## Affidavit of Personal Service

State Of
County Of
The undersigned, being first duly sworn, says that the undersigned served a true and complete copy of all sides of
(1) Notice on Form WW-2(A)/ WW-3(A)/ WW-4(A)/ WW-5(A)/ WW-6(A) (2) Application on Form WW-2(B)/ WW-3(B)/ WW-4(B)/ WW-5(B)/ WW-6(B) (3) Plat showing the well location on Form WW-6, and (4) Construction and Reclamation Plan on Form WW-9
all with respect to operator's Well Nolocated in District,County, West Virginia, upon the person or organization named
by delivering the same inCounty, State of
by delivering the same inCounty, State of on theday of, 20 in the manner specified below.
[COMPLETE THE APPROPRIATE SECTION]
For an individual:  [ ] Handing it to him/ her/ or, because he/ she/ refused to take it whe offered it, by leaving it in his/ her/ presence.  [ ] Handing it to a member of his or her family above the age of 16 years named who resides at the usual place of abode of the person to be served, and asking the family member to give it to the person to be served as soon as possible.
For a partnership:  [ ] Handing it to
For a limited partnership:  [ ] Handing it to the general partner, named, or, because the general partner refused to take it when I tried to hand it over, by leaving it in the presence of the general partner.
For a corporation:  [ ] Handing it to the corporation's employee/ officer/ director/ attorney in fact/ named
(Signature of person executing service)
Taken, subscribed and sworn before me thisday of20  My commission expires
Notary Public

(AFFIX SEAL IF NOTARIZED OUTSIDE THE STATE)