

STATE OF OHIO  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL AND GAS

OIL AND GAS WELL  
DRILLING PERMIT

API WELL NUMBER

3 4 155 2

3196  
PERMIT

\* \* 1 4

FORM 51: REVISED 2/85

OWNER/OPERATOR NAME, ADDRESS:

KLEESE DEVELOPMENT ASSOCS  
45 NORTH ROAD  
NILES OH  
44446

DATE ISSUED:

03/25/83

PERMIT EXPIRES:

03/25/89

TELEPHONE NUMBER:

216-652-5991

IS HEREBY GRANTED PERMISSION TO: Drill New Well  
IF UNPRODUCTIVE.

AND ABANDON NEW WELL

PURPOSE OF WELL: Oil & Gas

SUBSTANCE TO BE STORED OR COMPLETION DATE IF PERMIT TO PLUG:

DESIGNATION AND LOCATION:

LEASE NAME NATALE

WELL NUMBER 1

COUNTY TRUMBULL

CIVIL TOWNSHIP

TRACT OR ALLOTMENT

FOOTAGE LOCATION

WARREN

1370'NL & 775'WL OF LOT 2

SECTION

LOT 2

FRACTION

QUARTER TOWNSHIP

TYPE OF TOOLS: Oil Rotary/Fluid Rotary

PROPOSED TOTAL DEPTH 4800 FEET

GROUND LEVEL ELEVATION 895

GEOLOGICAL FORMATION(S)

CLINTON

ULTIMATE DISPOSAL OF WATER AND OTHER WASTE SUBSTANCES:

Salt Water Disposal Well  
Salt Water Haulers

HAULER REGISTRATION NUMBER

1. 53

2.

CONDITIONALLY APPROVED CASING PROGRAM (SUBJECT TO APPROVAL OF OIL AND GAS WELL INSPECTOR):

SURFACE HOLE ON FLUID ONLY  
8-5/8" MINIMUM 300' IN A 12-1/4" HOLE  
CEMENT BASKET AT 80' CEMENT CIRCULATED TO SURFACE  
4-1/2" PRODUCTION CASING CEMENTED IF PRODUCTIVE

This permit is NOT TRANSFERABLE and expires 365 days after issuance, unless drilling has commenced prior thereto. This permit, or an exact copy thereof, must be displayed in a conspicuous and easily accessible place at the well site before permitted activity commences and remain until the well is completed. Ample notification to inspector is necessary. All mudding, cementing, placing and removing casing, and plugging operations must be done under the supervision of:

OIL AND GAS WELL INSPECTOR:

KOHL, JERRY  
6679 RT. 322 E. P.O. BOX 55  
WILLIAMSFIELD OH  
216-293-5222  
216-896-0616

PHELPS, MICHAEL  
614-498-8839

DEPUTY MINE INSPECTOR: MUST BE NOTIFIED IF WELL IN A COAL-BEARING TOWNSHIP IS TO BE PLUGGED AND ABANDONED.

614-481-3697  
BACKUP INSP. FRANK STONE  
216-484-6537

FIRE AND EMERGENCY NUMBERS:

FIRE: 216-898-2601

MEDICAL SERVICE: 216-898-2601

SPECIAL CONDITIONS:

/s/ J. Michael Biddison  
CHIEF, DIVISION OF OIL AND GAS

WHITE—WELL SITE COPY / BLUE—INSPECTOR'S COPY / GREEN—DIVISION OF OIL AND GAS COPY / CANARY—DIVISION OF MINES COPY  
PINK—DIVISION OF MINES COPY / GOLDENROD—OPERATOR'S FILE COPY

1. APPLICATION NUMBER 117645  
 2. OPERATOR Heese Development Assoc.  
 3. API 155 COUNTY Trumbull

	INITIALS	DATE
4. DATE STAMP	<u>P/c</u>	<u>2/26</u>
5. PERMIT FEE & CHECK NUMBER	<u>1425</u>	<u>\$ 500.</u>
6. A D FEE AND CHECK NUMBER	_____	_____
7. INJECTION WELL FEE AND CHECK NUMBER	_____	_____
8. <del>PLANS</del> AFFIDAVIT SENT TO DIV. OF MINES	<u>P/c</u>	<u>2/29</u>
9. AFFIDAVIT REC'D FOR DIV. OF OIL & GAS	_____	_____
10. APPLICATION ENTERED:	<u>D</u>	<u>3-1</u>
<u>Application Part A</u>		
<u>Brine Storage &amp; Final Disposal Plan</u>		
<u>Restoration Plan</u>		
<u>County Engineer File</u>		
11. TECHNICAL REVIEW	<u>BF</u>	<u>3/11</u>
12. SPECIAL AREA/SAMPLES: YES <u>NO</u>	_____	_____
<u>Mecca Pool</u>		

13. VERBAL FROM DIV. OF MINES	_____	_____
14. WRITTEN FROM DIV. OF MINES	_____	_____
15. GEOLOGIST APPROVAL	<u>gs</u>	<u>3/11/88</u>
16. DATA ENTRY/ISSUED <u>2/11/88</u>	<u>R</u>	<u>3/25</u>
17. PERMIT: Taken <u>Mailed</u> ✓	<u>NB</u>	<u>3/28</u>
18. CALLED INSPECTOR (If picked up)	_____	_____
19. FINAL MAP CHECK	<u>M</u>	<u>6/13</u>
20. COMMENTS:	_____	_____

RUN DATE: 880226

P R O O F S H E E T

PAGE: 2

1 SURETY#: 2655 5 APP#: 117645 15 CNTY: TRUM 16 TWP: WARREN 11 TYPE APP: NW 12 PURP: OG 13 STORAGE:

28 SEC: X 29 LOT: 2 30 FRACT: 31 QTR TWP: 32 TRACT: 33 ALLQT:

20 WELL: 1 21 LEASE NAME: NATALE 23 FORM: CLINTON 22 PTD: 4800 24 D UNIT: 40

25 TOOL: RTAF 38 COAL B: Y 35 26 FIRE: 216-898-2601 27 MED: 216-898-2601 34 QUAD: SOUTHTON

35 X COORD: 2,442,150 36 Y COOR: 587,600 37 ELEVA: 895 49 WELL CLASS: Pool

PREVIOUSLY PERMITTED

17 API: 155 18 DRL/D: 2 19 PERMIT:

40 REG: B 41 CALL: 50 42 DISP: A: SW B: SH C: 45 D: 46 AD DENIED:

CASING PROGRAM:

FOOTAGE:

51 TECH DATE: 3/11

88  
15 300  
17  
20

1370' NH + 775' WH  
of lot 2

52 GEO DATE: 3/11/88

53 GEO INT: ---

54 ISSUE: -----

50  
SPEC COND

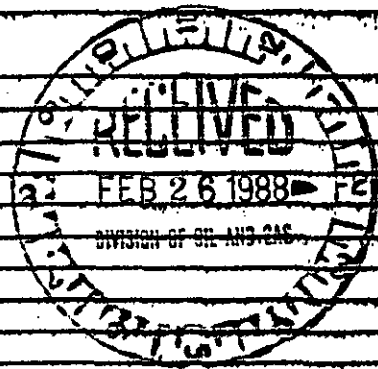
2. Be-680 895 Mecca Pool  
215

OFFICE ELECTRONICS INC #110

117645

APPLICATION FOR A PERMIT
OHIO DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL & GAS, FOUNTAIN SQ., BLDG. A, COLUMBUS, OH 43224

INSTRUCTIONS ON REVERSE SIDE FORM 1: Revised 03/85
1. I, We (applicant) Kleese Development Associates, 2. Owner # C-0002655
(address) 45 North Rd., Diles OH 43046 Phone # 614-654-5991
hereby apply this date February 25, 1988 for a permit to:
[X] Drill Plug Back Plug & Abandon Convert Reopen Deepen
Reissue Reissue & Revised Location
3. TYPE OF WELL: [X] Oil & Gas Artificial Brine Saltwater Injection
Industrial Waste Storage of: Other: Explain
\*Solution Mining \*Enhanced Recovery
(If type chosen has an asterisk (\*), check appropriate box below)
Input/Injection Water Supply Production/Extraction Observation
4. MAIL PERMIT TO: Same as above
5. COUNTY: Trumbull
6. CIVIL TOWNSHIP: Warren
7. SECTION: 8. LOT: 2
9. FRACTION: 10. QTR TWP:
11. TRACT/ALLOT:
12. WELL #: 1
13. LEASE NAME: Natale
14. PROPOSED TOTAL DEPTH: 4800'
15. GEOLOGICAL FORMATION: Clinton
16. DRILLING UNIT IN ACRES (must be same as acres indicated on plat): No. 0
IF PERMITTED PREVIOUSLY:
17. API #: 34 \* \* 14
18. OWNER:
19. WELL #:
20. LEASE NAME:
21. PREVIOUS TOTAL DEPTH:
22. PREVIOUS GEOLOGICAL FORMATION:
23. MEANS OF INGRESS CO Rd TWP Rd Twp Rd State Hwy
24. TYPE OF TOOLS Cable Air Rotary Fluid Rotary [X] Air & Fluid Rotary Cable & Air Rotary Cable & Fluid Rotary Cable & Air Rotary & Fluid Rotary
25. PROPOSED CASING PROGRAM: Approx. 400' 8 5/8" casing cemented to surface 5' 4 1/2" if productive
26. IF SURFACE RIGHTS ARE OWNED BY THE STATE OF OHIO, DEPARTMENT OF NATURAL RESOURCES: Division Telephone
27. FIRE AND MEDICAL DEPT. TELEPHONE NUMBERS Closest to Well Site: Fire 216-898-2601 Medical 216-898-2601
28. MEANS OF EGRESS CO Rd TWP Rd Municipal Rd State Hwy U.S. 422
29. LANDOWNER ROYALTY INTEREST Name Kleese Development Assoc. \* Address Warren, Ohio Diles, OH Name Address Name Address Name Address \* Kleese Development acquired the property after they applied for the permit Name Address per tele w/ Mary Ann Graham 2-25-88 '88



I the undersigned, being first duly sworn, depose and state under penalties of law, that I am authorized to make this application, that this application was prepared by me or under my supervision and direction, and that facts and facts stated therein are true, correct, and complete, to the best of my knowledge.

I the undersigned, further depose and state that I am the person who has the right to drill upon the tract of land or drilling unit, described in this application, and that I have the right to produce oil or gas from a pool thereon, and to appropriate the oil or gas that I produce therefrom either for myself or others. And furthermore, I the undersigned, being duly sworn, depose and state at this time I am not liable for a final nonappealable order of a court for damage to streets, roads, highways, bridges, culverts, or drainageways pursuant to Section 5577.12 of the Ohio Revised Code, and that all requirements of any political subdivision having jurisdiction over an activity related to the drilling or operation of this oil or gas well that are in effect at the time of this application and on file with the Division of Oil and Gas, including but not limited to zoning ordinances and the requirements of Section 4513.34 of the Ohio Revised Code, will be complied with until abandonment of this well. If applying for a permit to plug and abandon a well, I hereby certify that the written notices, as required in Section 1509.13, Ohio Revised Code, have been given.

That I hereby agree to conform with all provisions of Chapter 1509 of the Ohio Revised Code, to all orders and rules issued by the Chief, Division of Oil and Gas.

Signature of Owner/Authorized Agent: [Signature] Name (Type or Print) Robert S. Kleese Title Partner If signed by Authorized Agent, a certified copy of appointment of agent must be on file. Witness to and subscribed before me this the 25th day of February 1988.

Mary Ann Graham (Notary Public)

MARY ANN GRAHAM, NOTARY PUBLIC (Date State of Ohio) My Commission Expires Sept. 20, 1991

(SEAL)

Before this application can be processed, Form 9 (Authority and Organization Form), indicating the exact owner name on this Form 1, and proof of compliance with the surety requirements of Chapter 1509.07 of O.R.C. must be on file with the Division of Oil & Gas. If a new owner name (i.e. one not previously filed with the Division) is used, a Form 9 and evidence of meeting the surety requirements must be filed with this application.

All information requested on this form must be provided unless exempted by the instructions below. Incomplete applications will be returned to the applicant. An application for a permit requires the following:

- a. Original and (2) copies of the application;
- b. Original and (4) copies of an Ohio Registered surveyor's plat;
- c. Original and (1) copy of the restoration plan;
- d. Original and (1) copy of Brine Storage and Final Disposal Plan
- e. \$250.00 check or money order for a permit fee to drill, reopen, reissue, deepen, and plug back; or \$50.00 check or money order for a permit to plug and abandon.
- f. \$100.00 check or money order for a permit to drill, reopen, reissue, deepen, plug back or convert a well to saltwater injection.
- g. \$50.00 check or money order if brine is to be disposed of by any method other than underground injection or enhanced recovery as stated on the Plan for Storage and Disposal of Brine and Other Waste Substances.

(MAKE CHECKS PAYABLE TO THE DIVISION OF OIL & GAS)

Item 1. Provide requested information.

Item 2. Indicate owner number in blank. If owner number is not known, ensure that the owner name is identical to owner name that is on the Form 9 (Authority and Organization Form) that is on file with the Division.

Item 3. Indicate the type of well for which the application is being submitted.

Item 4. Provide name, address, city, state and zip code where the permit is to be mailed.

Items 5 - 13. Indicate drilling location.

Items 14 - 16. Provide requested information.

Section 17. Complete when application is for a permit to reopen, deepen, reissue, plug back, convert, or plug & abandon. If API # is unknown indicate previous permit number.

Items 18 - 22. Complete if application is to reissue a previous permit, or to plug back, convert, deepen, reopen or plug & abandon an existing well.

Item 23. List all County, Township, and/or Municipal Roads, Streets and Highways by name or number that applicant anticipates to use as means of ingress to the well site.

Item 24. Indicate type of tools to be used.

Item 25. Indicate size and amount of casing to be used.

Item 26. Complete if surface rights are owned by the Department of Natural Resources.

Item 27. Indicate fire and medical department emergency telephone numbers closest to the well site.

Item 28. List all County, Township, and/or Municipal Roads, Streets and Highways by name or number that applicant anticipates to use as means of egress from the well site.

Item 29. List names and addresses of landowner royalty interest holders. Names must coincide with those shown on the designated unit or subject tract on the surveyor's plat or an explanation must be included. (Overriding royalty and working interests are not required.)

For use by DIVISION OF OIL AND GAS and DIVISION OF MINES

Is location within a coal bearing township?	Yes _____	No _____
A landowner affidavit has been attached?	Yes _____	No _____
Application referred to Division of Mines?	Date _____	By _____
Approved by _____	Date _____	
Disapproved by _____	Date _____	
Explanation _____		

OLUBUN YRATON MAHARO KINA YRAN  
 Ohio Oil & Gas  
 1881 OS. ROAD CINCINNATI OHIO 45202

DIVISION OF OIL AND GAS

AFFIDAVIT

Application No. \_\_\_\_\_  
(To be filled in by the Division)

STATE OF Ohio

SS:

COUNTY OF Trumbull

KLEESE DEVELOPMENT ASSOCIATES

(Name and address of landowner)

45 North Road, Niles, OH 44446

being first duly sworn according to law, depose and say that they are the owners of the following described real estate:

Located in \_\_\_\_\_ Quarter of

Section 2, Fraction/Lot \_\_\_\_\_

Warren Township,

Trumbull County, Ohio.



The undersigned certify that they are the owners of the property in fee simple, including the coal rights, and have no objections to the drilling of the 1 (Well No.) by the KLEESE DEVELOPMENT ASSOCIATES, INC. on said premises.  
(Company)

Further affiant sayeth naught.

[Signature]  
(Signatures)

ROBERT S. KLEESE, PARTNER

Kleese Development Associates

SWORN to before me and subscribed in my presence this 15th day of March, 1988.

[Signature]  
Notary Public  
**MARY ANN GRAHAM, NOTARY PUBLIC**  
State of Ohio  
My Commission Expires Sept. 2, 1991

AUTHORIZATION FOR CHANGING EXISTING PERMITS

PERSON RECEIVING REQUEST Bob DATE 9-14-88

OWNER: Klease Dev. PHONE NO: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

COUNTY: Trumbull TOWNSHIP: Warren

PERMIT NO: 3196 LEASE NAME: Natale WELL NO: 1

FILL OUT IF PERMIT IS PRE-COMPUTER

Acreage: \_\_\_\_\_ Geo. Formation: \_\_\_\_\_ PTD: \_\_\_\_\_

Type of Tool: \_\_\_\_\_ Type of Well: \_\_\_\_\_ Issue Date: \_\_\_\_\_

Application No: \_\_\_\_\_ Annular Disposal: YES \_\_\_\_\_ NO \_\_\_\_\_

CHANGES:

- \_\_\_\_\_ change in type of tool
  - \_\_\_\_\_ change in lease name/well number
  - \_\_\_\_\_ change in total depth/formation
  - \_\_\_\_\_ change in casing program
  - \_\_\_\_\_ correction in footage description
  - \_\_\_\_\_ typographical error
  - X change in acreage/drill unit  
(new plat submitted: yes X no \_\_\_\_\_)
- \_\_\_\_\_ change in location  
(only in the case where permit is printed but not yet mailed)

CORRECTION SHOULD READ:

Acreage 8      New      old  
40.41 ac.      40 ac.

TECHNICAL SECTION REVIEW BY: Bob DATE: 9-14

CHANGES AUTHORIZED BY: (Geologist) Blann DATE: 9/14/88

IS MINE REAPPROVAL NEEDED: YES \_\_\_\_\_ NO X (If Yes) Date Received: \_\_\_\_\_  
By: \_\_\_\_\_

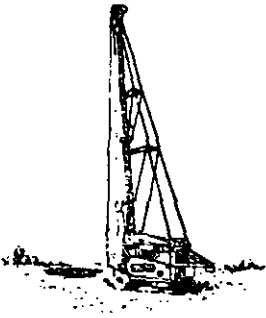
Verbal: \_\_\_\_\_ Written: \_\_\_\_\_

DATA ENTERED INTO THE COMPUTER/ISSUED BY: R DATE: 9/15

REISSUE PERMIT: YES \_\_\_\_\_ NO X ADD CORRECTION TO PERMIT LIST: YES X NO \_\_\_\_\_

DATE CORRECTION NEEDED: ASAP TO BE MAILED: \_\_\_\_\_ TO BE PICKED UP: \_\_\_\_\_

REGIONAL SUPERVISOR CALLED: \_\_\_\_\_



# KLEESE DEVELOPMENT ASSOCIATES

45 North Road  
Niles, Ohio 44446  
Phone (216) 652-5991

August 5, 1988

O.D.N.R.  
Permitting Section  
Fountain Square  
Building A  
Columbus, OH 43224

ATTENTION: Myrna Denny

Dear Ms. Denny:

Attached please find a permit application for the Natale #2 well located in Trumbull county. Along with this application we are sending you a revised plat map on the Natale #1, permit #3169, which has been revised to accommodate the drilling of the Natale #2.

Two things have been omitted from the enclosed package. One being the coal waiver affidavit which you should already have on file from when we permitted the Natale #1 well and the other being the brine storage proposal. I do not have any of the brine storage forms left so if you will send me some of them I will then forward you one on the Natale #2 well.

Thank you for your help in this matter. If you should have any questions please contact me.

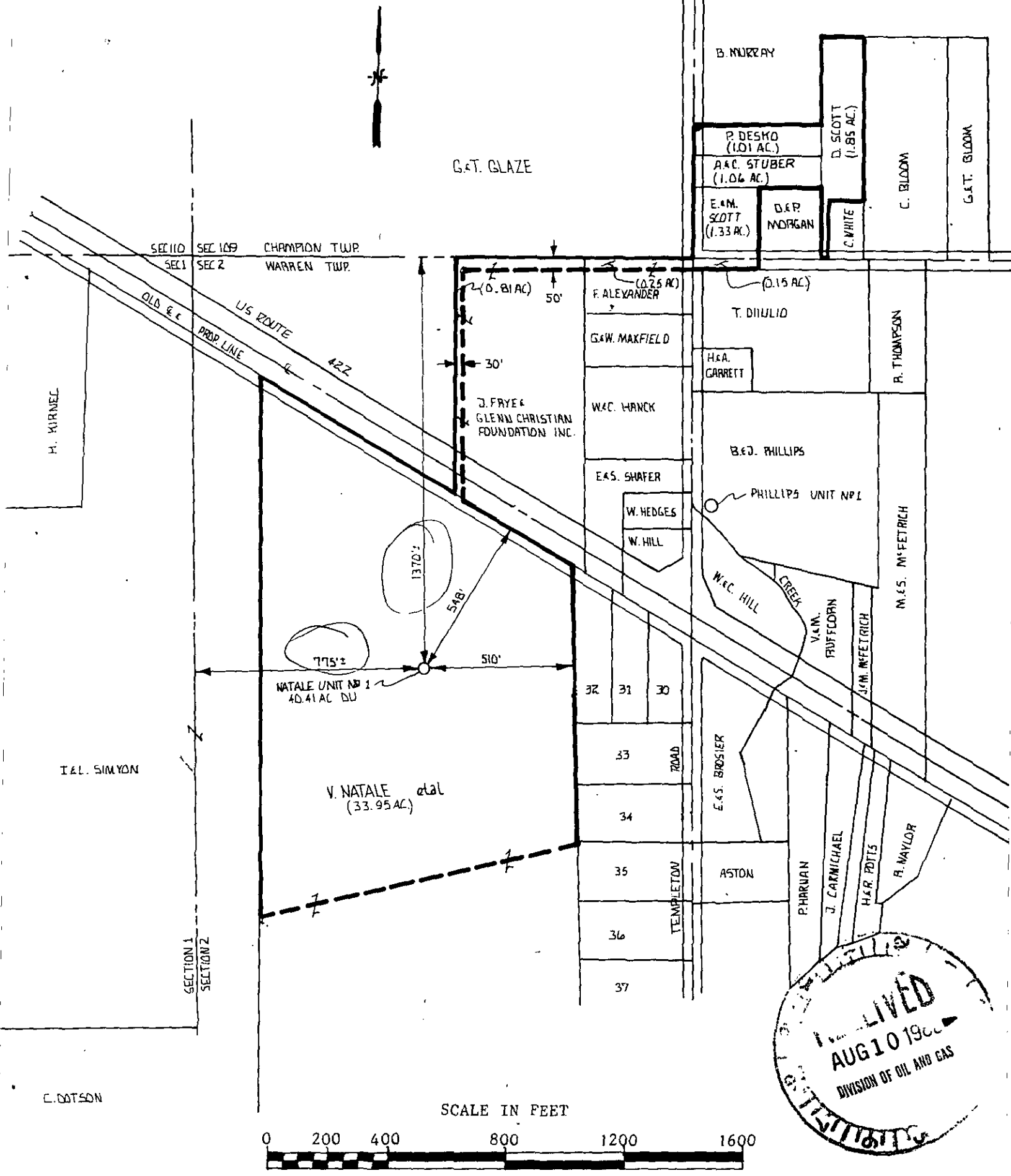
Sincerely,

*Mary Ann Graham*  
Mary Ann Graham, secretary  
Kleese Development Associates

Attachments



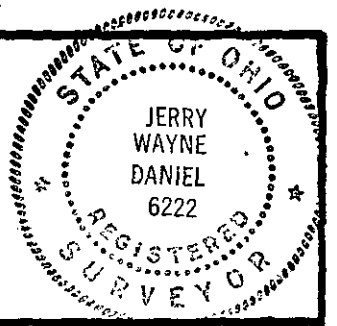




PLAT SHOWING PROPOSED LOCATION OF OIL OR GAS WELL

OPERATOR	KLEESE DEVELOPEMENT
ADDRESS	45 NORTH RD. NILES OHIO 44446
	NATALE WELL NO. 1 ACRES 40.41
COUNTY	TRUMBULL TWP. WARREN
QUAD.	SOUTHINGTON N 587600 ✓
OHIO PLANE COORDINATES	E 2442150 ✓
	ELEV. 895 ✓

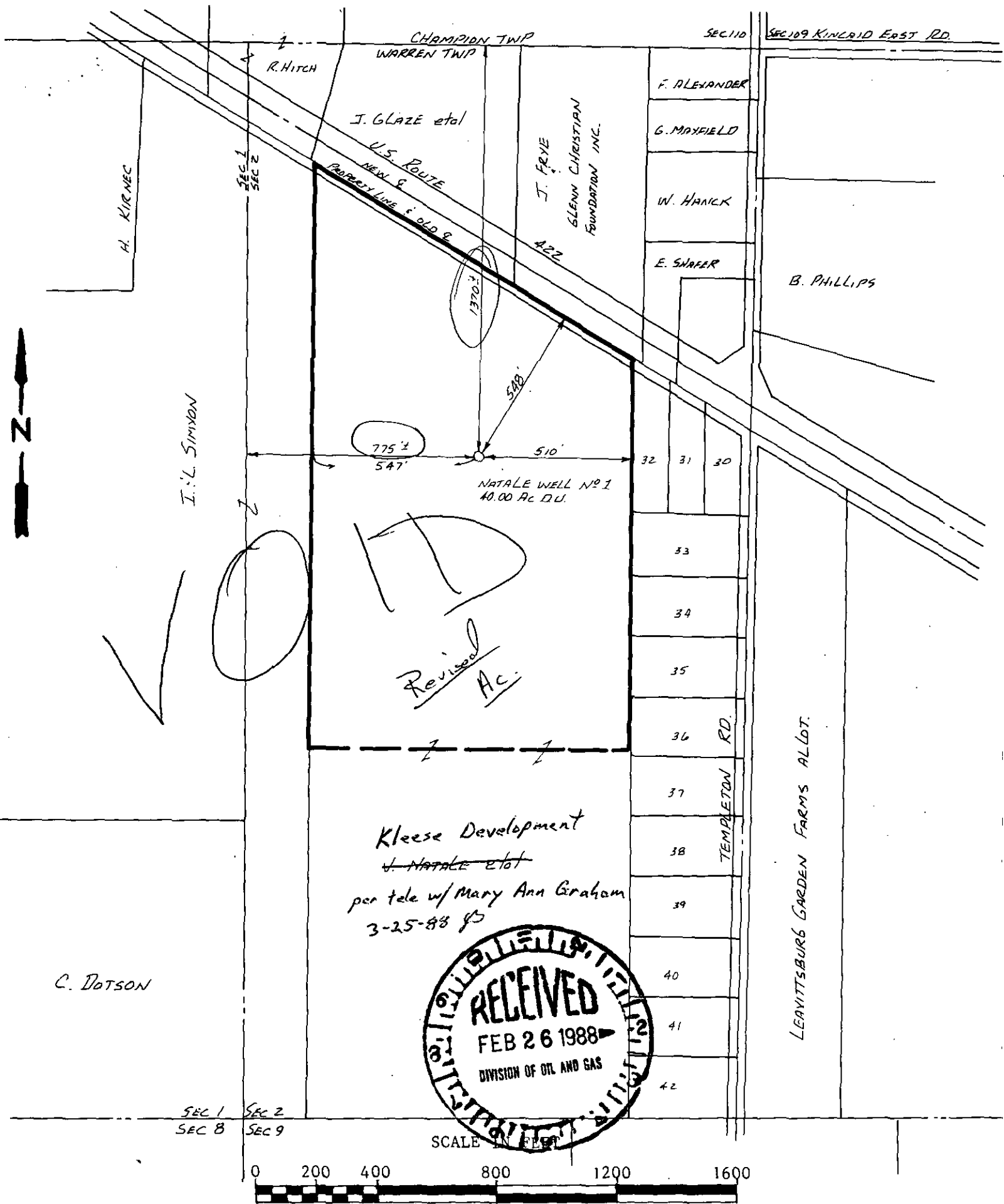
TWP.	4
RANGE	4
SECTION	2 LOT
TRACT	
DATE STAKED:	2-19-88
DRAWN BY:	ITZ JOB NO. 8876-1



I hereby certify that all drilling or producing wells within 1000 feet and all buildings and streams within 150 feet have been shown, there are no drilling unit lines nearer than 500 feet, that this plat is true and correct and was prepared according to the current State of Ohio, Department of Natural Resources, Division of Oil and Gas Regulations.

*Jerry W. Daniel*  
 Jerry W. Daniel, Registered Surveyor No. 6222  
 101 North Center Street  
 Newton Falls, Ohio 44444

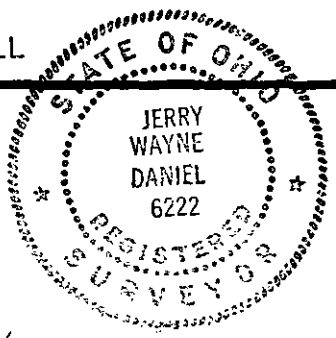
1370' W & 775' W of lot 2  
 40.41 ac. CI-Pool-R+



PLAT SHOWING PROPOSED LOCATION OF OIL OR GAS WELL

OPERATOR KLEESE DEVELOPMENT  
 ADDRESS 45 NORTH RD. NILES OH 44446  
NATALE WELL NO. 1 ACRES 40.00  
 COUNTY TRUMBULL TWP. WARREN  
 QUAD. SOUTHINGTON N 587600 ✓  
 OHIO PLANE COORDINATES E 2442150 ✓  
 ELEV. 895 ✓

TWP. 4  
 RANGE 4  
 SECTION 2 LOT 2  
 TRACT  
 DATE STAKED: 2-19-88  
 DRAWN BY: DLW / JOB NO. 8826-1



I hereby certify that all drilling or producing wells within 1000 feet and all buildings and streams within 150 feet have been shown, there are no drilling unit lines nearer than 500 feet, that this plat is true and correct and was prepared according to the current State of Ohio, Department of Natural Resources, Division of Oil and Gas Regulations.

*Jerry W. Daniel*  
 Jerry W. Daniel, Registered Surveyor No. 6222  
 101 North Center Street  
 Newton Falls, Ohio 44444

1370' x 775' of lot 2  
 40 ac. CI-Pool-Rt

RESTORATION PLAN  
OHIO DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL AND GAS

1. DATE OF APPLICATION:	FORM 4: Revised 03/85
2. OWNER NAME, ADDRESS, & TELEPHONE #'s: Kleese Development Associates 45 North Rd. Niles, OH 816-652-5991	3. API #: 3 4      * * 1 4 4. WELL #: _____ 5. LEASE NAME: <u>Natale</u> 6. PROPERTY OWNER: <u>same</u> 7. COUNTY: <u>Trumbull</u> 8. CIVIL TOWNSHIP: <u>Warren</u> 9. SECTION: <input checked="" type="checkbox"/> 10. LOT: <u>2</u>
11. CURRENT LAND USE: <input type="checkbox"/> Cropland <input type="checkbox"/> Commercial <input type="checkbox"/> Pasture <input checked="" type="checkbox"/> Idle Land <input type="checkbox"/> Wetlands <input type="checkbox"/> Recreational <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Unreclaimed strip mine <input type="checkbox"/> Woodland: Circle <u>Broad-leaved</u> or <u>Needlelike</u>	17. TYPE OF WELL: <input checked="" type="checkbox"/> Oil <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Other
12. SLOPE GRADIENT & LENGTH DETERMINED FROM: <input checked="" type="checkbox"/> Ground measurement <input type="checkbox"/> U.S. Geological Survey Topographical Maps <input type="checkbox"/> Other, explain _____	18. STEEPEST SLOPE GRADIENT CROSSING SITE: <input type="checkbox"/> 0 to 2% <input checked="" type="checkbox"/> 2.1 to 8% <input type="checkbox"/> 8.1 to 10% <input type="checkbox"/> 10.1 to 24% <input type="checkbox"/> greater than 24%
13. TYPE OF FALL VEGETAL COVER: <input type="checkbox"/> Little or no vegetal cover <input checked="" type="checkbox"/> Short grasses <input type="checkbox"/> Tall weeds or short brush (1 to 2 ft.) <input type="checkbox"/> Brush or bushes (2 to 6 ft.) <input type="checkbox"/> Agricultural crops <input type="checkbox"/> Trees with sparse low brush <input type="checkbox"/> Trees with dense low brush	19. LENGTH OF STEEPEST SLOPE CROSSING SITE: <input type="checkbox"/> 1 to 100 ft. <input checked="" type="checkbox"/> 101 to 200 ft. <input type="checkbox"/> 201 to 400 ft. <input type="checkbox"/> greater than 400 ft.
14. SOIL & RESOILING MATERIAL AT WELLSITE: <input checked="" type="checkbox"/> Stockpile & protect topsoil to be used when preparing seedbed <input type="checkbox"/> Use of soil additives (e.g. lime, fertilizer) <input type="checkbox"/> No resoiling planned <input type="checkbox"/> Proposed alternative _____	20. RESTORATION OF DRILLING PITS: ** <input checked="" type="checkbox"/> Haul drilling fluids and fill pits <input type="checkbox"/> Use steel circulating tanks <input type="checkbox"/> Proposed alternative _____
15. DISPOSAL PLAN FOR TREES AND TREE STUMPS: <input checked="" type="checkbox"/> No trees disturbed <input type="checkbox"/> Haul to landfill <input type="checkbox"/> Cut into firewood <input type="checkbox"/> Sell to lumber co. <input type="checkbox"/> Bury with landowners approval <input type="checkbox"/> Mulch sm. trees & branches, erosion control <input type="checkbox"/> Use for wildlife habitat w/landowner approval <input type="checkbox"/> Proposed alternative _____	21. BACKFILLING AND GRADING AT SITE: <input type="checkbox"/> Construct diversions channelled to naturally established drainage systems <input type="checkbox"/> Construct terraces across slopes <input checked="" type="checkbox"/> Grade to approximate original contour <input type="checkbox"/> Grade to minimize erosion & control offsite runoff <input type="checkbox"/> Proposed alternative _____
16. SURFACE AND SUBSURFACE DRAINAGE FACILITIES: <input checked="" type="checkbox"/> No existing drainage facilities for removal of surface and/or subsurface water <input type="checkbox"/> Tile drainage system underlying land to be disturbed <input type="checkbox"/> Drain pipe(s) underlying land to be disturbed <input type="checkbox"/> Surface drainage facilities on land to be disturbed	22. VEGETATIVE COVER TO BE ESTABLISHED AT SITE: <input type="checkbox"/> Seeding plan <input type="checkbox"/> Sod <input type="checkbox"/> Agricultural crops <input type="checkbox"/> Trees &/or Bushes <input checked="" type="checkbox"/> Proposed alternative _____
17. ADDITIONAL HOLES: <u>FEB 26 1988</u> <input checked="" type="checkbox"/> Rat/Mouse, if used will be plugged.	23. PROPOSED OR CURRENT LENGTH OF ACCESS ROAD: <input type="checkbox"/> 100 ft. or less <input checked="" type="checkbox"/> 101 to 500 ft. <input type="checkbox"/> 501 to 1500 ft. <input type="checkbox"/> greater than 1500 ft.
18. CURRENT LAND USE OF PATH OF ACCESS ROAD: <input type="checkbox"/> Cropland <input type="checkbox"/> Pasture <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Idle land <input type="checkbox"/> Wetlands <input type="checkbox"/> Recreational <input type="checkbox"/> Industrial <input type="checkbox"/> Residential <input type="checkbox"/> Unreclaimed strip mine <input type="checkbox"/> Woodland (Circle <u>Broad-Leaved</u> or <u>Needlelike</u> )	24. CURRENT LAND USE OF PATH OF ACCESS ROAD: <input type="checkbox"/> Cropland <input type="checkbox"/> Pasture <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Idle land <input type="checkbox"/> Wetlands <input type="checkbox"/> Recreational <input type="checkbox"/> Industrial <input type="checkbox"/> Residential <input type="checkbox"/> Unreclaimed strip mine <input type="checkbox"/> Woodland (Circle <u>Broad-Leaved</u> or <u>Needlelike</u> )

REQUIRED BY SECTION 1509.06 (L), OHIO REVISED CODE - FAILURE TO SUBMIT MAY RESULT IN AN ASSESSMENT OF CRIMINAL FINES NOT LESS THAN \$100.00 NOR MORE THAN \$2,000.00 OR CIVIL PENALTIES NOT LESS THAN \$4,000.00.

\*\* PITS MUST BE FILLED WITHIN FIVE MONTHS AFTER COMMENCEMENT OF THE WELL.

<p>26. SURFACING MATERIAL FOR ACCESS ROAD:</p> <p>Gravel _____ Brick and/or tile waste _____  <input checked="" type="checkbox"/> Slag _____ Crushed stone _____  <input type="checkbox"/> No surfacing material to be used _____  <input type="checkbox"/> Proposed alternative _____</p>	<p>28. GRADING &amp; EROSION CONTROL PRACTICE ON ROAD:</p> <p>_____ Diversions _____ Water breaks _____ Drains _____  <input checked="" type="checkbox"/> Outsloping of road _____ Open top culverts _____  <input checked="" type="checkbox"/> Pipe culverts _____ Filter Strips _____ Rip rap _____  <input type="checkbox"/> Proposed alternative _____</p>
<p>27. PATH OF ACCESS ROAD TO BE DETERMINED BY:</p> <p><input checked="" type="checkbox"/> Landowner _____ Contractor _____  <input type="checkbox"/> Existing access road _____ Operator _____</p>	<p>29. STEEPEST SLOPE GRADIENT ON ACCESS ROAD:  <input type="checkbox"/> 0 to 5% <input checked="" type="checkbox"/> 6 to 10% <input type="checkbox"/> greater than 10%</p> <p>30. APPROX. LENGTH OF STEEPEST SLOPE ON ROAD:  <input type="checkbox"/> 0 to 100 ft. _____ 101 to 200 ft. _____  <input checked="" type="checkbox"/> 201 to 400 ft. _____ greater than 400 ft. _____</p>
<p>31. HAS LANDOWNER RECEIVED A COPY OF THIS RESTORATION PLAN? _____ Yes <input checked="" type="checkbox"/> No</p>	

The undersigned hereby agrees to implement all restoration operations identified on this form, and conform to all provisions of Section 1509.072 of the Ohio Revised Code, and to all orders and rules issued by the Chief, Division of Oil and Gas.

Signature of Owner/Authorized Agent *MS*

Name (Typed or Printed) Robert S. Kleese Date 2-25-88

Restoration Plan must be submitted to the Division in duplicate.



3 4 155 2 3196 1 4  
 Permit No.

(To be submitted with Activity Report)

**RECORD OF CASING, CEMENTING AND MUDGING**

Well Owner: Kleese Develop. ASSOC'S  
 Lease Name: Natale Well No. 1  
 County: Trumbull Twp. Warren  
 Contractor: B & K Drilg.  
 Type of Tools:  ROTARY  CABLE  
 Service Company: Halliburton  
 Procedure:  PRESSURE  GRAVITY  
 Plugging of: N/A  
 Mouse hole  YES  NO N/A SACKS  
 Rat hole  YES  NO N/A SACKS

Date Issued: 3-25-88 Expiration Date: 3-25-89  
 Spud Date: Month 4 Day 7 Year 88  
 Type of Job:  SURFACE  PRODUCTION  OTHER  
 Type of Cement: Light Standard Sacks: 100  
 Amount of Mud: N/A  
 Size of Hole: 12 1/4" DEPTH 325 FT  
 Casing: SIZE 8 5/8" DEPTH 315 FT  
 Float Equipment:  SHOE  COLLAR  OTHER  
 Special Equipment: open end, basket  
AT 80'

**CASING RECORD**

SIZE	SET	REMARKS

Cement/Mud Circulated to Surface:  YES  NO  
 Notification Received:  YES  NO  
 Job Witnessed by Inspector:  YES  NO  
 Annular Disposal indicated on permit:  YES  NO  
 Meets construction requirements for A.D. (Explain below if no or if remedial action is required).  YES  NO  
 DATE JOB COMPLETED 4/8/88

Formations: (if available)  DL  EL  KB  RF  GL

NAME	TOP	BOTTOM

Remarks:  
 (attach cement/mud tickets if available)  
good circulation

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

*MAS*

1. Owner # 2655 Form 8: Revised 2/85 09/25/88

2. Owner name, address & telephone numbers:  
 KLEESE DEVELOPMENT ASSOC'S  
 45 NORTH ROAD  
 NILES OH  
 216-652-5991 44446

This report is due in duplicate 30 days after completion of the well. If the permit has expired and the well was not drilled,  check here, sign on reverse side, and return to our office within 30 days after expiration.

4. Type of permit:  
 Oil & Gas

3. API #: 84 150 2 3196 #  
 5. County: TRUMBULL  
 6. Civil Township: WARREN

7. Type of well:  
 Drill New Well

8. Footage:  
 1370' NL & 775' WL UP LOT 2

9. X: 2,442,150 Y: 587,600  
 10. Quad: SOUTHINGTON  
 11. Section: \_\_\_\_\_ 12. Lot: 2  
 13. Fraction: \_\_\_\_\_ 14. Qtr Twp: \_\_\_\_\_  
 15. Tract: \_\_\_\_\_  
 16. Allot: \_\_\_\_\_  
 17. Well #: 1  
 18. Lease Name: NATALE  
 19. PTD: 4800 20. Drilling Unit: 40

21. Date drilling commenced: 4/7/88  
 22. Date drilling completed: 4/12/88  
 23. Date put into production: \_\_\_\_\_  
 24. Date plugged if dry: \_\_\_\_\_  
 25. Producing formation: Clinton  
 26. Deepest formation: Queenston  
 27. Driller's total depth: 4507'  
 28. Logger's total depth: 4513'

29. Type of tools:  
 Cable  Air Rotary  
 Fluid Rotary  Air/Fluid Rotary  
 Cable/Air Rotary  
 Cable/Fluid Rotary  
 Cable/Air Rotary/Fluid Rotary

30. Type of completion:  
 Open Hole  
 Through Casing  
 Slotted Liner

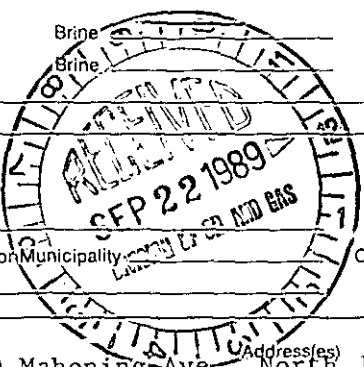
31. Elevation: Ground Level 895 Derrick Floor 905 Kelley Bushing

32. Perforated intervals & number of shots:  
4281 - 4287 4 shots  
4301 - 4321 11 shots  
4343 - 4361 8 shots

33. Method of shot, acid, or fracture treatments, production tests, pressures, etc.: perforated with .53" dia alum strip jets. Fractured with 102,217 gal water and 650 sks sand. Broke down at 1601 psig and treated at an avg. pressure and rate of 2020psig and 36 bpm respectively. ISIP of 1295, 5 min SIP of 1275, 10 min SIP of 1258 psig.

34. Mouse hole plugged:  Yes 5 Sacks  No  N/A  
 Rat hole plugged:  Yes 5 Sacks  No  N/A

35. Amount of initial production per day: (MCF) \_\_\_\_\_ (Bbls.) \_\_\_\_\_  
 Natural: Gas \_\_\_\_\_ Oil \_\_\_\_\_  
 After treatment: Gas 3 \_\_\_\_\_ Oil \_\_\_\_\_  
 Lost Hole at \_\_\_\_\_ feet. Additional Data: \_\_\_\_\_



36. Record of disposal of water and other waste including liquids used in fracture treatment:  
 a. \_\_\_\_\_ Annular Disposal  
 b. \_\_\_\_\_ Injection Well: County \_\_\_\_\_ Permit # \_\_\_\_\_  
 c. \_\_\_\_\_ Dust/Ice Control: County \_\_\_\_\_ Township or Municipality \_\_\_\_\_ Other \_\_\_\_\_  
 d. \_\_\_\_\_ Enhanced Recovery: County \_\_\_\_\_ Permit # \_\_\_\_\_

37. Brine Hauler(s):  
 1. Universal Energy Services Name(s) 11550 Mahoning Ave., North Jackson OH Address(es)  
 2. \_\_\_\_\_  
 (#36 and #37 must be completed if brine is hauled away from the site.)

38. Casing and tubing record: Please indicate which is used (cement or mudding)

Size	Feet Used in Drilling	Amount of Cement or Mud	Feet Left in Well
<u>8 5/8"</u>	<u>300</u>	<u>202 sks cement</u>	<u>all</u>
<u>4 1/2"</u>	<u>4462</u>	<u>150 sks cement</u>	<u>all</u>
<u>1 1/2"</u>	<u>4191</u>	<u>none</u>	<u>all</u>

Comments: \_\_\_\_\_

39. Name of drilling contractor: Kleese Development Associates, Inc

40. Type of electrical and/or radioactivity logs run: (All logs must be submitted)  
neutron, compensated density, guard

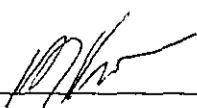
41. Name of logging company: Perfection Services

DIVISION USE ONLY:  
 Log Submitted: Y/N Well Class: FULL A/D:  
 Additional Fee: Y/N

REQUIRED by Section 1509.10, Ohio Revised Code - Failure to submit may result in the assessment of criminal fines of not less than \$100.00 nor more than \$2,000.00 or civil penalties not more than \$4,000.00.  
 DNR 5607 (Rev. 2/85)

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	337-6			
Ohio Shale	341-1			
Big Lime	344-4	2442	4076	
Oriskany	347-2			
Salina	351-2	<del>3051</del>	<del>3659</del>	
Newburg	351-3			
Lockport	354-1			
Little Lime	354-3			
Packer Sheel	354-5	4194	4221	
Stray Clinton	357-2	4240	4278	
Red Clinton	357-3	4279	4323	
White Clinton	357-4	4323	4365	
Medina	357-7	4404	4414	
Queenston	361-3	4414		
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  DATE \_\_\_\_\_

NAME (TYPED OR PRINTED) Robert S. Kleese TITLE Partner

REPRESENTING Kleese Development Associates

OHIO DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL AND GAS  
ATTN: FIELD ENFORCEMENT SECTION  
FOUNTAIN SQUARE  
COLUMBUS, OH 43224  
FORM 56: REVISED 07/24/85

AM ✓

34 1552

AFT WELL NUMBER  
3196 \*\*14  
permit no.

SPUD/PLUGGING DATE 4-7-88

RESTORATION REPORT  Preliminary-well exists  
 FINAL - well plugged

OWNER Kleese Develop. Assoc. WELL NO. 1 LEASE NAME NATALE  
COUNTY Trumbull TOWNSHIP Warren SEC/LOT 2 LANDOWNER \_\_\_\_\_  
(if not same as lease name)

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

REMARKS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(TO BE SUBMITTED WITH INSPECTOR'S ACTIVITY REPORTS AFTER AREA IS IN COMPLIANCE WITH CHAPTER 1509)  
NOTIFICATION RECEIVED: YES \_\_\_ NO ✓

Jerry Orkall Insp.  
SIGNATURE AND TITLE  
5-10-90  
DATE SIGNED