

ANNULAR DISPOSAL WELL INVESTIGATION SHEET

State

OHIO DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL AND GAS - INTERNAL FORM

PERMIT NO. 3204 DATE: _____

COUNTY: Perry TOWNSHIP: Harrison

LEASE NAME & NO: Kollard Lamb #2 SECTION/ACT 31

OWNER/OPERATOR John F. Altier Sr.

A.D. NUMBER	YES	NO
ANNULAR DISPOSAL	---	---
AIRTIGHT	---	---
ACCESSIBLE AT SURFACE	---	---
WELL I.D. DISPLAYED	---	<input checked="" type="checkbox"/>
REMEDY <u>Gas only</u>		

SIGNATURE: Edwin Wisecover

FORWARDED TO REGION OFFICE FOR FURTHER INVESTIGATION _____ DATE _____

TYPE OF VIOLATION(S) _____

DETAILED EXPLANATION: _____

DIRECTION TO LOCATION _____

REPORT SUBMITTED BY REGION OFFICE ON _____ DATE _____

FORM #29-A
Revised 10/81

OHIO DEPARTMENT OF NATURAL RESOURCES
Division of Oil and Gas - UIC Section
Fountain Square, Bldg. A
Columbus, OH 43224
(614) 265-5928

ANNULAR DISPOSAL WELL REPORTING SHEET

OPERATOR: John F. Altier, Sr.
P. O. Box 415
Corning, Ohio 43730

Permit No. 3204
County Perry
Township Harrison
Lease Name Rambo #2

Phone No. (614) 347-4329

The well captioned above is on the Division's list of active annular disposal wells. Complete Section A of this report if the annulus of this well is being used for the disposal of saltwater. If the annulus is not being used for disposal, complete Section B. Sign and return this form to the above address. If you operate any annular disposal well(s) for which a form is not enclosed, notify the UIC Section of the Division. In accordance with Section 1501:9-3-07(D) of the Rules and Regulations of the Division of Oil and Gas, this report must be submitted to the Division before ~~March 1, 1982~~ April 1, 1982.

A COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS BEING USED FOR THE DISPOSAL OF SALTWATER.

Give the following information for the period beginning January 1, 1981, and ending December 31, 1981:

Total amount of saltwater put into the annulus; 0 bbls/year
Maximum injection pressure; 0 psi
Average injection pressure; 0 psi

Check one:

XXX Only saltwater produced from this well is being put into the annulus.

 Saltwater produced from this well and the following wells is being put into the annulus;

<u>Permit No.</u>	<u>Lease Name/Well No.</u>
_____	_____
_____	_____
_____	_____
_____	_____

(Continue on reverse side if necessary.)

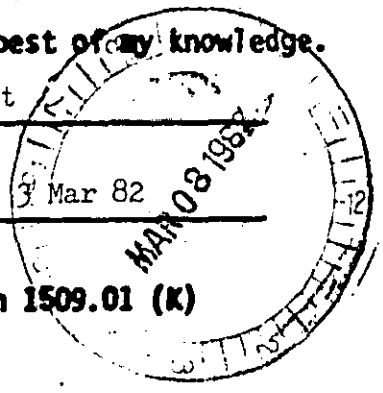
B COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS NOT BEING USED FOR THE DISPOSAL OF SALTWATER.

Brine from this well is being disposed of in the following manner:

 dust and ice control
 annulus of another well; Permit No. _____ Lease Name _____
 saltwater disposal well; Permit No. _____ County _____
 other (specify) _____

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

John Altier	President
Name (Print or Type)	Title
<u>John Altier</u>	<u>3 Mar 82</u>
Signature	Date



The above signature must be the owner as specified in Section 1509.01 (K) of the revised code, or an authorized agent.

REC'D OIL AND GAS
FEB 28 12:38

OPERATOR QUESTIONNAIRE FOR ANNULAR DISPOSAL WELLS

Permit No.: 3204 County: Perry Township: Harrison

Lease and Well No.: Rambo #2 Sec. or Lot: Sec. 31

Operator: John F. Altier, Sr. Phone No.: _____

Address: Box 415

CORNING, OHIO 43730

- 1. What is the current status of the well: a) not yet drilled _____
 b) drilled and operational X c) drilled and not operational _____
 d) plugged and abandoned _____

- 2. Is the annulus presently equipped and being used for salt water disposal?

Yes X No _____ strictly a gas well

If NO, and annulus is not being used for salt water disposal, answer a and b below and sign the questionnaire on the reverse side.

- a) What means of brine disposal is presently being used for this well?

make no salt water!

- b) If trucked, give name and address of hauling company:

If YES, and annulus is being used for salt water disposal, answer all of the following questions (if information is not available give best estimate) and sign the questionnaire on the reverse side.

- 3. Date well completed: _____ Date injection began: _____

- 4. Receiving formation: _____ Injection depths from: _____ to: _____

- 5. Type of tool used:

- a) Cable: _____
 1) Was surface casing power mudded down casing and up around annulus? _____
 2) Was mud placed or pumped down annulus at surface? _____

- b) Air Rotary: _____

- c) Fluid Rotary:
 1) Mud _____ 2) Water _____
 If mud rotary, what attempt, if any, was made to treat the formation face to facilitate injection? _____

- 6. Well Design and Construction:

- a) Type and amount of casing, tubing, cementing and mudding:

1) Drive pipe _____

2) Surface casing _____

3) Intermediate string _____

4) Long string _____

5) Tubing _____

- b) Indicate the cement top of the long string: _____

Is the top: 1) a calculated cement top: _____

2) a cement bond log top: _____

- c) What is the total amount of open annulus used for injection? _____
- d) Is annulus at well head: 1) vented _____ 2) completely airtight _____
- e) Is the disposal system airtight from the production line to the well head?
Yes _____ No _____

7. Description of Surface Equipment:

- a) How is water stored?
 - 1) Tanks _____
 - 2) Surface Pits _____
 - 3) Direct line from separator _____
 - 4) Other _____
- b) Is water allowed to settle before injection? Yes _____ No _____
- c) Are any filters being used? Yes _____ No _____ Type _____
- d) Is system gravity fed? _____ Or pumped? _____
If pumped, give type of pump _____
Maximum Injection Pressure _____ Average Injection Pressure _____

8. What is the estimated volume of salt water injected per day? _____

9. What is the total estimated volume of salt water injected through 1979? _____

10. Is this well being used for the disposal of salt water for more than one well?
Yes _____ No _____
If yes, list the permit numbers of these wells: _____

In what manner is the salt water transported? 1) Trucked _____
2) Pipeline _____ 3) Other _____

11. Who may we contact for future correspondence regarding this well?
Name: _____ Telephone Number: _____

I certify that the answers to the above questions are true and correct to the best of my knowledge. I further understand that if the annulus is not currently equipped and being used for disposal of salt water, a letter requesting permission to use annular disposal for this well must be submitted to the Division for approval.

Date: 4-8-80

Owner [Signature]

Per [Signature]
(Signature of Owner) Title

or Per _____
(Signature of Authorized Agent)

The above signature must be the owner as specified in Section 1509.01 (K) of the Ohio Revised Code or an authorized agent. If an authorized agent's signature is used a certified copy of appointment of agent must be attached.

If you have any questions concerning the inventory or if you feel more time is needed to complete the questionnaire(s), please contact the UIC Section of the Division of Oil and Gas at (614) 466-1067.

ANNULAR DISPOSAL WELL REPORTING SHEET

OPERATOR: JOHN F. ALTIER, SR.

Permit No. 3204

County Perry

Township Harrison

Phone No. () _____

Lease Name Rambo #2

The above captioned well is on the Division's list of active annular disposal wells. Complete Section A of this report if the annulus of this well is being used for the disposal of saltwater. If the annulus is not being used for disposal, complete Section B. Sign and return this form to the above address. If you operate any annular disposal well(s) for which a form is not enclosed, notify the UIC Section of the Division. In accordance with paragraph (E)(3) of Rule 1501:9-3-11 of the Ohio Administrative Code, this annual report must be submitted to the Division on or before the first day of March each year.

A. COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS BEING USED FOR THE DISPOSAL OF SALTWATER.

Give the following information for the period beginning January 1 and ending December 31:

Total amount of saltwater put into the annulus; 0 bbls/year

Maximum injection pressure; _____ psi

Average injection pressure; _____ psi

Check one:

Only saltwater produced from this well is being put into the annulus.

Saltwater produced from this well and the following wells is being put into the annulus;

Permit No.

Lease Name/Well No.

Submitted / declared inactive

(Continue on reverse side if necessary.)

B. COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS NOT BEING USED FOR THE DISPOSAL OF SALTWATER.

Brine from this well is being disposed of in the following manner:

dust and ice control

annulus of another well; Permit No. _____ Lease Name _____

saltwater disposal well; Permit No. _____ County _____

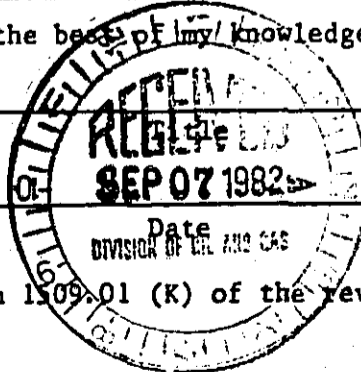
other (specify) _____

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

Name (Print or Type) _____

Signature _____

The above signature must be the owner as specified in Section 1509.01 (K) of the revised code, or an authorized agent.



MAR 5 1983

ANNULAR DISPOSAL WELL REPORTING SHEET

OPERATOR:
Altheirs Oil Incorporated
P. O. Box 415
Corning, Ohio 43730

Permit No. 3204
County Perry
Township Harrison
Lease Name Rambo #2

Phone No. (614) 347-4320

The above captioned well is on the Division's list of active annular disposal wells. Complete Section A of this report if the annulus of this well is being used for the disposal of saltwater. If the annulus is not being used for disposal, complete Section B. Sign and return this form to the above address. If you operate any annular disposal well(s) for which a form is not enclosed, notify the UIC Section of the Division. In accordance with paragraph (E)(3) of Rule 1501:9-3-11 of the Ohio Administrative Code, this annual report must be submitted to the Division on or before the first day of March each year.

A. COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS BEING USED FOR THE DISPOSAL OF SALTWATER.

Give the following information for the period beginning January 1 and ending December 31:

Total amount of saltwater put into the annulus; 0 bbls/year
Maximum injection pressure; 15 psi
Average injection pressure; 15 psi

Check one:

Only saltwater produced from this well is being put into the annulus.

Saltwater produced from this well and the following wells is being put into the annulus;

<u>Permit No.</u>	<u>Lease Name/Well No.</u>

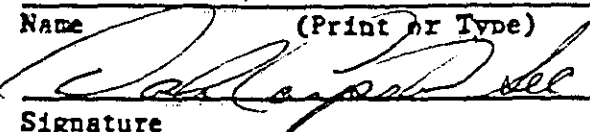
(Continue on reverse side if necessary.)

B. COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS NOT BEING USED FOR THE DISPOSAL OF SALTWATER.

Brine from this well is being disposed of in the following manner:

dust and ice control
 annulus of another well; Permit No. _____ Lease Name _____
 saltwater disposal well; Permit No. _____ County _____
 other (specify) _____

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

John Altier, Sr.	President, Altheirs Oil Incorporated
Name (Print or Type)	Title
	22 February 1983
Signature	Date

The above signature must be the owner as specified in Section 1509.01 (K) of the revised code, or an authorized agent.

REQUEST FOR CHANGE OF OWNER
OHIO DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL AND GAS

1. Date of Application: _____		FORM 7: Revised 06/01/81
2. Check Type of Request If Individual Transfer indicate API number: 34 _____ <u>3202</u> ** 14 <input checked="" type="checkbox"/> If Multiple Transfer list all API numbers and complete data on back of form.		
3. I, We (Assignor/Transferor) Owner# _____, hereby request that records on file with the Division of Oil and Gas, Department of Natural Resources, State of Ohio, be amended to reflect the Change of Owner of the oil and/or gas well described in #7 through #19.	7. COUNTY: <u>Perry</u> 8. CIVIL TOWNSHIP: _____ 9. WELL #: _____ 10. LEASE NAME: _____ 11. VOLUME: _____ 12. PAGE#: _____ Indicate volume # and first page # of lease as recorded in County Recorder's Office. 13. MICROFICHE#: _____ 14. SECTION: _____ 15. LOT: _____ 16. FRACTION: _____ 17. QTR TWP: _____ 18. TRACT/ALLOT: _____ 19. FOOTAGE: _____ 20. STATUS: _____ <input type="checkbox"/> Producing <input type="checkbox"/> Non-Producing IF WELL HAS NOT BEEN SPUDDED, IT CANNOT BE TRANSFERRED	
4. Assignor Address & Telephone Number: _____	21. DATE OF ASSIGNMENT TO ASSIGNEE/TRANSFeree _____ 19 ____.	
5. Assignee/Transferee: Owner# _____		
6. Assignee Address & Telephone Number: _____		

THIS REQUEST MUST BE ACCOMPANIED BY A TRUE COPY OF THE ASSIGNMENT OF LEASE OR THE BILL OF SALE

ASSIGNOR/TRANSFEROR:

I, the undersigned, hereby agree to furnish any and all records and reports required by the Division of Oil and Gas for compliance with Chapter 1509, Ohio Revised Code, and all rules of that Division for the period ending on the date of assignment. Furthermore, I hereby depose and state that all holders of royalty interests that are affected by this assignment or transfer, will be properly notified in conformance with Section 1509.31 O. R. C. It is understood that my liabilities for this well will not be terminated until I comply with the above.

John Altier Sr
(Signature of Assignor/Transferor)

ASSIGNOR/TRANSFEROR: John ALTIER, SR
(Printed or Typed)

STATE OF Ohio COUNTY OF Perry: John Altier Sr. being first duly sworn by me, says that the information set forth herein is true and accurate.

SWORN TO AND SUBSCRIBED BEFORE ME THIS 22nd DAY OF June 1981
Lahoma Jenkins
(SEAL) Notary Public, Perry County, Ohio
My Commission Expires 8/5 1984
(Notary Public)

ASSIGNEE/TRANSFeree:

I, the undersigned, depose and state that I am the owner of aforementioned oil and/or gas well and that I have the right to appropriate the oil or gas that I produce therefrom either for myself or for others. I further depose and state that I shall comply with the assignor/transferor's Restoration Plan and Saltwater Disposal Plan or that I shall submit a new Restoration Plan and Saltwater Disposal Plan to be approved by the Division. Further it is understood that upon proper completion of this form, I will become the "owner" as defined under Chapter 1509, O. R. C. and must comply with all laws, rules and orders by the Chief.

John Altier Sr
(Signature of Assignee/Transferee)

ASSIGNEE/TRANSFeree: ALTHEIRS OIL, INC
(Printed or Typed)

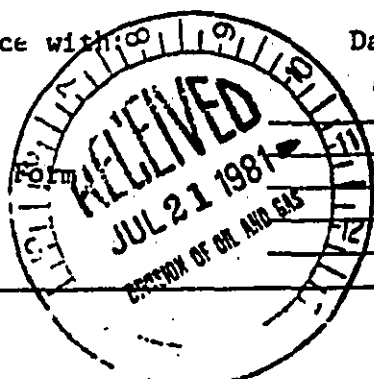
STATE OF Ohio COUNTY OF Perry: John Altier Sr, Altheirs Oil, Inc being first duly sworn by me, says that the information set forth herein is true and accurate.

SWORN TO AND SUBSCRIBED BEFORE ME THIS 22nd DAY OF June 1981
Lahoma Jenkins
(SEAL) Notary Public, Perry County, Ohio
My Commission Expires 8/5 1984
(Notary Public)

DIVISION USE ONLY

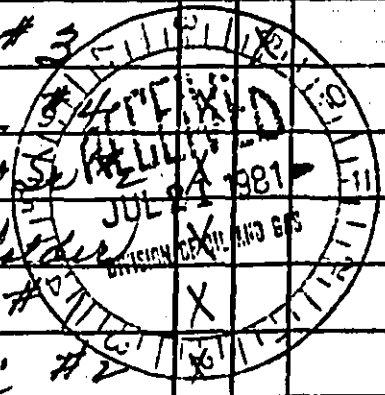
Assignee/Transferee is in compliance with: _____ Date 7/30/81

Bond Requirements
 Geophysical Log
 Organization & Authorization Form
 Well Completion Record
 Statement of Production



Indicate under the status column whether the wells listed are producing or non-producing.

API #	COUNTY	TOWNSHIP	VOLUME #	PAGE #	MICROFICHE	WELL #/ LEASE NAME	STATUS		ASSIGNMENT DATE
							PROD.	NON- PROD.	
1728	Athens	Lodi				R. Guthrie #1	X		
3170	Perry	Harrison				Rambo, Pelland	X		
3196	Perry	Monroe				Sunday Creek Coal #2	X		
156	Dalla	Addison				Chester Hudson #1	X		f
3204	Perry	Harrison				Rambo, Pelland	X		
3235	"	Monroe				J. Benedict (p.) #2	X		
3194	"	Monday Creek				V.R. Ricketts	X		
2661	"	Pleasant				R. Bragg #1	X	X	
3252	"	Pike				Ludowici #1	X		
3246*	"						X		
3292	Muskogean	Cass				E.W. McCauley		X	
1322	Morgan	Deerfield				R. Masterson	X		
3290	Perry	Monday Creek				McDaniel, C.	X		
3302	"	Harrison				S. Baker	X		
3303	"	Monroe				N. Coche	X		
3241	"	Monroe				W. Hinkle	X		
3312	"	Coal				J. Banks Co #2	X		
3318	"	Pike				E. Newlon 2A	X		
3319*	"	Reading				E. Miller #1		X	
3327	"	Pike				St. Al #2 (Buffalo Academy)	X		
3319*	"								
3346*	"	Monday Creek				W. Ricketts #2	X		
3347	"	Monday Creek				W. Ricketts #1	X		
3352	"	Harrison				J. Frame #1		X	
3350	"	Coal				Sunday Creek Coal #2	X		
3351	"	Coal				Sunday Creek Coal #1	X		
3359	"	Monroe				N. Coche #3			
3360	"	Pike				J. Johnson			
3361	"	Monroe				J. Benedict			
3373	"	Jackson				A.L. Haushalter			
3376	"	Reading				J. Miller #1	X		
3377	"	Pike				Ludowici #2			
3453	"	Monroe				J. O'Farrell #3		X	
3459	"	Coal				Sunday Creek Coal #3	X		
3465	"	Jackson				A.L. Haushalter #2	X		



ANNULAR DISPOSAL WELL INVESTIGATION SHEET

State ✓

OHIO DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL AND GAS - INTERNAL FORM

PERMIT NO. 3204

DATE: _____

COUNTY: Lenny

TOWNSHIP: Harrison

LEASE NAME & NO: Kellandumbo #2

SECTION/LOT 31

OWNER/OPERATOR John H. Patton, Jr.

A.D. NUMBER _____ YES _____ NO _____

ANNULAR DISPOSAL _____

AIRTIGHT _____

ACCESSIBLE AT SURFACE _____

WELL I.D. DISPLAYED _____

REMEDY Gas only

SIGNATURE: John H. Patton, Jr.

FORWARDED TO REGION OFFICE FOR FURTHER INVESTIGATION _____ DATE _____

TYPE OF VIOLATION(S) _____

DETAILED EXPLANATION: _____

DIRECTION TO LOCATION _____

REPORT SUBMITTED BY REGION OFFICE ON _____

ANNULAR DISPOSAL WELL REPORTING SHEET

OPERATOR: John F. Altier, Sr.
P. O. Box 415
Corning, Ohio 43730

Permit No. 3204
County Perry
Township Harrison
Lease Name Rainbow #2

Phone No. (614) 387-4329

The well captioned above is on the Division's list of active annular disposal wells. Complete Section A of this report if the annulus of this well is being used for the disposal of saltwater. If the annulus is not being used for disposal, complete Section B. Sign and return this form to the above address. If you operate any annular disposal well(s) for which a form is not enclosed, notify the UIC Section of the Division. In accordance with Section 1501:9-3-07(D) of the Rules and Regulations of the Division of Oil and Gas, this report must be submitted to the Division before ~~March 1, 1982~~ April 1, 1982.

A COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS BEING USED FOR THE DISPOSAL OF SALTWATER.

Give the following information for the period beginning January 1, 1981, and ending December 31, 1981:

Total amount of saltwater put into the annulus; 0 bbls/year
Maximum injection pressure; 0 psi
Average injection pressure; 0 psi

Check one:

Only saltwater produced from this well is being put into the annulus.

Saltwater produced from this well and the following wells is being put into the annulus;

Permit No.	Lease Name/Well No.

(Continue on reverse side if necessary.)

B COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS NOT BEING USED FOR THE DISPOSAL OF SALTWATER.

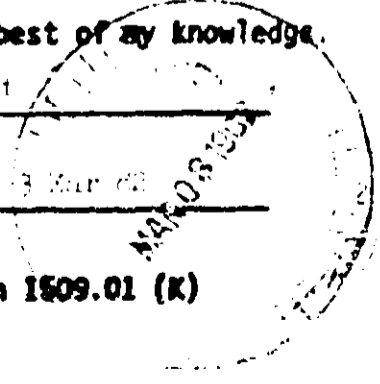
Brine from this well is being disposed of in the following manner:

dust and ice control
 annulus of another well; Permit No. _____ Lease Name _____
 saltwater disposal well; Permit No. _____ County _____
 other (specify) _____

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

Name John Altier Title President
(Print or type) _____
Signature _____ Date 3 Mar 82

The above signature must be the owner as specified in Section 1509.01 (K) of the revised code, or an authorized agent.



OPERATOR QUESTIONNAIRE FOR ANNULAR DISPOSAL WELLS

Permit No.: 3204 County: Perry Township: Harrison

Lease and Well No.: Rambo #2 Sec. or Lot: Sec. 31

Operator: John F. Altier, Sr. Phone No.: _____

Address: Box 415
Loaning, Ohio 43730

- 1. What is the current status of the well: a) not yet drilled _____
- b) drilled and operational X c) drilled and not operational _____
- d) plugged and abandoned _____

- 2. Is the annulus presently equipped and being used for salt water disposal?
Yes X No _____ strictly a gas well

If NO, and annulus is not being used for salt water disposal, answer a and b below and sign the questionnaire on the reverse side.

- a) What means of brine disposal is presently being used for this well?

make no salt water!

- b) If trucked, give name and address of hauling company:

If YES, and annulus is being used for salt water disposal, answer all of the following questions (if information is not available give best estimate) and sign the questionnaire on the reverse side.

3. Date well completed: _____ Date injection began: _____

4. Receiving formation: _____ Injection depths from _____ to: _____

5. Type of tool used:

- a) Cable: _____
- 1) Was surface casing power mudded down casing and up around annulus? _____
- 2) Was mud placed or pumped down annulus at surface? _____

b) Air rotary: _____

c) Fluid Rotary:

- 1) Mud _____ 2) Water _____
- If mud rotary, what attempt, if any, was made to treat the formation face to facilitate injection? _____

6. Well Design and Construction:

- a) Type and amount of casing, tubing, cementing and mudding:

- 1) Drive pipe _____
- 2) Surface casing _____
- 3) Intermediate string _____
- 4) Long string _____
- 5) Tubing _____

- b) Indicate the cement top of the long string: _____
- Is the top: 1) a calculated cement top: _____
- 2) a cement bond log top: _____

- c) What is the total amount of open annulus used for injection? _____
- d) Is annulus at well head: 1) vented _____ 2) completely airtight _____
- e) Is the disposal system airtight from the production line to the well head?
Yes _____ No _____

7. Description of Surface Equipment:

- a) How is water stored:
 - 1) Tanks _____
 - 2) Surface Pits _____
 - 3) Direct line from separator _____
 - 4) Other _____
- b) Is water allowed to settle before injection? Yes _____ No _____
- c) Are any filters being used? Yes _____ No _____ Type _____
- d) Is system gravity fed? _____ Or pumped? _____
If pumped, give type of pump _____
Maximum Injection Pressure _____ Average Injection Pressure _____

8. What is the estimated volume of salt water injected per day? _____

9. What is the total estimated volume of salt water injected through 1979? _____

10. Is this well being used for the disposal of salt water for more than one well?
Yes _____ No _____
If yes, list the permit numbers of these wells: _____

In what manner is the salt water transported? 1) Trucked _____
2) Pipeline _____ 3) Other _____

11. Who may we contact for future correspondence regarding this well?
Name: _____ Telephone Number: _____

I certify that the answers to the above questions are true and correct to the best of my knowledge. I further understand that if the annulus is not currently equipped and being used for disposal of salt water, a letter requesting permission to use annular disposal for this well must be submitted to the Division for approval.

Date: 4-8-80

Owner: [Signature]

Per: [Signature]
(Signature of Owner) Title

or Per: _____
(Signature of Authorized Agent)

The above signature must be the owner as specified in Section 1509.01 (K) of the Ohio Revised Code or an authorized agent. If an authorized agent's signature is used a certified copy of appointment of agent must be attached.

If you have any questions concerning the inventory or if you feel more time is needed to complete the questionnaire(s), please contact the UIC Section of the Division of Oil and Gas at (614) 466-1067.

ANNULAR DISPOSAL WELL REPORTING SHEET

OPERATOR: JOHN F. ALTIER, SR.

Permit No. 3284

County Perry

Township Harrison

Phone No. ()

Lease Name Rambo #2

The above captioned well is on the Division's list of active annular disposal wells. Complete Section A of this report if the annulus of this well is being used for the disposal of saltwater. If the annulus is not being used for disposal, complete Section B. Sign and return this form to the above address. If you operate any annular disposal well(s) for which a form is not enclosed, notify the UIC Section of the Division. In accordance with paragraph (E)(3) of Rule 1501:9-3-11 of the Ohio Administrative Code, this annual report must be submitted to the Division on or before the first day of March each year.

A. COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS BEING USED FOR THE DISPOSAL OF SALTWATER.

Give the following information for the period beginning January 1 and ending December 31:

Total amount of saltwater put into the annulus; 0 bbls/year

Maximum injection pressure; _____ psi

Average injection pressure; _____ psi

Check one:

Only saltwater produced from this well is being put into the annulus.

Saltwater produced from this well and the following wells is being put into the annulus;

Permit No.

Lease Name/Well No.

Submitted / declared inactive

(Continue on reverse side if necessary.)

B. COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS NOT BEING USED FOR THE DISPOSAL OF SALTWATER.

Brine from this well is being disposed of in the following manner:

dust and ice control

annulus of another well; Permit No. _____ Lease Name _____

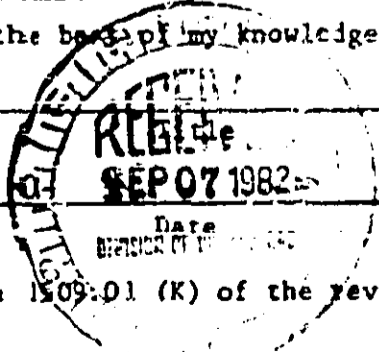
saltwater disposal well; Permit No. _____ County _____

other (specify) _____

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

Name (Print or Type) _____

Signature _____



The above signature must be the owner as specified in Section 1509:01 (K) of the revised code, or an authorized agent.

ANNULAR DISPOSAL WELL REPORTING SHEET

OPERATOR:

Altheirs Oil Incorporated
P. O. Box 415
Corning, Ohio 43730

Permit No. 3204

County Perry

Township Harrison

Lease Name Rambo #2

Phone No. (614) 347-4329

The above captioned well is on the Division's list of active annular disposal wells. Complete Section A of this report if the annulus of this well is being used for the disposal of saltwater. If the annulus is not being used for disposal, complete Section B. Sign and return this form to the above address. If you operate any annular disposal well(s) for which a form is not enclosed, notify the UIC Section of the Division. In accordance with paragraph (E)(3) of Rule 1501:9-3-11 of the Ohio Administrative Code, this annual report must be submitted to the Division on or before the first day of March each year.

A. COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS BEING USED FOR THE DISPOSAL OF SALTWATER.

Give the following information for the period beginning January 1 and ending December 31:

Total amount of saltwater put into the annulus; 0 bbls/year

Maximum injection pressure; 15 psi

Average injection pressure; 15 psi

Check one:

Only saltwater produced from this well is being put into the annulus.

Saltwater produced from this well and the following wells is being put into the annulus;

Permit No.

Lease Name/Well No.

(Continue on reverse side if necessary.)

B. COMPLETE THIS SECTION IF THE ANNULUS OF THIS WELL IS NOT BEING USED FOR THE DISPOSAL OF SALTWATER.

Brine from this well is being disposed of in the following manner:

dust and ice control

annulus of another well; Permit No. _____ Lease Name _____

saltwater disposal well; Permit No. _____ County _____

other (specify) _____

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

John Altier, Sr. President, Altheirs Oil Incorporated
Name (Print or Type) Title

[Signature] 22 February 1983
Signature Date

The above signature must be the owner as specified in Section 1509.01 (E) of the revised code, or an authorized agent.