



west virginia department of environmental protection

Office of Oil and Gas
601 57th Street SE
Charleston, WV 25304
(304) 926-0450
(304) 926-0452 fax

Earl Ray Tomblin, Governor
Randy C. Huffman, Cabinet Secretary
www.dep.wv.gov

June 11, 2015

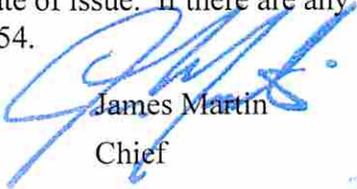
WELL WORK PLUGGING PERMIT

Plugging

This permit, API Well Number: 47-8504003, issued to EQT PRODUCTION COMPANY, is evidence of permission granted to perform the specified well work at the location described on the attached pages and located on the attached plat, subject to the provisions of Chapter 22 of the West Virginia Code of 1931, as amended, and all rules and regulations promulgated thereunder, and to all conditions and provisions outlined in the pages attached hereto. Notification shall be given by the operator to the Oil and Gas Inspector at least 24 hours prior to the construction of roads, locations, and/or pits for any permitted work. In addition, the well operator shall notify the same inspector 24 hours before any actual well work is commenced and prior to running and cementing casing. Spills or emergency discharges must be promptly reported by the operator to 1-800-642-3074 and to the Oil and Gas inspector.

Upon completion of the plugging well work, the above named operator will reclaim the site according to the provisions of WV Code 22-6-30. The above named operator will also file, as required in WV Code 22-6-23, an affidavit on form WR-38 by two experienced persons in the operator's employment and the Oil and Gas inspector that the work authorized under this permit was performed and a description given. Failure to abide by all statutory and regulatory provisions governing all duties and operations here under may result in suspensions or revocation of this permit and in addition may result in civil and/or criminal penalties being imposed upon the operator.

This permit will expire in two (2) years from date of issue. If there are any questions, please free to contact me at (304) 926-0499 ext. 1654.


James Martin
Chief

Operator's Well No: 4942
Farm Name: BRITTON
API Well Number: 47-8504003
Permit Type: Plugging
Date Issued: 06/11/2015

Promoting a healthy environment.

PERMIT CONDITIONS

West Virginia Code §22-6-11 allows the Office of Oil and Gas to place specific conditions upon this permit. Permit conditions have the same effect as law. Failure to adhere to the specified permit conditions may result in enforcement action.

CONDITIONS

1. All pits must be lined with a minimum of 20 mil thickness synthetic liner.
2. In the event of an accident or explosion causing loss of life or serious personal injury in or about the well or while working on the well, the well operator or its contractor shall give notice, stating the particulars of the accident or explosion, to the oil and gas inspector and the Chief within twenty-four (24) hours.
3. Well work activities shall not constitute a hazard to the safety of persons.
4. This well is under a consent order and must be plugged under the terms of that agreement.

1) Date: April 6, 2015
2) Operator's Well Number
604942 (E. Britton #4942)
3) API Well No.: 47 085 - 04003 P
State County Permit

STATE OF WEST VIRGINIA - BUREAU OF ENVIRONMENT
DIVISION OF ENVIRONMENTAL PROTECTION, OFFICE OF OIL & GAS
NOTICE AND APPLICATION TO PLUG AND ABANDON WELL

4) Surface Owner(s) to be served:
(a) Name John L. and Karen J. Sampson
Address Rt. 1, Box 136
West Union, WV 26415

(b) Name _____
Address _____

(c) Name _____
Address _____

6) Inspector David Cowan
Address 1597 Devil Hole Road
Harrisville, WV 26362-7543
Telephone (304) 389-3509

5) (a) Coal Operator:
Name None
Address _____

(b) Coal Owner(s) with Declaration
Name Connie G. Shaw
108 Currey Rice Court
Address Deland, FL 32724-8820

Name See Attachment
Address _____

(c) Coal Lessee with Declaration
Name None
Address _____

TO THE PERSONS NAMED ABOVE: You should have received this Form and the following documents:

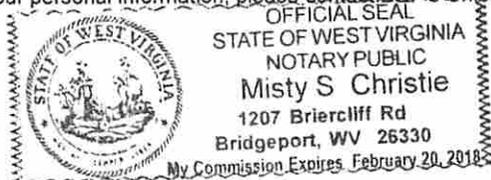
- (1) The application to Plug and Abandon a Well on Form WW-4B, which sets out the parties involved in the work and describes the well its and the plugging work order; and
 - (2) The plat (surveyor's map) showing the well location on Form WW-6.
- The reason you received these documents is that you have rights regarding the application which are summarized in the instructions on the reverses side. However, you are not required to take any action at all.

Take notice that under Chapter 22-6 of the West Virginia Code, the undersigned well operator proposes to file or has filed this Notice and Application and accompanying documents for a permit to plug and abandon a well with the Chief of the Office of Oil and Gas, West Virginia Division of Environmental Protection, with respect to the well at the location described on the attached Application and depicted on the attached Form WW-6. Copies of this Notice, the Application, and the plat have been mailed by registered or certified mail or delivered by hand to the person(s) named above (or by publication in certain circumstances) on or before the day of mailing or delivery to the Chief.

Well Operator: EQT Production Company
By: Victoria J. Roark
Its: Permitting Supervisor
Address: PO Box 280
Bridgeport, WV 26330
Telephone: (304) 848-0076

Subscribed and sworn before me this 6th day of April, 2015
Misty S. Christie Notary Public
My Commission Expires: 2/20/18

The Office of Oil & Gas processes your personal information, such as name, address and phone number, as part of our regulatory duties. Your personal information may be disclosed to other State agencies or third parties in the normal course of business or as needed to comply with statutory or regulatory requirements, including Freedom of Information Act requests. Our office will appropriately secure your personal information. If you have any questions about our use of your personal information, please contact DEP's Chief Privacy Officer at depprivacyofficer@wv.gov.



Received
Office of Oil & Gas
April 8, 2015

WW4-A

85-4003P

Additional Coal Owners

Adam Minerals, LLC
360 Circle Drive
Mt. Clare, WV 26408-6806

EQT Production Company
EQT Plaza
625 Liberty Avenue
Suite 1700
Pittsburgh, PA 15222

Adelene Spiker
2095 Sycamore Lick Road
Jane Lew, WV 26378-8102

Charles Evans Maxson
122 Sistersville Pike
West Union, WV 26456-1050

Delores J. Pinion Administrator
Estate of Mildred Ross
302 Lincoln Street
Clarksburg, WV 26301-3032

Ernestine Britton
141 Harrison St., Apt. 4
Clarksburg, WV 26301-3165

Judith P. See
17543 McIntosh Road
Wellsville, OH 43968-9777

Margaret E. McWilliams
Route 2, Box 255-A
Mt. Clare, WV 26408-9734

South Fork Baptist Church
Cemetery Fund Agent
c/o Edra Grimm Treasurer
Route 1, Box 169
West Union, WV 26456-9718

Wilma D. Ratliff
10708 Wadesville Road
Rockport, WV 26169-8108

Janice M. Britton Trustee
QTIP Marital Trust U/A Dated 6/1/2000
12 Dogwood Drive
Washington, PA 15301-1578

4708504003

Received
Office of Oil & Gas
APR 08 2015

Print your name and address on the back so that we can return the card to you.
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Connie Shaw
 108 Currey Rice Court
 Deland, FL 32724-8820

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label)

7014 0150 0001 0654 8846

PS Form 3811, July 2013

Domestic Return Receipt

V 26330
 4708504003

85-4003P

PS Form 3800, August 2008 See Reverse for Instructions

Sent To: Connie Shaw
 Street, Apt. No., or PO Box No.: 108 Currey Rice Court
 City, State, ZIP+4: Deland, FL 32724

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Postmark: VR

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04/06/2015
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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

EQT Production Company
 EQT Plaza
 625 Liberty Avenue, Suite 1700
 Pittsburgh, PA 15222
 #604942 Plugging Permit

X

Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

4708504003

2. Article Number (Transfer from service label) 7014 0150 0001 0654 8327

PS Form 3811, July 2013 Domestic Return Receipt

85-4003

PS Form 3800, August 2006 See Reverse for Instructions

#604942 Plugging Permit

City or PO Street Sent

Pittsburgh, PA 15222 EQT Plaza

625 Liberty Avenue, Suite 1700 EQT Production Company

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

Postmark Here

#604942 Plugging Permit

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V 26330

rk
V 26330

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Adam Minerals, LLC
360 Circle Drive
Mt. Clare, WV 26408-6806

#604942 Plugging Permit

B. Received by (Printed Name) _____ C. Date of Delivery _____
D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

4708504003

2. Article Number (Transfer from service label) 7014 0150 0001 0654 8310

PS Form 3811, July 2013 Domestic Return Receipt

85-4003P

PS Form 3800, August 2006 See Reverse for Instructions

Total Po Adam Minerals, LLC
Sent to 360 Circle Drive
Street, Apt Mt. Clare, WV 26408-6806
City, State or PO Box #604942 Plugging Permit

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark Here *VC*

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Adelene Spiker
2095 Sycamore Lick Road
Jane Lew, WV 26378-8102

#604942 Plugging Permit

2. Article Number
(Transfer from service label)

7014 0150 0001 0654 8747

PS Form 3811, July 2013

Domestic Return Receipt

A. Signature

X

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

4708504003

3. Service Type

- Certified Mail®
- Registered
- Insured Mail
- Priority Mail Express™
- Return Receipt for Merchandise
- Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

85-4003P

#604942 Plugging Permit

JANE LEW, WV 26378-8102

Form 3800, August 2006
See Reverse for Instructions

#604942 Plugging Permit
WV State, Z
PO Box N
Dist. Apt.
Jane Lew, WV 26378-8102
Adelene Spiker
2095 Sycamore Lick Road
Jane Lew, WV 26378-8102

Postage	\$
Certified Fee	
Return Receipt Fee	
Restricted Delivery Fee	
Postmark Here	

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Charles Evans Maxson
122 Sistersville Pike
West Union, WV 26456-1050

#604942 Plugging Permit

2. Article Number
(Transfer from service label)

7014 0150 0001 0654 8754

PS Form 3811, July 2013

Domestic Return Receipt

X Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

4708504003

20ark
10
WV 26330

85-403P

PS Form 3800, August 2006

#604942 Plugging Permit

Sent To: Charles Evans Maxson
122 Sistersville Pike
West Union, WV 26456-1050

City, State, Zip
or PO Box No

Total Postage	\$
Postage	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

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US POSTAGE
\$07.40

IRK
V 26330

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Delores J. Pinion Administrator
Estate of Mildred Ross
302 Lincoln Street
Clarksburg, WV 26301-3032
#604942 Plugging Permit

B. received by (Printed Name) _____ C. Date of Delivery _____

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

7014 0150 0001 0654 8761

PS Form 3811, July 2013

Domestic Return Receipt

4700504003

85-4003P

Delores J. Pinion Administrator
Estate of Mildred Ross
302 Lincoln Street
Clarksburg, WV 26301-3032
#604942 Plugging Permit

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Certified Fee _____
Return Receipt Fee _____
Restricted Delivery Fee _____

Total Postage _____
Total Postage _____

Delores J. Pinion Administrator
Estate of Mildred Ross
302 Lincoln Street
Clarksburg, WV 26301-3032
#604942 Plugging Permit

City, State, Zip, Apt. or PO Box
Clarksburg, WV 26301-3032
#604942 Plugging Permit

PS Form 3800, August 2006

Received
Office of Oil & Gas
APR 08 2015

ZIP 26330
041110228892

\$07.40

rk
V 26330

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ernestine Britton
141 Harrison St., Apt. 4
Clarksburg, WV 26301-3165

#604942 Plugging Permit

A. Signature Agent Addressee

X

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

4708504003

3. Service Type

Certified Mail® Priority Mail Express™

Registered Return Receipt for Merchandise

Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

7014 0150 0001 0654 8778

PS Form 3811, July 2013

Domestic Return Receipt

85-4003P

#604942 Plugging Permit

PS Form 3811, August 2010

#604942 Plugging Permit

Sent to Ernestine Britton
141 Harrison St., Apt. 4
Clarksburg, WV 26301-3165

City, St. or PO

Street

Postmark Here

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total	

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7014 0150 0001 0654 8778



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Office of
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ZIP 26330
041110228892

- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Judith P. See
17543 McIntosh Road
Wellsville, OH 43968-9777

#604942 Plugging Permit

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

4708504003

3. Service Type

- Certified Mail® Priority Mail Express™
- Registered Return Receipt for Merchandise
- Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

7014 0150 0001 0654 8785

PS Form 3811, July 2013

Domestic Return Receipt

7 26330

85-4003P

PS Form 3811, August 2010
See Reverse for Instructions

#604942 Plugging Permit

City, St.
or PO B
Street,
Wellsville, OH 43968-9777

Sent to
17543 McIntosh Road
Judith P. See

Total	7014 0150 0001 0654 8785
Postage \$	7014 0150 0001 0654 8785
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

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Office of Oil & Gas
APR 08 2015



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041110228892

04/06/2015
US POSTAGE
\$07.40

so that we can return the card to you.
■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Margaret E. McWilliams
Route 2, Box 255-A
Mt. Clare, WV 26408-9734

B. Received by (Printed Name)		C. Date of Delivery	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No			
4708504003			
3. Service Type			
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Priority Mail Express™		
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise		
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Collect on Delivery		
4. Restricted Delivery? (Extra Fee)			<input type="checkbox"/> Yes

2. Article Number
(Transfer from service label)
7014 0150 0001 0654 8792

PS Form 3811, July 2013 Domestic Return Receipt

85-4003P

PS Form 3800, August 2006
See Reverse for Instructions

Sent to	Margaret E. McWilliams
Street Address	Route 2, Box 255-A
City, State or PO Box	Mt. Clare, WV 26408-9734

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage		

Postmark Here

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7014 0150 0001 0654 8792



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APR 08 2015



04/06/2015
U.S. POSTAGE

ZIP 26330
041L10226892

\$07.40

26330

so that we can return the card to you.
■ Attach this card to the back of the mailpiece, or on the front if space permits.

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

4708504003

1. Article Addressed to:

South Fork Baptist Church
Cemetery Fund Agent
c/o Edra Grimm Treasurer
Route 1, Box 169
West Union, WV 26456-9718
#604942 Plugging Permit

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) 7014 0150 0001 0654 8808

PS Form 3811, July 2013 Domestic Return Receipt

PS Form 3800, August 2006 See Reverse for Instructions

#604942 Plugging Permit

City, St. or P.O. E. West Union, WV 26456-9718

Street, Route 1, Box 169

Sent To: c/o Edra Grimm Treasurer
Cemetery Fund Agent
South Fork Baptist Church

Total

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark Here

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#604942 Plugging Permit

83004-58

7014 0150 0001 0654 8808



04/06/2015
US POSTAGE
\$07.40
ZIP 26330
041L10228892
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Office of Oil & Gas
APR 08 2015

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Wilma D. Ratliff
10708 Wadesville Road
Rockport, WV 26169-8108

#604942 Plugging Permit

2. Article Number
(Transfer from service label)

7014 0150 0001 0654 8815

PS Form 3811, July 2013

Domestic Return Receipt

X Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

4708504003

3. Service Type

- Certified Mail® Priority Mail Express™
- Registered Return Receipt for Merchandise
- Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

85-4003P

PS Form 3808, August 2006 See reverse for instructions

#604942 Plugging Permit
City, State or PO Box
Street Address
10708 Wadesville Road
Rockport, WV 26169-8108
Sent To
Wilma D. Ratliff
Total P&H

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Postmark Here

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V 26330

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Office of



04/06/2015
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ZIP 26330
041L10228892

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- Complete items 1, 2, and 3, and also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Janice M. Britton Trustee
 QTIP Marital Trust U/A Dated 6/1/2006
 12 Dogwood Drive
 Washington, PA 15301-1578
 #604942 Plugging Permit

X Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

4708504003

2. Article Number (Transfer from service label) 7014 0150 0001 0654 8822

PS Form 3811, July 2013 Domestic Return Receipt

ark
 V 26330

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Postage \$	0.654
Certified Fee	0.000
Return Receipt Fee (Endorsement Required)	0.000
Restricted Delivery Fee (Endorsement Required)	0.000
Total Postage	0.654

Sent To: Janice M. Britton Trustee
 QTIP Marital Trust U/A Dated 6/1/2006
 12 Dogwood Drive
 Washington, PA 15301-1578
 #604942 Plugging Permit

City, State or PO Box, Street, Apt

Article # 7014 0150 0001 0654 8822

85-4003P



7014 0150 0001 0654 8822

Received
 Office of...



04/06/2015
 US POSTAGE

ZIP 26330
 041L10228892

\$07.40

47 08 50 40 03

David Cowan
1597 Devil Hole Road
Harrisville, WV 26362-7543

~~#604942~~ #604942 Plugging Permit :
~~# 154381~~

neopost

04/06/2015

US POSTAGE

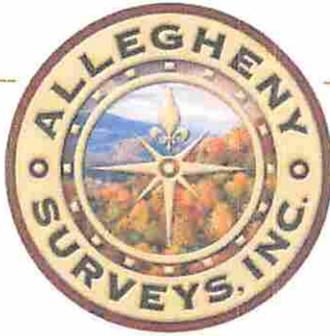
\$02.87

FIRST-CLASS MAIL



ZIP 26330
041110228892

Received
Office of Oil & Gas
APR 08 2015



4708504003

POTENTIAL WATER SAMPLE DATA SHEET

CLIENT: EQT PRODUCTION COMPANY

LEASE NAME AND WELL No. E. Britton #4942 - WV 604942 - API No. 47-085-04003

POTENTIAL SAMPLE LOCATIONS

There appears to be no known water samples within the required 1000 feet of the existing well WV 604942.

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Office of Oil & Gas

BIRCH RIVER OFFICE
237 Birch River Road
Birch River, WV 26610
phone: 304-649-8606
fax: 304-649-8608

BRIDGEPORT OFFICE
172 Thompson Drive
Bridgeport, WV 26330
phone: 304-848-5035
fax: 304-848-5037

CALDWELL OFFICE
212 Cumberland Street
Caldwell, OH 43724
phone: 740-305-5007
fax: 740-305-5126

ALUM CREEK OFFICE
PO Box 108 • 1413 Childress Rd
Alum Creek, WV 25003
phone: 304-756-2949
fax: 304-756-2948

RANSON OFFICE
4000 E. Main Blvd., Suite 3
Ranson, WV 25438
phone: 304-724-5008
fax: 304-724-5010

4708504003

Topo Quad: Oxford 7.5'

Scale: 1" = 2000'

County: Ritchie

Date: March 23, 2015

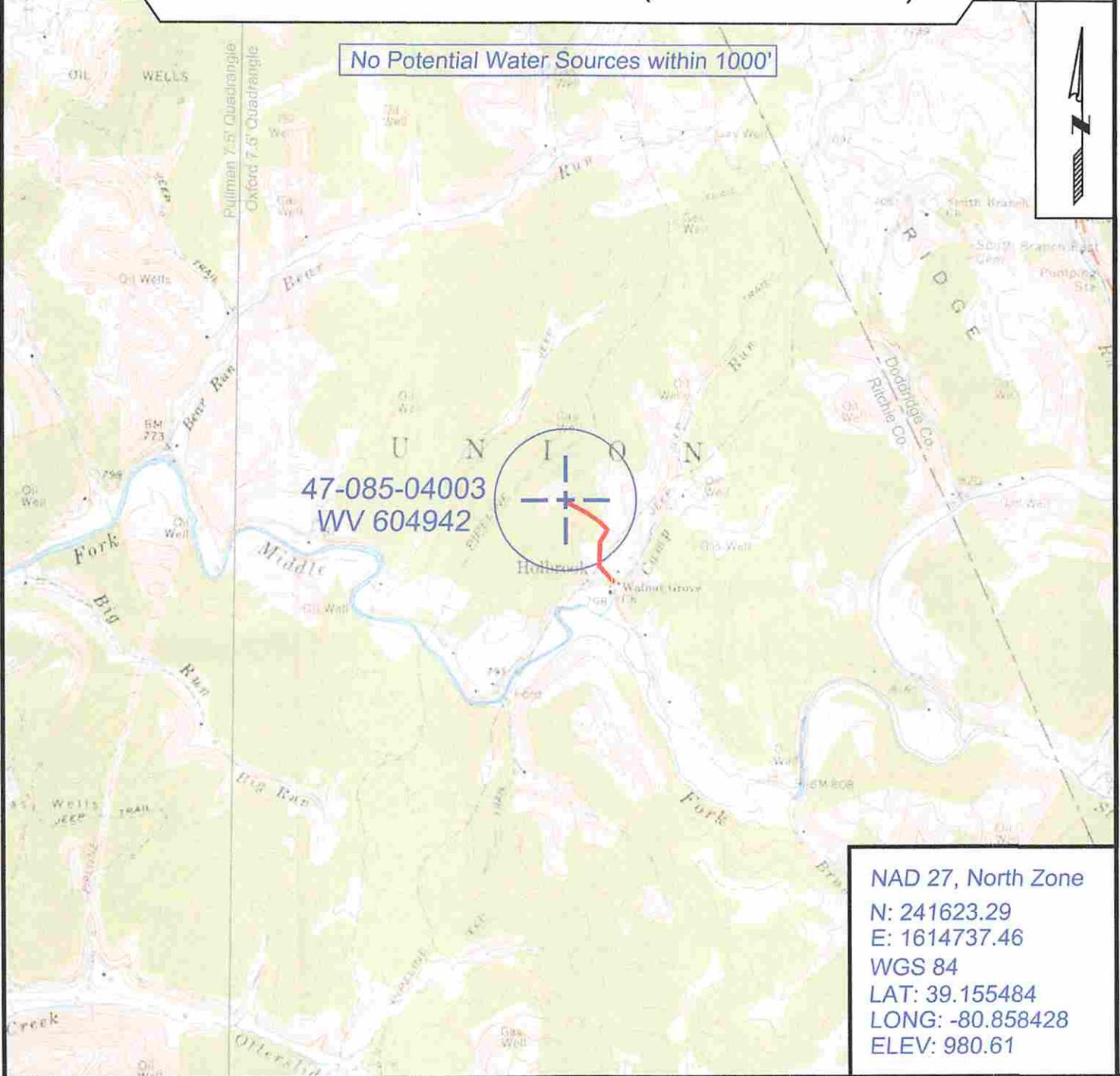
District: Union

Project No: 68-38-00-08

Water

47-085-04003 WV 604942 (E. Britton #4942)

No Potential Water Sources within 1000'



47-085-04003
WV 604942

NAD 27, North Zone
 N: 241623.29
 E: 1614737.46
 WGS 84
 LAT: 39.155484
 LONG: -80.858428
 ELEV: 980.61



SURVEYING AND MAPPING SERVICES PERFORMED BY:

ALLEGHENY SURVEYS, INC.

1-800-482-8606
 237 Birch River Road
 Birch River, WV 26610
 PH: (304) 649-8606
 FAX: (304) 649-8608

PREPARED FOR:

EQT Production Company

P.O. Box 280
 Bridgeport, WV 26330

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CK# 19261
300.00
for #11(3)

Date: April 8 2015 **4708504003**
Operator's Well _____
Well No. 604942 (E. Britton #4942)
API Well No.: 47 085 - 04003 P

STATE OF WEST VIRGINIA
DIVISION OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS

APPLICATION FOR A PERMIT TO PLUG AND ABANDON

4) Well Type: Oil _____ Gas X Liquid Injection _____ Waste Disposal: _____
If Gas, Production _____ X Or Underground storage _____ Deep _____ Shallow X

5) Elevation: 981 ft Watershed: Middle Fork of Hughes River
Location: Union County: Ritchie Quadrangle: Oxford
District: _____

6) Well Operator EQT Production Company
120 Professional Place
Address: Bridgeport, WV 26330

7) Designated Agent: Rex C. Ray
Address: 120 Professional Place
Bridgeport, WV 26330

8) Oil & Gas David Cowan
Name: 1597 Devil Hole Road
Address: Harrisville, WV 26362-7543

9) Plugging Contractor:
Name: HydroCarbon Well Service
Address: PO BOX 995
Buckhannon, WV 26201

10) Work Order: The work order for the manner of plugging this well is as follows:
See Attachment for details and procedures.

OFFICE USE ONLY

Notification must be given to the district oil and gas inspector 24 hours before permitted work can commence.

Work order approved by inspector David Cowan by Gene Smith Phone Date 6/10/15

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APR 08 2015

4708504003

PLUGGING PROGNOSIS - Weston

Britton, E. #4942 (604942)

Ritchie Co., WV

API # 47-085-04003 P

Quad: Union

BY: Craig Duckworth

DATE: 2/10/15

CURRENT STATUS:

10" csg @ 340'
8 1/4" csg @ 880'
6 5/8" csg @ 1791'

TD @ 1940

Fresh Water @ 170' Salt Water @ None reported
1st Salt Sand @ 1315' Coal @ None reported
Gas Shows @ Slate 1896'-1905'; Big Injun @ 1880'-1883'; Sand @ 1625'
Oil Shows @ None reported
Stimulation: None reported
Elevation: 953'

1. Notify State Inspector, David Cowan 304-389-3509, 24 hrs. Prior to commencing operations.
2. TIH w/ tbg @ 1940'; Set 200' C1A Cement Plug @ 1940' to 1740' (Slate @ 1896'-1905'; Big Injun @ 1880'-1883' & 6 5/8" @ 1791')
3. Set a 100' C1A Cement Plug 50' In/Out of cut. Perf all FW, Coal, Oil and Gas shows below casing cuts. Do not omit any plugs
4. TOOH w/tbg Freepoint 6 5/8" Cut 6 5/8" @ freepoint TOOH with 6 5/8"
5. TIH w/ tbg @ 1740'; gel hole @ 1740' to 1625'
6. TOOH w/ tbg @ 1625'; Set 100' C1A Cement Plug @ 1625' to 1525' (Sand @ 1625')
7. TOOH w/ tbg @ 1525'; gel hole @ 1525' to 1315'
8. TOOH w/ tbg @ 1315'; Set 100' C1A Cement Plug @ 1315' to 1215' (Salt Sand @ 1315')
9. TOOH w/ tbg @ 1215'; gel hole @ 1215' to 953'
10. TOOH w/ tbg @ 953' ; Set 123' C1A Cement Plug @ 953' to 830 (8 1/4" csg @ 880' & elev. @ 953')
11. Set a 100' C1A Cement Plug 50' In/Out of cut. Perf all FW, Coal, Oil and Gas shows below casing cuts. Do not omit any plugs
- ~~12. TOOH w/ tbg @ 1079' ; Set 100' C1A Cement Plug @ 1079' to 947 (8 1/4" csg @ 997' & elev. @ 1079')~~
13. TOOH w/ tbg @ 830'; gel hole @ 830' to 390'
14. TOOH w/ tbg @ 390'; Set 390' C1A Cement Plug @ 390' to 0 (Surface & 10" csg @ 340')
15. Set a 100' C1A Cement Plug 50' In/Out of cut. Perf all FW, Coal, Oil and Gas shows below casing cuts. Do not omit any plugs
16. Top off as needed
17. Set Monument to WV-DEP Specifications
18. Reclaim Location & Road to WV-DEP Specifications

Attempt to pull 10" casing
IF UNABLE PERF ← 10" casing.

GCS
6/10/15

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Office of Oil & Gas
APR 08 2015



604942

4708504003

STATE OF WEST VIRGINIA
DEPARTMENT OF MINES
OIL AND GAS DIVISION

WELL RECORD

Permit No. D 35-04003

Oil or Gas Well "GAS"

Company Pittsburgh & West Va. Gas Company.
 Address Clarksburg, West Va.,
 Farm Elizabeth Britton Acres _____
 Location (waters) Holbrook N/E. 3-1-3
 Well No. 4942 Elev. 953'
 District Union County Ritchie
 The surface of tract is owned in fee by _____
 Address _____
 Mineral rights are owned by _____
 Address _____
 Drilling commenced December 16, 1926
 Drilling completed January 28, 1927
 Date Shot _____ From _____ To _____
 With _____
 Open Flow _____ /10ths Water in _____ Inch
 _____ /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			Kind of Packer
16.			
13.			
10.	340'	340'	Size of
8 3/4	880'	880'	
6 3/4	1791'	1791'	Depth set
5 3/16			
3			Perf. top
2			Perf. bottom
Liners Used			Perf. top
			Perf. bottom

CASING CEMENTED _____ SIZE _____ No. Ft. _____ Date _____

COAL WAS ENCOUNTERED AT _____ FEET _____ INCHES

_____ FEET _____ INCHES _____ FEET _____ INCHES

_____ FEET _____ INCHES _____ FEET _____ INCHES

Formation	Color	Hard or Soft	Top	Bottom	Oil Gas or Water	Depth Found	Remarks
Lay		Soft	0	15			
ime			15	45			
ed Rock		Soft	45	60			
ime		Hard	60	120			
ed Rock	Red	Soft	120	160			
and			160	185	Water	170'	
ed Rock	Red	Soft	185	250			
ime			250	310			
and	White		310	330			
Slate	Dark	Soft	330	350			
ed Rock	Red	"	350	390			
ime & Slate			390	495			
ed Rock	Red	Soft	495	600			
ime & Slate			600	795			
ed Rock	Red	Soft	795	810			
ime		Hard	810	840			
ime & Slate			840	970			
Slate&Shells			970	1227			
Lime	White	Hard	1227	1240			
Slate&Shells			1240	1315			
1st Salt Sand	White	Hard	1315	1355			
Slate&Shells			1355	1465			
Lime	Dark	Hard	1465	1480			
Slate&Shells			1480	1505			
2nd Salt Sand		Hard	1505	1535			
Slate&Shells			1535	1625			
Sand			1625	1630	Sh. Gas	1625'	
Slate			1630	1649			
Lime	Dark	Hard	1649	1668			
Slate-Shell		Soft	1668	1681			
Lime-Gritty	White	Hard	1681	1735			
Slate	Black	Soft	1735	1740			
Lime	Dark	Hard	1740	1757			
Slate			1757	1764			
Little Lime		Hard	1764	1774			
Pencil Cave	Dark	Soft	1774	1781			
Big Lime	White	Hard	1781	1860			
Big Injun	"	"	1860	1913	Gas	1880-1883'	
Slate&Shell			1913	1940	Gas	1896-1905'	
Total Depth				1940			

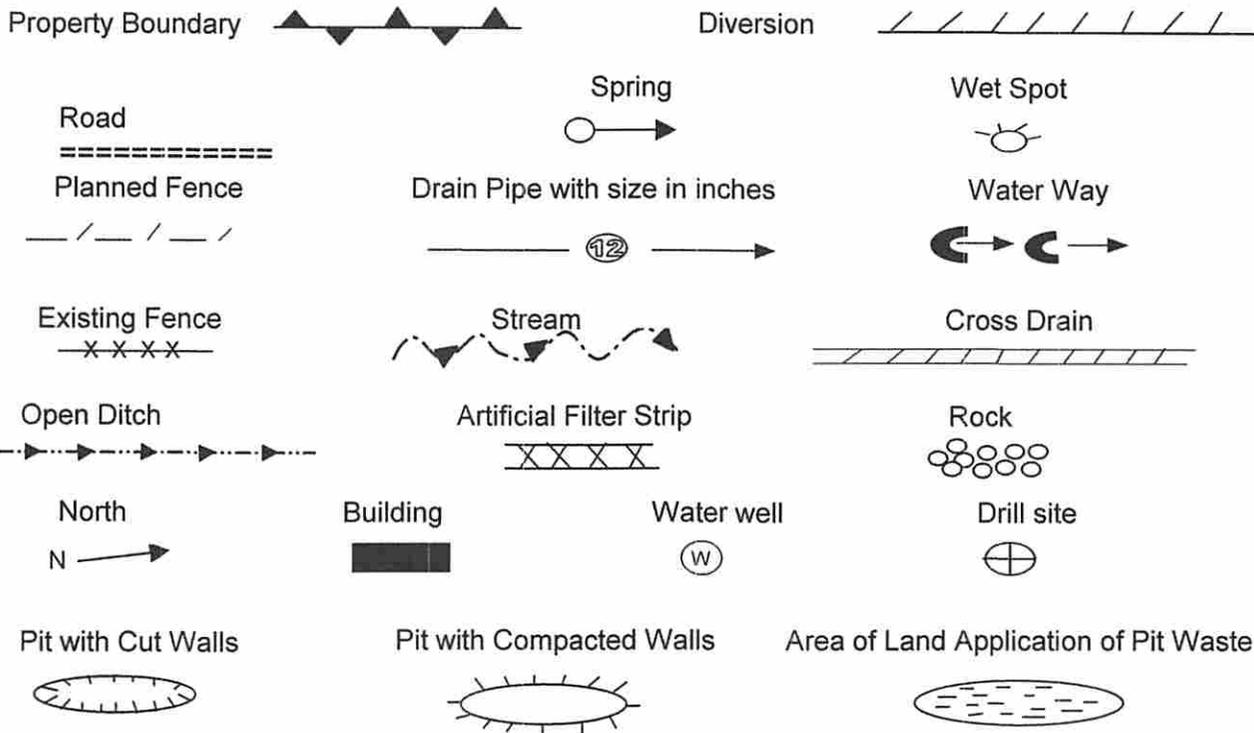
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85-4003P

4708504003
OPERATOR'S WELL NO.:
604942 (E. Britton #4942)

LEGEND



Proposed Revegetation Treatment: Acres Disturbed: 1± Prevegetation pH _____

Lime 3 Tons/acre or to correct to pH 6.5

Fertilizer (10-20-20) or equivalent 1/3 ton lbs/acre (500 lbs minimum)

Mulch 2 Tons/acre or hydroseed.

SEED MIXTURES

Area I		Area II	
Seed Type	lbs/acre	Seed Type	lbs/acre
Red Fescue	40	Red Fescue	15
Alsike Clover	5	Alsike Clover	5
Annual Rye	15		

ATTACH:

Drawing(s) of road, location, pit and proposed area for land application.

Photocopies section of involved 7.5' topographic sheet.

Plan approved by: Dave Cowan by Gene Smith (phone)

Comments: _____

Title: inspection
Field Reviewed? Yes No

Date: 6/10/15

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Office of Oil & Gas

APR 08 2015

47 08 50 40 03

Topo Quad: Oxford 7.5'

Scale: 1" = 2000'

County: Ritchie

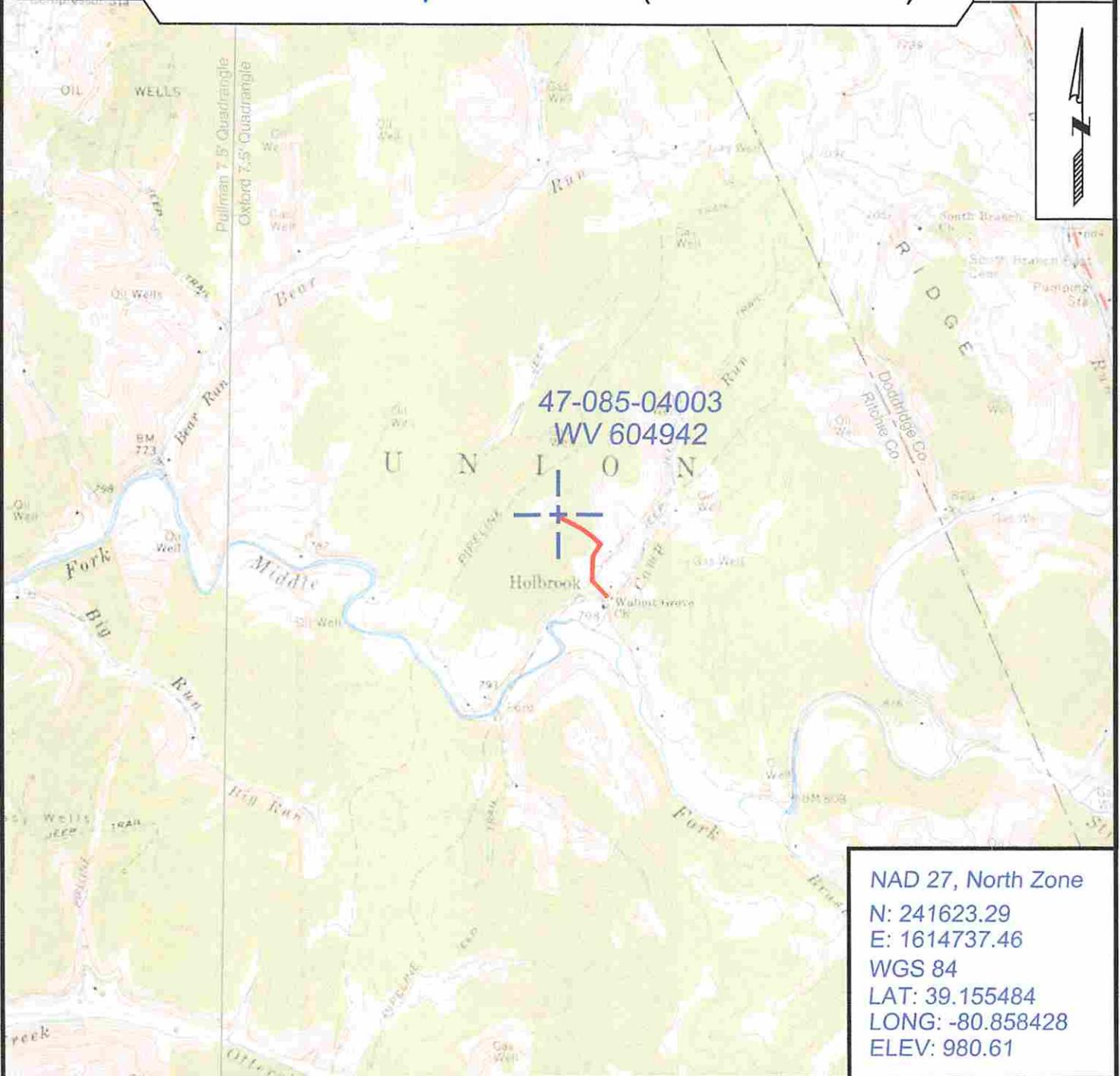
Date: March 23, 2015

District: Union

Project No: 68-38-00-08

47-085-04003 **P** WV 604942 (E. Britton #4942)

Topo



47-085-04003
WV 604942

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PREPARED FOR:

Received
EQT Production Company & Gas
 Office of Oil & Gas
 P.O. Box 280
 Bridgeport, WV 26330
 APR 08 2015

I

Operator: EQT PRODUCTION COMPANY
API: 8504003
WELL No: 4942
Reviewed by: GCS Date: 6/10/15
15 Day End of Comment: 04/13/15

Well is on an Agreed Order

CHECKLIST FOR FILING A PERMIT

Plugging

CK# 19261
\$100

- WW-4B
- * Inspector signature on WW-4B
- Completion / Well Records of Previous Work
- WW-4A (Notarized)
- Certified Mail Receipts, Waivers, or Affidavits of Personal Service
- Surface Owner Waiver
- Coal Owner / Lessee / Operator Waiver
- WW-9 (Page 1) (Notarized)
- * Inspector Signature on WW-9 (Optional)
- Topographic Map of location of well
- WW-7

OR

- Mylar Plat (Surface owner on plat matches WW-4A)
- Bond
- Company is Registered with the SOS
- Worker's Compensation / Unemployment Insurance account is OK
- \$100.00 check (\$0.00 if no pit)