 445 West Main Street
Telephone 304-623-3611
The undersigned represents that asid to
The undersigned represents that said designated agent is a bona fide resident of the State of West Virginia, and has agreed to accept the designation.
X all wells owned or operated by the undersigned in Work William applies to the following wells
the wells listed below (Wea space below or reverse side or attach list)
[COMPLETE AS APPLICABLE]
The undersigned is hereby recording an existing designation of agent made prior to the initial adoption of Form IV-1.
The undersigned is proposite
The undersigned is proposing to own or operate wells in West Virginia for the first
time, so that this designation should also be considered the registration by the undersigned with the Deputy Director.
X The undersigned has owned and operated a well or wells in West Virginia since the
year 191898, but has not heretofore appointed a designated agent.
This designation substitutes a new designated agent for the undersigned, who has
well of Wells in West Virginia since the
present designated agent of the undersigned, who will continue as such, if he is
able, until this new designation has been approved, is
Agent being replaced
Address
Consolidated Gas Supply Corp.
owner or Operator
CCEPTED this January 17 , 19 79 Its: Vice Provident
Its: Vice President, Appl. Cas Supply 2
(Signature of designated agent)
aken, subscribed and sworn to be to
otary Public Jacob Solve of January 1979.
My commission expires September 13, 19 86
otary Public Jacob Scalley My commission expires September 13 , 19 86
ell owner or operator must be a responsible officer of the corporation, trustee, individual or legally

HOPE NATURAL GAS CO.	
LOCATION FOR WELL No. 3844	
On Stand District, District, District, County, West Virginian County	in
Lease No. 3287 Acres 16 N. 10 S. E. 8 W. Scale, one inch equals 800000 Sent to Clarksburg Office Glocy 12 19	
and Sun Eundred Sext Fran Oleo. N. Westa farm and	a
Lucy survivier just from M. V. Hibrer favore. 5-12-15	
Jesse & Hirsenson 11. Ca 5-14-15	•
Martin 1194	
Esta Sacobiniosis	
Book A	
Motor ANN Total ANN TOTAL STATE OF THE PROPERTY OF THE PROPERT	Prof.
330 B. F. Hibbs	
WET-692	
	m 44
RESERVE Fire reds four electricingo	
on premier cand aldale fleare Nor 27. 190	9,
SPECIAL INSTRUCTIONS: COMPLETE WELL ON OR BEFORE 09/15/2023	
Location made 5-14 - 15 by J. S. Lang As per plat, except as noted. On field in	na
5. 15-15 Returned to Pittsburgh 5-15-15	
Location changed on account of	•

Authorized by Date 1 Signed.........



(1-1

47-103-692	
108 Caregory Code	
feet	
Consolidated Gas Supply Corporation Name 445 West Main Street Street Clarksburg W. Va. 26301	004228 Seller Code
West Virginia Other A-85772	
Area Name Date of Lease Mo Day Yr OCS Lease Number	
R. E. DODD 3844	
General System Purchasers	Buye Cco-
Mo Day Yr	nidounilationiss: - And Y Curtournamentals to reliable to
(a) Base Price (b) Tax (c) All Other Prices (Indicate (+) or (-).)	(d) Total of (a), (b) and (d)
2.224	
J. W. Hendrickson Norme Mendrickson Signature PEC, 31, 1978 Dec Application is Completed Proper Number	as Supply
	Took Section of NGPA Caregor, Code feet Consolidated Gas Supply Corporation Name hh5 West Main Street Street Clarksburg Clarksburg Clarksburg West Virginia Other A-85772 Field Name WETZEL W. Va. County State Date of Lease Mo Day Yr OCS Lease Number Area Name Block Number Caregor, Code W. Va. 26301 City West Virginia Other A-85772 Field Name WETZEL W. Va. State OCS Lease Number Area Name Ceneral System Purchasers Name Amo Day Yr MMcf. (a) Base Price (s)/MMBTU) Mo Day Yr MMcf. 1. (a) Base Price (s)/MMBTU) V. P. C. Title Signature Signature V. P. C. Title

U.S. DEPARTMENT OF ENERGY Federal Energy Regulatory Commission Washington, D.C. 20426

APPLICATION FOR DETERMINATION OF THE MAXIMUM LAWFUL PRICE UNDER THE NATURAL GAS POLICY ACT (NGPA) (Sections 102, 103, 107 and 108)

PLEASE READ BEFORE COMPLETING THIS FORM:

General Instructions

Complete this form if you are applying for price classification under sections 102, 103, 107 or 108 of the NGPA. A separate application is required for each well. If any reservoir qualifies for a category which differs from the category applicable to the producing well, separate applications must be made for the producing well and the reservoir. Complete each appropriate item on the reverse side of this page. The code numbers used in items 4.0 and 6.0 can be obtained from the Buyer/Seller Code Book. If there is more than one purchaser or contract, identify the additional information in the space below. Enter any additional remarks in the space below.

Submit the completed application to the appropriate Jurisdictional Agency as listed in title 18 of the CFR, part 270 103 - 11 there are any questions, call (202) 275-4539

Specific Instructions for Item 2 0. Type of Determination

Section of NGPA	Category Code	Description
102	1	New OCS Lease
102	2	New onshore well (2.5 mile test)
102	3	New onshore well (1,000 feet deeper test)
102	4	New onshore reservoir
102	5	New reservoir on old OCS Lease
103		New onshore production well
107	-	High cost natural gas
108	_	Stripper well

Other Purchasers Contracts

Contract Date Purchaser Buyer Code (Mo Day Yr.)

Remarks

Applicant is an interstate pipeline company. Its production from the subject well is delivered into its pipeline system and is therefore not subject to a field sales contract.

STATE OF WEST VIRGINIA DEPARTMENT OF MINES, OIL AND GAS DIVISION Date __ DEC. 31 19 78 Operator's Well No.

API Well

103 No. 47 - 105 - Permit

WELL CLASSIFICATION FORM

STRIPPER GAS WELL

NGPA Section 108

	DESIGNATED AGENT J. W. Hendrickson
	ADDRESS 445 West Main Street
	Clarksburg, West Virginia 26301
WELL OPERATOR Cons. Gas Supply Corp.	LOCATION: Elevation 1/15
ADDRESS 445 West Main Street	Watershed WILLEY FORK
Clarksburg, W. Va.	Dist. GRANT County WETZEL Quad. NH
GAS PURCHASER None; gas is de-	Gas Purchase Contract No. N/A
ADDRESS <u>livered</u> into applicant's	Meter Chart CodeN/A
interstate pipeline system	Date of ContractN/A

Provide a complete inventory of the lease and production equipment used for the well for the previous 24 months or, if less than 24 months, the period the well has been in production. Include a complete list of equipment or processes used in connection with recognized enhanced recovery techniques during completion or production. (Attach separate sheets, if necessary.)

See attachment; compression, dehydration, or related equipment indicated on the attached inventory, and hydraulic fracturing, shooting, or similar completion processes indicated on the attached well records, are used in connection with recognized enhanced recovery techniques during production or completion.

List all records reasonably available to you which contain information relevant to a determination of eligibility (including production records, B&O Tax Records and royalty payment records) and indicate the location of such records:

Applicant's oil and gas production records (which are largely computerized) constitute its primary and most reliable source of information relevant to a determination of eligibility. From these records Applicant derives information used by it in connection with royalty payments, tax payments, and general statistical uses, and records of these matters are also maintained. All of the above records are located at Applicant's offices at 445 West Main Street, Clarksburg, West Virginia.

Describe the search made of any records listed above.

As indicated, Applicant's primary oil and gas production records have been largely computerized. In preparing this application, Applicant, by use of its computers, generated a listing of those of its wells which produced non-associated natural gas at a rate not exceeding an average of 60 Mcf per production day (at maximum efficient rates of flow) during the 90 day production period indicated on the attachment. These listings were checked and verified manually by two or more Applicant's employees. The results of this diligent search and examination indicated that the well which is the subject of this application qualifies as a stripper well; see attached data submitted in compliance with applicable regulations of this agency and the Federal Energy Regulatory Commission.

Are you aware of any other information which would tend to be inconsistent with the information specified above? Yes No χ . If yes, indicate the type and source of the information.

AFFIDAVIT

I, J. W. Hendrickson , having been first sworn according to law, state that I have caused to be made a diligent search of those records hereinbefore indicated in the manner herein described, that the information contained in this document is true and accurate and that on the basis of the records and examinations hereinbefore described, and to the best of my information, knowledge and belief, the well for which this certification is sought qualifies as a stripper well.

STATE OF WEST VIRGINIA,

COUNTY OF HARRISON , TO WIT:

I, Ralph D. Bradley, a Notary Public in and for the state and county aforesaid, do certify that J.W. Hendrickson, whose name is signed to the writing above, bearing date the _____ day of ____ DEC 3119789___, has acknowledged the same before me, in my county aforesaid.

Given under my hand and official seal this ____ day of ______, 1979_.

My term of office expires on the 13th day of ______, 1986.

Notary Public

(NOTORIAL SEAL)

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رب. د	169.89 81	255 27 25	169°99 91 895	177 13 68.830	15 9 9 9 9 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	159.89 75	0E8•89 91 615	168°89 21 22	069°99 EL	TE8.89 5T 89h	928°89 9 9	069•99 91 105	977 PROD AILY AVG PEC. GRAV.
	629•99 11 55E	510 17 68.830	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	• 0	0.00	976 PROD AILY AVG PEC. GRAV.
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2557 850 00.0000 LEASE	PREST 1	ORIG OPENORIG ROCK PCT INTER TOWNSHIP PRE 10/0				9/25/19 8/25/19 9/25/19	TE D	E CO			14. 0788 DE 0	UMBER 3844 Y FORMATION CODE CT MANINGTN 103 NUMBER-999999999999999999999999999999999999	IELL NUMBER 38 COMPANY FORMATION DISTRICT MANINGTN COUNTY 103 ETER NUMBER-9999 COCK PRESSURE ERMIT NUMBER 6
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09/15/2023