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 & 22-4-lk, and subject to the requirements of Regulation |
| 7.01, the undersigned hereby designates the following person to be the agent of the undersigned for the |
| purpose of receiving process, notices, orders and other communications which may be issued under Chapter |
| 22 of the Code of West Virginia: |
| Designated Agent J. W. Hendrickson |
| Address 445 West Main Street |
| Clarksburg, West Virginia 26301 |
| Telephone 304-623-3611 |
| |
| 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. This designation applies to the following well |
| X all wells owned or operated by the undersigned in West Virginia |
| the wells listed below (Wee space below or reverse side or attach list) |
| and the state of t |
| |
| [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 proposing to our or |
| 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. |
| brace spice with the beputy bilector. |
| $oxed{X}$ The undersigned has owned and operated a well or wells in West Virginia since the |
| year 181898 , but has not heretofore appointed a designated agent. |
| This designation substitutes a new designated agent for the undersigned, who has |
| owned or operated a well or wells in West Virginia since the year 19 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 |
| |
| 그는 보내가 다양한 하시네요 하는 생생이 되어 보지 않는데 살 때 얼마나 하시네요. |
| Consolidated Gas Supply Corp. |
| By: Well Owner or Operator |
| ACCEPTED this January 17 , 19 79 Its: Vice President, Apply Cas (Supply |
| (Signature of designated agent) |
| Taken, subscribed and sworn to before me this 17th day of January , 1979. |
| |
| Notary Public Saggled of Production My commission expires September 13, 1986 |
| Well owner or operator must be a responsible officer of the corporation, trustee, individual or legally qualified representative of owner of the well(s). |

HOPE NATURAL GAS COMPANY LOCATION FOR WELL No. 4796 illelor Farm, on waters of District, County, West Virgini Scale one inch equals Location made in Pittsburgh 26 9 7 Sent to Clarksburg Mar 2 191; Location to be con center of tractata point 1900 feet from county road as for plat U.B.100 HS 1228 F.F.Morgon T L Train 86/2 Lauce Took Wall Map MAH 20 1917 F.F. Morgan Line Map APR /0 1917 A.J.D. N.S. Willay to Sheets MAR 30 1917 R R g Ara Long. 1229 4-24-97 TITLE SPECIAL INSTRUCTIONS: COMPLETE WELL ON OR BEFORE Same Lease on which Located Well No. 09/15/2023 by IAllunningham As per plat, except as noted: On field map. Location made 3-1-17 3-6-17 1 . Returned to Pittsburgh 3-6-17 Location changed on account of Authorized by Date Signed

| Well No | 4796 V | . 3 | -/. | Пор | e Nai | ural | Ui RF | as Con COR | npa: D | ny | | Mann | ington. | | District |
|--|--------------------|----------------------------|----------|--------|------------|--------------|----------|---------------|---|----------|-------|--------------------|-------------------|---------------|------------------------|
| | e Arah | long | V. | | | | 2 | -0011 | | N.10 | Vs | | E 7 | W. | |
| | Work Don | | 20. 19 | 52 | | 10 | U | Natu | | | | | Spudder | | - |
| Commence | ed: | | | | | | | Comp | pleted: | | _ | | 14 10 | | |
| | ing Out | | | | | | | | | | | | 14, 19 | | ••••• |
| | g Deeper | | | | ./ | | | | | | | | •••••••••• | | |
| Aband | doning | Not a | band or | add. | | | | | | oning | | | | | |
| 6: | Befor | e Repairs | | | Pulled | G AND T | DRIV | Put in | | | | After | Repairs | | W-:-h- |
| Size | Tally | Steel Li | ne | Tally | St | eel Line | | Tally | Steel | Line | Т | ally | Steel I | ine | Weight |
| | 2166 | _ | | none | r | none | 1 | none | non | 9 | 2 | 166 | -= | - | - |
| 5-1/2* | 2998 | | | none | r | none | 1 | none | non | θ | 2 | 998 | / | - | - |
| 35"Tub | none | | | none | | one | | 3159 V | 313 | 8 | 3 | 159 | 313 | 9 | - |
| | | | | GVICOM | luc proc | | | | | | , , | | 1 | | |
| Date | Quarts | Top of Botto | om of Di | ameter | | TEST BEFO | | HOT TES | T AFTE | | Test | Taken r Shot | B | Whom S | hot |
| | | Shell Sl | hell | - | . 1 | Reading Liqu | 1. | Pening Readi | ng Liqui | d Openin | No. | lours | | | |
| | - | | | | <u></u> | ot Shot | - | <u></u> | - | - | - | | | | |
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| | | RECORD OF | 1 | | | | 1 | | - | / | Ī | | RECORD | | Sat At |
| rom | nation | То | P | Botton | m | Oil at | - | Gas at | | lize | | | ind | | Set At (Steel Line) |
| Commenced dr | illing at depth of | Not | drille | d dee | mr | | _ | ı | 5-3/ | 16"x3 | " Sp | l. Ga | sincho | r 30 | 641-7* |
| Cleaned | out to | 31 | 43 | V | | | - | | - | | | | | | |
| rilled b | ack solid | i to 31 | 39 | V | | | _ | | - | n | one | PACKE | PULLED | _ | |
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| | | | | | | | | | | (| CLARK | SBURG | OFFICE E | NTRIES | - |
| · | | | | | | | | - | Rep | air Card | 1 | 10,0 | g. N. | 2/5/ | 153 |
| | | | - | | | | | | Wel | ll Card | V | | // | | " |
| | | | | | | | | | Mer | no Book | | | | | |
| | | | | | | | - | | Wa | II Map | | | | | |
| Comments of the comment of the comme | Total Depth | | | 313 | | | | | | Sheets | | | | | |
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| Date of | Test | or Open I low | Reading | | iquid Used | Openin | g . | CUBIC F | EET | _ | | Sands Ga | • From | | Blown |
| Oct. 27, | 1952 V | r | 44/10 |) h | ater | 3/4 | - | 28,006 | 77 | G | ordo | n & F | ourth | | 6 Hrs |
| | | | | | | | | | | | | | | | |
| | | | | | A | VOLUM | | | | | | | | | |
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| | | or Open Flow | Reading | | iquid Used | Openin | | | | 1- | | | | | Blown |
| Jan. 14, | 1953 | r.M. | 25/10 |) M | Vater | 3/4 | - | 21.18 | wer. | G | ordo | n & F | ourth | | 6 Hrs |
| | | | 1 | | | | 1 | | | - | | | | | |
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| , | | | | | 2.0 | MILIA | | doors I | *************************************** | | | | | | |
| | | | | | | PRESSUE | ET | EST | | | | | | | |
| Date of Test | Opening | 1 Min. | 2 Min. | 3 Min. | 4 Min. | 5 Min. | 6 Mi | 1 | 8 Min | n. 91 | Min. | 10 Min. | 9/15/2 30 Min. | 023 60 Min | . Hre. Ro |
| - | "Casing | | | | | | | | | | | | | | |
| 1-14-53 | 3 "Tubing | 0 | 1 | 1 | 2 | 2 | 3 | 3 | 4 | | 4 | 5 | 12 | 22 | 24 8 |
| | 5" Casin | | | abou | | | | | | at a | | | | | |
| | et. Whi | | | | | | | | | | | | | | |
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| ONIC | GINAL- | I UI L | and D | cht. | | (Over) | | | | | | | J | District Sur | perintendent |

(Cont'd.)

on top of a 4" bit previously lost. Moved in Spudder and cleaned out hole to 3143', to the bailer and bit, which were left in hole, and filled hole back solid to 3159 feet. Han 3139 feet, steel line measure, of $3\frac{1}{2}$ " tubing, on a 5-3/16" x 3" Parmaco special Gas anchor Packer, set at 3064' - 7" - 75 74' - 5" off bottom, present total depth of 3139'. This 3" tubing is part V thread, and part Hound thread. There are depth of 3139' and 11½ V thread tubing on the bottom of the string; and 21 joints, or 458' - 8", of 11½ V thread tubing on the bottom of the string; and 91 joints, or 2693' - 11" of 10 round thread tubing above it. 42' - 1" of 3" Perforation, V thread, is at bottom of hole.

0-1



FEB 2 7 1979

FERC 121 - 299b -

| 1.0 API well number | | , | | | |
|---|--------------|---------------------------------------|---|---|----------------------------------|
| (II not available, lawy blank, Espain | | 4 | 7- 103 | - 0708 | |
| 2.0 Type of determination being sought (Use the codes found on the front of this form.) | IVIIINE | | OB OI NGPA | | |
| 3.0 Depth of the repest completion location. (Only needed if sections 10: or 107 in 2.0 above.) | | Section | of NGPA | Category (| 20de |
| 4.0 Name, address and code number of applicant. (35 letters per line maximum. If code number no available, leave blank.) | Stree Cla | nsolidated 5 West Main arksburg | | y Corporation W. Va. 2630 | Seller Code |
| 5.0 Location of this well. (Complete (a) or (b) ! (a) For onshore wells (35 letters maximum for field name) | Ve Freid | est Virginia | a Other | A-85772 W. V | a. |
| (b) For OCS wells | 1 00011 | Y | | State | |
| | Ares N | Date of (| Lease | Block Num | Der |
| | | Mo Day | 141 | OCS Lease Number | |
| (c) Name and identification number of this well. (35 letters and digits maximum.) | A | PAH LON | G | 4796 | |
| (d) If code 4 or 5 in 2.0 above name of the reservoir (35 letters maximum) | | | | | |
| .0 (a) Name and code number of the purchaser. (35 letters and digits maximum. If code number not available, leave blank (| Gen | eral System | n Purchase | rs | |
| (b) Date of the contract | | | Mo Da | | Buye Cco- |
| (c) Estimated annual production | | | 5 | MMc1 | ALL TAX TOWNS AND THE MARKET |
| | | (S/MMBTU) | (b) Tax | (c) All Other Prices [Indicate (+) or (-).] | (d) Tora- o (a), (b) and (a), |
| Contract price (As of filing date Complete to 3 pecimal places) | | | | (4,0,14,1) | |
| Meximum lawful rate (As of filing date. Complete to 3 Secimal places) | | 2.224 | *************************************** | | |
| Agency Use Only Received by Juris: Agency B 2 7 1979 Received by FERC | J. W. | Hendricksp | Mucho | | s Supply |
| | Dete Applic | 31-78 | , 3 | 04-623-3611 Phone Number | |

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. If there are any questions, call (202) 275-4539.

Specific Instructions for Item 2.0, Type of Determination

| Section of NGPA | Category Code | Description |
|-----------------|---------------|---|
| 102 | | 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.

refer de Section 108. Thupper well W. V. Department of Miner, Oil & Gas Division WELL DETERMINATION FILE NUMBER 790227 -108-103-0708 Use Above File Number on all Communications Relating to Determination of this Well OR EACH TIEM AS CONFLETE OR NOTE WHAT IS MISSING TIEN NO. Coly 15 Was Oil Produced? TV-48- Application for Certification. Complete? IV Form #51 - 52 - 53 - 54 - 55 - 66 - 57 - 58. Complete_ 30 - 17 _Geological Charts_ 78 - 78 Well Tabulations Cleaned out: Date: 10-27-52; 1-14-53 Despend 3/39 (from 603-011 Ratio Test) (5) (5) GORDONY FOURTh 21.180 MCF (after cleaning out) (5) 80-24 hrs. (after cleaning out) (5) (5) (5) (7) Ave. Taily Cas from 90-day ending a/1-120 days (3) (3) Oil Production: 10 From Completion Report (5). Items lease inventory indicate enhanced recovery being done: Mo (10-17)la efficarit aigned! (10-17)Items official well record with the Reparement confirm the submitted bes compiler progress confirmi Additional Information rates Cijaard tel

STATE OF WEST VIRGINIA

DEPARTMENT OF MINES, OIL AND GAS DIVISION

| Date 12-31 1978 |
|--|
| Operator's 4796 |
| API Well No. 47 - 103 - 2708 State County 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. | |
| ADDRESS 445 West Main Street | Watershed WILLEY FORK |
| Clarksburg, W. Va. | Dist. GRANT County WETZEL Quad |
| GAS PURCHASER None; gas is de- | Gas Purchase Contract No. N/A |
| ADDRESS <u>livered into applicant</u> '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:

Same and the

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 |
| My term of office expires on the 13th day of September , 19 86. Notary Public 09/15/2023 |
| (NOTORIAL SEAL) |

| | | | 2 | | | | | | | | | | | |
|--|---|--|---------------------|---------------------|----------------------------|--|--|-------------------------------------|-------------------------|---------------------|--|--|---|---|
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