ILLINOIS DEPARTMENT OF NATURAL RESOURCES
Office of Oil and Gas

One Natural Resources Way
Springfield, Illinois 62702-1271

(217) 557-6379

OG-5 WELL DRILLING REPORT

Type of Well: □ Oil Producer □ Observation □ Gas Producer □ Gas Storage □ Class II Injection □ D&A □ Water Supply □ Other □ New Well □ Conversion □ DOPH □ Deepening □ Workover

Permittee: _____________________________________Permittee #_____________

Well Name:  _________________________________Permit # ___________

Location: _______________________________________________ API No. ________________

County: ____________________________ Section: __________ Township: __________ Range: __________

Drilling Data:

Date Drilling Began: ________________ Finished: ________________ T.D. __________

Elevation: KB: __________ DF: __________ GR __________

Air Rotary: From: ______ To: ______ Cable: From: ______ To: ______

Were Electric or other wireline logs run? □ YES □ NO Type of Logs: _____________________________

Was well cored? □ YES □ NO Interval(s) cored: ____________________________________________

Drill Stem test run? □ YES □ NO Zone(s) Tested: ____________________________________________

Attach a copy of drill stem test results

Test Data:

Were Electric or other wireline logs run? □ YES □ NO Type of Logs: _____________________________

Was well cored? □ YES □ NO Interval(s) cored: ____________________________________________

Drill Stem test run? □ YES □ NO Zone(s) Tested: ____________________________________________

Attach a copy of drill stem test results

Geological Data: (Fill out or attach copy of geologists report)

<table>
<thead>
<tr>
<th>FORMATION (AND RESERVOIR*)</th>
<th>DEPTH</th>
<th>FORMATION (AND RESERVOIR*) DETERMINED BY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Top</td>
<td>Bottom</td>
<td>□ Samples</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ Geophysical Log</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ Other:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>List any oil and gas shows: (Give depth):</td>
</tr>
</tbody>
</table>

* If Reservoir is different than Formation, also include the Reservoir name in parentheses.

Signature of Permittee or Designee

__________________________________________

Address

__________________________________________

City, State, Zip

This state agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined in the Ill. Compiled Stat. Ch. 225, pars. 725 et. seq. Failure to disclose this information will result in this form not being processed. This form has been approved by the Forms Management Center.

IL472-0279