

DIVISION OF OIL AND GAS
ATTN: SURETY SECTION
FOUNTAIN SQUARE
COLUMBUS, OHIO 43224
FORM 56: REVISED 12-10-80

RECEIVED

OCT 01 1984
RESTORATION REPORT
DIVISION OF OIL AND GAS
REGION A

34 0932 L L 85 ** 14

permit no.

SPUD/PLUGGING DATE 12-14-82

☒ Preliminary-well exists

☐ FINAL - well plugged

OWNER Dome Producing WELL NO. 4 LEASE NAME BARTER
COUNTY Lorain TOWNSHIP COLUMBIA SEC/LOT 19 LANDOWNER
(if not same as lease name)

- | | |
|--|--|
| 1) Copy of Restoration Plan, Div. Form 4, used in inspection | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |
| 2) Pits filled as required | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 3) Location restored as required (graded or terraced) | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 4) Drilling equipment removed | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 5) Production equipment removed | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 6) Debris removed | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 7) Area seeded or sodded | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 8) Roadways restored | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |
| 9) Landowner Waiver, Div. Form 5, filed (copy attached) | YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |
| 10) Restoration Plan, Form 4, found accurate and correct
(see reverse side for filing guidance) | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> |

REMARKS:

(TO BE SUBMITTED WITH INSPECTOR'S ACTIVITY REPORTS AFTER AREA IS IN COMPLIANCE WITH CHAPTER 150)
NOTIFICATION RECEIVED: YES ☐ NO ☒

FOR DIVISION USE ONLY

Bond on file ☐ OTHER ☐

Bonding Company ☐ Cancelled ☐

Bond No. ☐

LIABILITY CANCELLED ☐ date ☐

signature

SIGNATURE AND TITLE

9-27-84

DATE SIGNED

OHIO DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL AND GAS, FOUNTAIN SQ. BLDG. A, COLUMBUS, OH 43224

copy to UDC ✓

Form 8: Revised 06/01/81

1. Owner: <u>MST</u>		2. Owner name, address & telephone numbers: DOME PRODUCING 1505 OHIO SAVINGS PLAZA CLEVELAND OH 214-589-0065 44114		This report is due in duplicate 30 days after completion of the well. If the permit has expired and the well was not drilled, <input type="checkbox"/> check here, sign on reverse side, and return to our office within 30 days after expiration.	
4. Type of permit: Oil & Gas		5. County: <u>LODAIN</u>		3. API #: <u>34 093 2 1185</u>	
7. Type of well: Drill New Well		6. Civil Township: <u>COLUMBIA</u>		8. Footage: 1300' SL & 500' EL OF LOT 19	
9. X: <u>2,167,500</u> : <u>609,950</u>		21. Date drilling commenced: <u>12-14-82</u>		22. Date drilling completed: <u>12-17-82</u>	
10. Quad: <u>WEST VIEW</u>		23. Date put into production:		24. Date plugged if dry:	
11. Section: <u>12. Lot: 19</u>		25. Producing formation: <u>CLINTON</u>		26. Deepest formation: <u>MEDINA</u>	
13. Fraction:		27. Driller's total depth: <u>2920</u>		28. Logger's total depth: <u>2920</u>	
15. Tract:		30. Type of completion: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Through Casing <input type="checkbox"/> Slotted Liner			
16. Allot:					
17. Well #: <u>4</u>					
18. Lease Name: <u>BARTER</u>					
19. PTD: <u>5500</u> 20. Drilling Unit: <u>20</u>					
29. Type of tools: <input type="checkbox"/> Cable <input type="checkbox"/> Fluid Rotary <input type="checkbox"/> Cable/Air Rotary <input type="checkbox"/> Cable/Fluid Rotary <input type="checkbox"/> Cable/Air Rotary/Fluid Rotary <input checked="" type="checkbox"/> Air Rotary <input type="checkbox"/> Air/Fluid Rotary					
31. Elevation: Ground Level <u>789</u>		Derrick Floor <u>795</u>		Kelley Bushing <u>797</u>	
32. Perforated intervals & number of shots: <u>PERFED W/ 10 SHOTS 151" DIA. FROM 2802 - 2811</u>					
33. Method of shot, acid, or fracture treatments, production tests, pressures, etc.: <u>FRACED W/ 300 GAL OF 15% HCL PLUS 1500 BARRELS OF FLUID PLUS 30,000 # OF 20-40 SAND.</u>					
34. Mouse hole plugged: <input checked="" type="checkbox"/> Yes <u>2</u> Sacks <input type="checkbox"/> No <input type="checkbox"/> N/A Rat hole plugged: <input checked="" type="checkbox"/> Yes <u>2</u> Sacks <input type="checkbox"/> No <input type="checkbox"/> N/A					
35. Amount of initial production: Natural: Gas <u>0</u> Oil <u>0</u> Water <u>0</u> After Treatment: Gas <u>100</u> Oil <u>1</u> Water <u>0</u> Lost Hole at _____ feet. Additional Data: _____					
36. Record of disposal of water and other waste including liquids used in fracture treatment: a. <input checked="" type="checkbox"/> Annular Disposal b. _____ Drilling Operations c. _____ Disposal Well: County _____ Permit # _____ d. _____ Dust/Ice Control: County _____ Township or Municipality _____ e. _____ Secondary Recovery: County _____ Permit # _____ f. <input checked="" type="checkbox"/> Salt Water Haulers: (Name and telephone number) 1. <u>RAY PANDOR 358-2482 (DIAMOND, OH)</u> 2. _____					
37. Casing and tubing record: Please indicate which is used (cement or mudding)					
Size		Feet Used in Drilling		Amount of Cement or Mud	
<u>8 5/8"</u>		<u>395'</u>		<u>100 SKS LT. W/ 3% CCL</u>	
				<u>75 SKS CLASS A W/ 3% CCL</u>	
<u>4 1/2"</u>		<u>291 9</u>		<u>125 SKS 50-50</u>	
				<u>POZ CEMENT</u>	
Comments: _____					
38. Name of drilling contractor: <u>ARMSTRONG</u>					
39. Type of electrical and/or radioactivity logs run: (All logs must be submitted) <u>GR, CAL, Comp Density, Neutron</u>					
40. Name of logging company: <u>BUCKEYE WELL SURVEY</u>					
DIVISION USE ONLY: Log Submitted: <u>DF</u> Well Class: <u>POOL</u> A/D: <u>Y</u>					

FORMATION		TOP	BASE	Shows of oil, gas, fresh water, or Brine — Indicate depth or interval and amount	REMARKS
Fresh Water Strata					
Coal Seams					
1st Cow Run	321-6				
2nd Cow Run	324-1				
Maxton Sand	328-4				
Keener Sand	337-1				
Big Injun Sand	337-2				
Berea Sand	337-8				
Ohio Shale	341-1				
Big Lime	344-4	1298	2642		
Oriskany	347-2	1502	1522		
Salina	351-2				
Newburg	351-3				
Lockport	354-1	2380	2642		
Little Lime	354-3	2698	2702		
Packer Shell	354-5	2718	2740		
Stray Clinton	357-2	2757	2769		
Red Clinton	357-3				
White Clinton	357-4	2780	2804	SHOW OF GAS	
Medina	357-7				
Queenston	361-3				
Trenton Lime	364-3				
Black River	364-4				
Gull River	364-5				
Glenwood Shale	364-6				
Rose Run	367-3				
Trempealeau	371-2				
Mt. Simon	377-3				
Granite wash	400-1				
Granite	400-2				

I (We) certify that the above information is true and correct, to the best of my knowledge.

SIGNATURE Jon O Newton DATE 12/21/82
NAME (TYPED OR PRINTED) JON O. NEWTON TITLE GENERAL PARTNER
REPRESENTING DOMIE ENERGY 1982 NO. 2