



DEPARTMENT OF ENERGY

Reclamation Fund

Donned 9/8/89 Eypures 9/8/91 Page__of_

FORM	WW-2B
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Fee(s) paid:

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

1)	Well Op	erator:_	Dis	OIL AN	ID GAS	13725 (4) 531
2)	Operato	r's Well	Number:_	NEALE IS	SLAND #4	3) El	evation: 60/
4)			0i1 <u></u> X		s <u>X</u> /		
	·	(b)	If Gas:	Productio Dee	n /	round Storag Shallo	e/ w <i>X</i> /
5)	Propose	d Target	Formation		919 NOON JA		
6)	Propose	d Total D	epth:	2300	feet		
7)	Approxi	mate fres	h water s	trata dep	ths:	80	•
8)	Approxi	mate salt	water de	pths:		600	
9)	Approxi	mate coal	seam dep	ths:	N	A	
10)	Does la	nd contai	n coal se	ams tribu	taxy to act	ive mine? Ye	es/ No/
		d Well Wo	rk:	Cell 51	terpulat	- NewW	ell =
12)			•				
			CASIN	G AND TUB	ING PROGRAM		
TYPE	0/18/87	<u>s</u>	PECIFICAT	IONS	FOOTAGE II	TERVALS	CEMENT
MIL	o.K.	Size	Grade	Weight per ft.	For drilling	Left in well	Fill-up (cu. ft.)
Condu	ctor	1034"	H-40	42	85'	85	to surface
Fresh	Water					80	C380818-11.3
Coal		-				7	38CSP18-11-22
Inter	mediate	7.		17	330 '	3301	tosurface
Produc	ction	4/2"	1.55	9.5		2300	110 SKS
<u> rubin</u>	<u> </u>						38CSRB-11.1
Liners	5				·	: <u>,</u> -	CENTRE
PACKERS: Kind							
Depths set AUG 22 1989							
For Divison of Oil and Gas Use Only DEPARTMENT OF ENERGY							

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DIVISION OF OIL & GAS DEPARTMENT OF ENERGY

1)	Date: Avayst 14.1989	
2)	Operator's well number	
	NEW E ISLAND #4	

3) API Well No: 47 - 107 - 1450
State - County - Permit

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

NOTICE AND APPLICATION FOR A WELL WORK PERMIT

4)	Surface Owner(s) to be served:	5) (a) Coal Operator:
- /	(a) Name SHERMAN DILS III	Name
	Address 1601 - 137 STREET	Address
	PARKERSRUKG WY 26/01	
	(b) Name	(b) Coal Owner(s) with Declaration
	Address	Name
		Address
	(c) Name	
	Address	Name
		Address
6)	Inspector GLEN KOBINSON	(c) Coal Lessee with Declaration
•	Address Rt 1: + 6 Me PIFASANES Es	
	MINERAL WIDLE WV 2619	Address
	Telephone (304)- 489-9162	, 112 2 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2
	TO THE PERSON(S) NAMED AB	OVE TAKE NOTICE THAT:
Section I have	Included is the lease or leases or racts by which I hold the right to Included is the information requirion 8(d) of the Code of West Virgin I certify that as required under Code served copies of this notice and mpanying documents pages 1 through Personal Service (Affidavit a Certified Mail (Postmarked po Publication (Notice of Public	extract oil and gas <u>OR</u> ed by Chapter 22B, Article 1, ia (see page 2) hapter 22B of the <u>West Virginia Code</u> application, a location plat, and on the above named parties,by: ttached) stal receipt attached)
	I have read and understand Chapter	·
famil attac respo	ne terms and conditions of any perm I certify under penalty of law tha liar with the information submitted	it issued under this application. t I have personally examined and am on this application form and all ry of those individuals immediately
	I am aware that there are signific	ant penalties for submitting false
infor	mation, including the possibility	
	Well Operator	Dus On AND GAS
	By: Mun	un D. X N
	Its. P)w	ner
	Address	1601 - 13TH STREET
		PARKERSAVEL WV 26101
	Telephone	485-6401
Subsc	cribed and sworn before me this 18	
	11/.0.	
My Co	ommission expires Mora	Notary Public
my CC	Numitagion expites Morve	W 17, 1775