

BEFORE THE VIRGINIA GAS AND OIL BOARD

PETITIONER: EQT Production Company

DIVISION OF GAS AND OIL

DOCKET NO: VGOB 93-0316-0343-03

RELIEF SOUGHT: (1) DISBURSEMENT FROM
ESCROW REGARDING TRACT(S) 2, 4
(2) AND AUTHORIZATION FOR DIRECT
PAYMENT OF ROYALTIES

HEARING DATE: March 18, 2014

DRILLING UNIT: VC-702846

DICKENSON COUNTY, VIRGINIA

PETITION FOR ORDER OF DISBURSEMENT OF ESCROW FUNDS

1. Petitioner and its counsel

Petitioner is EQT Production Company, 225 North Shore Drive, Pittsburgh, PA 15212, (412)553-5700. Petitioner's counsel is James Kaiser, Wilhoit and Kaiser Law Firm, 220 Broad Street, Suite 210, Kingsport, TN 37660 .

2. Relief Sought

Petition for the disbursement of funds and authorization for direct payment on behalf of the known owners on tracts 1, 2, 3 and 4 in Well VC-702846. VGOB 93/03/16-0343.

3. Legal Authority

Va. Code Ann. § 45.1-361.1 et seq., 4 VAC 25-160-140., and relevant Virginia Gas and Oil Board Orders ("Board") heretofore promulgated pursuant to law.

4. Type of Well(s)

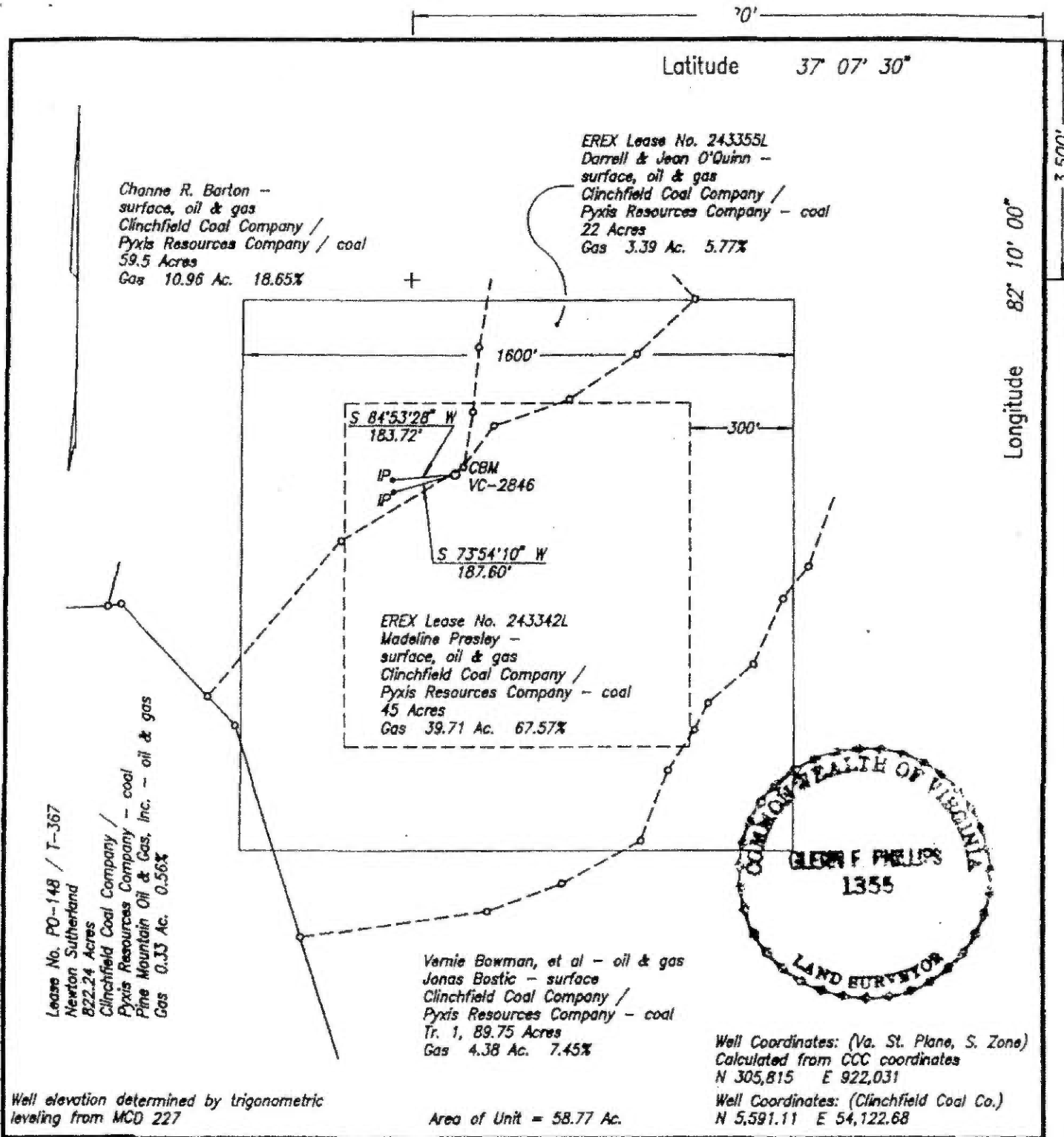
Coalbed Methane

5. Factual basis for relief requested

Range Resources-Pine Mountain, Inc was a conflicting claimant with the Plaintiffs with regard to Tracts 2 and 4 as created by Board Order 93/03/16-0343, Well VC-2846. To resolve this conflict, a letter dated January 14, 2014 and signed by Phil Horn, Land Manager Range Resources-Pine Mountain Inc. is attached hereto.

6. Attestation

The foregoing Petition to the best of my knowledge, information, and belief is true and correct.



WELL LOCATION PLAT

COMPANY Equitable Resources Exploration WELL NAME AND NUMBER VC-2846
TRACT NO. 243342L ELEVATION 2137.44 QUADRANGLE Duty
COUNTY Dickenson DISTRICT Ervinton SCALE 1" = 400' DATE 2-6-1993

This Plat is a new plat X; an updated plat ; or a final location plat

+ Denotes the location of a well on United States topographic Maps, scale 1 to 24,000, latitude and longitude lines being represented by border lines as shown.

Glen F. Phillips

Licensed Professional Engineer or Licensed Land Surveyor

4 Tract 4 (total acreage)

4.38

13	4	Angela Divi Bowman Burress\152 Basham Hill Road; Bristol; TN 37620		0.1217	100.00%	0.1217	0.7934%	\$209.18
14	4	Range Resources-Pine Mountain; Inc\Attn: Jerry Grantham; PO Box 2136; Abingdon; VA 24212		0.0000	100.00%	0.0000	0.0000%	\$0.00

Wells contributing to the escrow account: VC-2846

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<u>TRACT</u>	<u>LESSOR</u>	<u>LEASE STATUS</u>	<u>INTEREST WITHIN UNIT</u>	<u>GROSS ACREAGE IN UNIT</u>	<u>NET REVENUE INTEREST</u>	
<u>GAS ESTATE ONLY</u>						
1 Minerals Only	Harold Presley P.O. Box 442 Davenport, VA 24239	Leased - EQT 243342L-01	67.5700%	39.7100	0.08446250	RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.11824750	WI
	Equitable Production Company				0.47299000	WI
Tract 1 Totals			67.5700%	39.7100	0.67570000	
2 TAX ID 2068	Peggy R Barton, widow P.O. Box 51 Haysi, VA 24256	Unleased	11.1360%	6.5760	0.01392000	RI
	Steve Barton P.O. Box 234 Haysi, VA 24256	Unleased	1.8560%	1.0960	0.00232000	
	Chandra Cheryl Bostic & Kenny Bostic w/h HC 4, Box 278 Bee, VA 24217	Unleased	1.8560%	1.0960	0.00232000	
	Ricky Lane Barton & Pam Agnus Barton h/w Box 242 Mack's Hollow Haysi, VA 24256	Unleased	1.8560%	1.0960	0.00232000	
	Terry Lorenzen Barton & Barbara Gayle Barton h/w P.O. Box 499 Haysi, VA 24256	Unleased 6.576	1.8560%	1.0960	0.00232000	
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.03263750	WI
	Equitable Production Company				0.13055000	WI
Tract 2 Totals			18.5600%	10.9600	0.18638750	
3 TAX ID 3042	Darrell O'Quinn Jean O'Quinn h/w 8696 Sandlick Road Bee, VA 24217	Leased - EQT 243355L-01	5.7700%	3.3900	0.00721250	RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.01009750	WI
	Equitable Production Company				0.04039000	WI
Tract 3 Totals			5.7700%	3.3900	0.05770000	

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4 Minerals Only	<u>Vernie Bowman Heirs:</u>				RI
	Bonnie B. Kiser c/o Dennis R. Owens-A-I-F P.O. Box 577 Bristol, TN 37621-0577	Leased - EQT 244409L-03	1.2417%	0.7300	0.00155208 RI
	<u>Eugene W. and Jean O. Bowman Heirs:</u>				
	Vicki Nichols 617 Robin Hood Court Clyde, TX 79510-3955	Leased - EQT 244409L-05	0.4139%	0.2433	0.00051736 RI
	Kimberley Maynard 42 Briarfield Rd Scottsville, KY 42164	Leased - EQT 244409L-05	0.2069%	0.1217	0.00025868 RI
	Christopher M. Bowman P.O. Box 803 Chaptico, MD 20621-0803	Leased - EQT 244409L-05	0.2069%	0.1217	0.00025868 RI
	Sheilah Ginger Christensen 523 Ross Road SE Lancaster, OH 43130-9655	Leased - EQT 244409L-05	0.4139%	0.2433	0.00051736 RI
	Mabel A and Phillip E Taylor 3090 Patch Drive Bloomfield Hills, MI 48304	Leased - EQT 244409L-04	1.2400%	0.7300	0.00155000 RI
	<u>Elmer L Bowman Heirs:</u>				
	Tanis L. Bowman 1125 Sharon Avenue Kettering, OH 45429-3623	Leased - EQT 244409L-06	1.2400%	0.7300	0.00155000 RI
	<u>Zinnia L and James T Combs Heirs:</u>				
	James K. Combs 7905 Seminole BLvd. #3101 Seminole, FL 33772	Leased - EQT 244409L-01	0.6208%	0.3650	0.00077604 RI
	Linda C. Kirby 160 Cardigan Road Centerville, OH 45459	Leased - EQT 244409L-01	0.6208%	0.3650	0.00077604 RI
	<u>Edwin G. and Janice Bowman Heirs:</u>				
	Pamela B. Pinkerton 440 Brookwood Dr. Bristol, TN 37620	Leased - EQT 244409L-02	0.4139%	0.2433	0.00051736 RI
	Stanley Keith Bowman 324 Upland Way Bristol, TN 37620	Leased - EQT 244409L-02	0.4139%	0.2433	0.00051736 RI
	Dwight Evans Bowman Heirs: Jeffery Brian Bowman 125 Gauge St. Bristol, VA 24201	Leased - EQT 244409L-02	0.2069%	0.1217	0.00025868 RI
	Angela Divi Bowman Burress 152 Basham Hill Road	Leased - EQT 244409L-02	0.2069%	0.1217	0.00025868 RI

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	Bristol, TN 37620				
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.01303750 WI
	Equitable Production Company				0.05215000 WI
Tract 4 Totals			7.4467%	4.3800	0.07449583
5 Tax ID 20546	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212	Leased - EQT 241490L-01 T-367	0.5600%	0.3300	0.00070000 RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.00098000 WI
	Equitable Production Company				0.00392000 WI
			0.5600%	0.3300	0.00560000
		Total Gas Estate	99.9067%	58.7700	0.99988333
<u>COAL ESTATE ONLY</u>					
1 Tax ID 14325 & 12078	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212	Leased - EQT T2(C) 242	67.5700%	39.7100	0.08446250 RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.11824750 WI
	Equitable Production Company				0.47299000 WI
Tract 1 Totals			67.5700%	39.7100	0.67570000
2	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212	Leased - EQT T2(C) 242	18.6500%	10.9600	0.02331250 RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.03263750 WI
	Equitable Production Company				0.13055000 WI
Tract 2 Totals			18.6500%	10.9600	0.18650000
3	Range Resources-Pine Mountain, Inc*	Leased - EQT	5.7700%	3.3900	0.00721250 RI

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	Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212	T2(C) 242			
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.01009750 WI
	Equitable Production Company				0.04039000 WI
Tract 3 Totals			5.7700%	3.3900	0.05770000
4	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212	Leased - EQT T2(C) 242	7.4500%	4.3800	0.00931250 RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.01303750 WI
	Equitable Production Company				0.05215000 WI
			7.4500%	4.3800	0.07450000
5	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212	Leased - EQT T2(C) 242	0.5600%	0.3300	0.00070000 RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.00098000 WI
	Equitable Production Company				0.00392000 WI
			0.5600%	0.3300	0.00560000
		Total Coal Estate	100.0000%	58.7700	1.00000000

*Formerly:
 Pine Mountain Oil & Gas, Inc.
 ATTN: Jerry Grantham
 P.O. Box 2136
 Abingdon, VA. 24212

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<u>GAS ESTATE ONLY</u>						
1 TAX ID 3541, 3538, 3539 & 3540	Harold Presley P.O. Box 442 Davenport, VA 24239	Leased - EQT 243342L-01	67.5700%	39.7100	0.08446250	RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.11824750	WI
	Equitable Production Company				0.47299000	WI
Tract 1 Totals			<u>67.5700%</u>	<u>39.7100</u>	<u>0.67570000</u>	
2 TAX ID 2068	Peggy R Barton, widow P.O. Box 51 Haysi, VA 24256	Unleased	11.1360%	6.5760	0.01392000	RI
	Steve Barton P.O. Box 234 Haysi, VA 24256	Unleased	1.8560%	1.0960	0.00232000	
	Chandra Cheryl Bostic & Kenny Bostic w/h HC 4, Box 278 Bee, VA 24217	Unleased	1.8560%	1.0960	0.00232000	
	Ricky Lane Barton & Pam Agnus Barton h/w Box 242 Mack's Hollow Haysi, VA 24256	Unleased	1.8560%	1.0960	0.00232000	
	Terry Lorenzen Barton & Barbara Gayle Barton h/w P.O. Box 499 Haysi, VA 24256	Unleased 6.576	1.8560%	1.0960	0.00232000	
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212					0.03263750
Equitable Production Company					0.13055000	WI
Tract 2 Totals			<u>18.5600%</u>	<u>10.9600</u>	<u>0.18638750</u>	
3 TAX ID 3042	Darrell O'Quinn Jean O'Quinn h/w 8696 Sandlick Road Bee, VA 24217	Leased - EQT 243355L-01	5.7700%	3.3900	0.00721250	RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.01009750	WI
	Equitable Production Company				0.04039000	WI
Tract 3 Totals			<u>5.7700%</u>	<u>3.3900</u>	<u>0.05770000</u>	

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4 Minerals Only	<u>Vernie Bowman Heirs:</u>				RI
	Bonnie B. Kiser c/o Dennis R. Owens-A-I-F P.O. Box 577 Bristol, TN 37621-0577	Leased - EQT 244409L-03	1.2417%	0.7300	0.00155208 RI
	<u>Eugene W. and Jean O. Bowman Heirs:</u>				
	Vicki Nichols 617 Robin Hood Court Clyde, TX 79510-3955	Leased - EQT 244409L-05	0.4139%	0.2433	0.00051736 RI
	Kimberley Maynard 42 Briarfield Rd Scottsville, KY 42164	Leased - EQT 244409L-05	0.4139%	0.2433	0.00051736 RI
	Christopher M. Bowman P.O. Box 803 Chaptico, MD 20621-0803	Leased - EQT 244409L-05	0.2069%	0.1217	0.00025868 RI
	Sheilah Ginger Christensen 523 Ross Road SE Lancaster, OH 43130-9655	Leased - EQT 244409L-05	0.2069%	0.1217	0.00025868 RI
	Mabel A and Phillip E Taylor 3090 Patch Drive Bloomfield Hills, MI 48304	Leased - EQT 244409L-04	1.2400%	0.7300	0.00155000 RI
	<u>Elmer L Bowman Heirs:</u>				
	Tanis L. Bowman 1125 Sharon Avenue Kettering, OH 45429-3623	Leased - EQT 244409L-06	1.2400%	0.7300	0.00155000 RI
	<u>Zinnia L and James T Combs Heirs:</u>				
	James K. Combs 7905 Seminole BLvd. #3101 Seminole, FL 33772	Leased - EQT 244409L-01	0.6208%	0.3650	0.00077604 RI
	Linda C. Kirby 160 Cardigan Road Centerville, OH 45459	Leased - EQT 244409L-01	0.6208%	0.3650	0.00077604 RI
	<u>Edwin G. and Janice Bowman Heirs:</u>				
	Pamela B. Pinkerton 440 Brookwood Dr. Bristol, TN 37620	Leased - EQT 244409L-02	0.4139%	0.2433	0.00051736 RI
	Stanley Keith Bowman 324 Upland Way Bristol, TN 37620	Leased - EQT 244409L-02	0.4139%	0.2433	0.00051736 RI
	Dwight Evans Bowman Heirs: Jeffery Brian Bowman 125 Gauge St. Bristol, VA 24201	Leased - EQT 244409L-02	0.2069%	0.1217	0.00025868 RI

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	Angela Divi Bowman Burress 152 Basham Hill Road Bristol, TN 37620	Leased - EQT 244409L-02	0.2069%	0.1217	0.00025868	RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.01303750	WI
	Equitable Production Company				0.05215000	WI
Tract 4 Totals			7.4467%	4.3800	0.07449583	
5 TAX ID 20546	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212	Leased - EQT 241490L-01 T-367	0.5600%	0.3300	0.00070000	RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.00098000	WI
	Equitable Production Company				0.00392000	WI
Tract 5 Totals			0.5600%	0.3300	0.00560000	
		Total Gas Estate	99.9067%	58.7700	0.99988333	

COAL ESTATE ONLY

1 TAX ID 11981	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212	Leased - EQT T2(C) 242	67.5700%	39.7100	0.08446250	RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.11824750	WI
	Equitable Production Company				0.47299000	WI
Tract 1 Totals			67.5700%	39.7100	0.67570000	
2 TAX ID Minerals Only	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212	Leased - EQT T2(C) 242	18.6500%	10.9600	0.02331250	RI
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212				0.03263750	WI
	Equitable Production Company				0.13055000	WI
Tract 2 Totals			18.6500%	10.9600	0.18650000	

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3	Range Resources-Pine Mountain, Inc*	Leased - EQT	5.7700%	3.3900	0.00721250	RI
TAX ID 11990	Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212	T2(C) 242				
	Range Resources-Pine Mountain, Inc*				0.01009750	WI
	Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212					
	Equitable Production Company				0.04039000	WI
Tract 3 Totals			<u>5.7700%</u>	<u>3.3900</u>	<u>0.05770000</u>	
4	Range Resources-Pine Mountain, Inc*	Leased - EQT	7.4500%	4.3800	0.00931250	RI
TAX ID	Attn: Jerry Grantham	T2(C) 242				
Minerals Only	PO Box 2136 Abingdon, VA 24212					
	Range Resources-Pine Mountain, Inc*				0.01303750	WI
	Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212					
	Equitable Production Company				0.05215000	WI
Tract 4 Totals			<u>7.4500%</u>	<u>4.3800</u>	<u>0.07450000</u>	
5	Range Resources-Pine Mountain, Inc*	Leased - EQT	0.5600%	0.3300	0.00070000	RI
	Attn: Jerry Grantham	T2(C) 242				
	PO Box 2136 Abingdon, VA 24212					
	Range Resources-Pine Mountain, Inc*				0.00098000	WI
	Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212					
	Equitable Production Company				0.00392000	WI
Tract 5 Totals			<u>0.5600%</u>	<u>0.3300</u>	<u>0.00560000</u>	
		Total Coal Estate	100.0000%	58.7700	1.00000000	

*Formerly:
 Pine Mountain Oil & Gas, Inc.
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 P.O. Box 2136
 Abingdon, VA. 24212

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N/A

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<u>TRACT</u>	<u>LESSOR</u>	<u>LEASE STATUS</u>	<u>INTEREST WITHIN UNIT</u>	<u>GROSS ACREAGE IN UNIT</u>
Disbursement -01				
1	Madaline Presley and Harold Presley Route #A Box 11-C Bee, VA 24217	Leased - EREX 243342L-01	50.6775%	29.7825 75%
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212		16.8925%	9.9275 25%
	Total Subsequent to RR-PM Agreement		67.5700%	39.7100
Disbursement -02				
3	Darrell and Jean O'Quinn Route #A Box 13 Bee, VA 24217	Leased - EREX 243355L-01	4.3275%	2.5425 75%
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212		1.4425%	0.8475 25%
	Total Subsequent to RR-PM Agreement		5.7700%	3.3900
Disbursement -03				
2 AX ID 206	Peggy R Barton, widow P.O. Box 51 Haysi, VA 24256	Unleased	11.1360%	6.5760
	Steve Barton P.O. Box 234 Haysi, VA 24256	Unleased	1.8560%	1.0960
	Chandra Cheryl Bostic & Kenny Bostic w/h HC 4, Box 278 Bee, VA 24217	Unleased	1.8560%	1.0960
	Ricky Lane Barton & Pam Agnus Barton h/w Box 242 Mack's Hollow Haysi, VA 24256	Unleased	1.8560%	1.0960

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	Terry Lorenzen Barton & Barbara Gayle Barton h/w P.O. Box 499 Haysi, VA 24256	Unleased 6.576	1.8560%	1.0960
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212			
	Equitable Production Company			
tract 2 Totals			18.5600%	10.9600

4 Vernie Bowman Heirs:
Minerals Only

Bonnie B. Kiser c/o Dennis R. Owens-A-I-F P.O. Box 577 Bristol, TN 37621-0577	Leased - EQT 244409L-03	1.2417%	0.7300
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Eugene W. and Jean O. Bowman Heirs:

Vicki Nichols 617 Robin Hood Court Clyde, TX 79510-3955	Leased - EQT 244409L-05	0.4139%	0.2433
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Kimberley Maynard 42 Briarfield Rd Scottsville, KY 42164	Leased - EQT 244409L-05	0.2069%	0.1217
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Christopher M. Bowman P.O. Box 803 Chaptico, MD 20621-0803	Leased - EQT 244409L-05	0.2069%	0.1217
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Sheilah Ginger Christensen 523 Ross Road SE Lancaster, OH 43130-9655	Leased - EQT 244409L-05	0.4139%	0.2433
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Mabel A and Phillip E Taylor 3090 Patch Drive Bloomfield Hills, MI 48304	Leased - EQT 244409L-04	1.2400%	0.7300
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Elmer L Bowman Heirs:

Tanis L. Bowman 1125 Sharon Avenue Kettering, OH 45429-3623	Leased - EQT 244409L-06	1.2400%	0.7300
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<u>TRACT</u>	<u>LESSOR</u>	<u>LEASE STATUS</u>	<u>INTEREST WITHIN UNIT</u>	<u>GROSS ACREAGE IN UNIT</u>
Zinnia L and James T Combs Heirs:				
	James K. Combs 7905 Seminole BLvd. #3101 Seminole, FL 33772	Leased - EQT 244409L-01	0.6208%	0.3650
	Linda C. Kirby 160 Cardigan Road Centerville, OH 45459	Leased - EQT 244409L-01	0.6208%	0.3650
Edwin G. and Janice Bowman Heirs:				
	Pamela B. Pinkerton 440 Brookwood Dr. Bristol, TN 37620	Leased - EQT 244409L-02	0.4139%	0.2433
	Stanley Keith Bowman 324 Upland Way Bristol, TN 37620	Leased - EQT 244409L-02	0.4139%	0.2433
	Dwight Evans Bowman Heirs: Jeffery Brian Bowman 125 Gauge St. Bristol, VA 24201	Leased - EQT 244409L-02	0.2069%	0.1217
	Angela Divi Bowman Burress 152 Basham Hill Road Bristol, TN 37620	Leased - EQT 244409L-02	0.2069%	0.1217
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212			
	Equitable Production Company			
act 4 Totals			7.4467%	4.3800

EXHIBIT "EE"
VC-702846
VGOB 93/03/16-0343
 Revised 3/3/2014

<u>TRACT</u>	<u>LESSOR</u>	<u>LEASE STATUS</u>	<u>INTEREST WITHIN UNIT</u>	<u>GROSS ACREAGE IN UNIT</u>
Disbursement -01				
1	Madaline Presley and Harold Presley Route #A Box 11-C Bee, VA 24217	Leased - EREX 243342L-01	50.6775%	29.7825 75%
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212		16.8925%	9.9275 25%
	Total Subsequent to RR-PM Agreement		67.5700%	39.7100
Disbursement -02				
3	Darrell and Jean O'Quinn Route #A Box 13 Bee, VA 24217	Leased - EREX 243355L-01	4.3275%	2.5425 75%
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212		1.4425%	0.8475 25%
	Total Subsequent to RR-PM Agreement		5.7700%	3.3900
Disbursement -03				
2 AX ID 206	Peggy R Barton, widow P.O. Box 51 Haysi, VA 24256	Unleased	11.1360%	6.5760
	Steve Barton P.O. Box 234 Haysi, VA 24256	Unleased	1.8560%	1.0960
	Chandra Cheryl Bostic & Kenny Bostic w/h HC 4, Box 278 Bee, VA 24217	Unleased	1.8560%	1.0960
	Ricky Lane Barton & Pam Agnus Barton h/w Box 242 Mack's Hollow Haysi, VA 24256	Unleased	1.8560%	1.0960

EXHIBIT "EE"
VC-702846
VGOB 93/03/16-0343
 Revised 3/3/2014

<u>TRACT</u>	<u>LESSOR</u>	<u>LEASE STATUS</u>	<u>INTEREST WITHIN UNIT</u>	<u>GROSS ACREAGE IN UNIT</u>
	Terry Lorenzen Barton & Barbara Gayle Barton h/w P.O. Box 499 Haysi, VA 24256	Unleased 6.576	1.8560%	1.0960
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212			
	Equitable Production Company			
tract 2 Totals			18.5600%	10.9600

4 Vernie Bowman Heirs:
Minerals Only

Bonnie B. Kiser c/o Dennis R. Owens-A-I-F P.O. Box 577 Bristol, TN 37621-0577	Leased - EQT 244409L-03	1.2417%	0.7300
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Eugene W. and Jean O. Bowman Heirs:

Vicki Nichols 617 Robin Hood Court Clyde, TX 79510-3955	Leased - EQT 244409L-05	0.4139%	0.2433
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Kimberley Maynard 42 Briarfield Rd Scottsville, KY 42164	Leased - EQT 244409L-05	0.4139%	0.2433
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Christopher M. Bowman P.O. Box 803 Chaptico, MD 20621-0803	Leased - EQT 244409L-05	0.2069%	0.1217
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Sheilah Ginger Christensen 523 Ross Road SE Lancaster, OH 43130-9655	Leased - EQT 244409L-05	0.2069%	0.1217
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Mabel A and Phillip E Taylor 3090 Patch Drive Bloomfield Hills, MI 48304	Leased - EQT 244409L-04	1.2400%	0.7300
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Elmer L Bowman Heirs:

Tanis L. Bowman 1125 Sharon Avenue Kettering, OH 45429-3623	Leased - EQT 244409L-06	1.2400%	0.7300
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EXHIBIT "EE"
VC-702846
VGOB 93/03/16-0343
 Revised 3/3/2014

<u>TRACT</u>	<u>LESSOR</u>	<u>LEASE STATUS</u>	<u>INTEREST WITHIN UNIT</u>	<u>GROSS ACREAGE IN UNIT</u>
Zinnia L and James T Combs Heirs:				
	James K. Combs 7905 Seminole BLvd. #3101 Seminole, FL 33772	Leased - EQT 244409L-01	0.6208%	0.3650
	Linda C. Kirby 160 Cardigan Road Centerville, OH 45459	Leased - EQT 244409L-01	0.6208%	0.3650
Edwin G. and Janice Bowman Heirs:				
	Pamela B. Pinkerton 440 Brookwood Dr. Bristol, TN 37620	Leased - EQT 244409L-02	0.4139%	0.2433
	Stanley Keith Bowman 324 Upland Way Bristol, TN 37620	Leased - EQT 244409L-02	0.4139%	0.2433
	Dwight Evans Bowman Heirs: Jeffery Brian Bowman 125 Gauge St. Bristol, VA 24201	Leased - EQT 244409L-02	0.2069%	0.1217
	Angela Divi Bowman Burress 152 Basham Hill Road Bristol, TN 37620	Leased - EQT 244409L-02	0.2069%	0.1217
	Range Resources-Pine Mountain, Inc* Attn: Jerry Grantham PO Box 2136 Abingdon, VA 24212			
	Equitable Production Company			
act 4 Totals			7.4467%	4.3800

BEFORE THE VIRGINIA GAS AND OIL BOARD

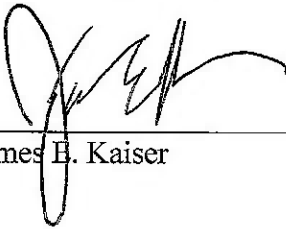
Applicant: EQT Production Company)
Relief Sought: Well No. VC-702846) Docket No.
Supplemental Order for Disbursement of Escrowed Funds) VGOB-93/03/16-0343-03
on behalf of Known Owners in tracts 2 & 4)

AFFIDAVIT OF MAILING
(CERTIFICATE OF SERVICE)

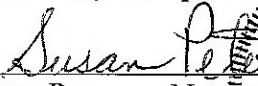
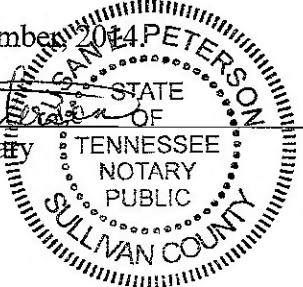
STATE OF TENNESSEE)
COUNTY OF SULLIVAN)

James E. Kaiser, of lawful age, being duly sworn, upon oath, deposes and says:

- (1) He is a partner with WILHOIT & KAISER, Agent for EQT Production Company ("EQT") and makes this affidavit on behalf of EQT.
- (2) Based upon information and belief, the names and last-known addresses, where such addresses are known, of the parties owning an interest in the oil and gas in this cause are set forth and attached hereto.
- (3) On the 15th day of August, 2014, true and correct copies of the Application and the Notice of Hearing in this matter were placed in the United States mail in Kingsport, TN, certified mail, return receipt requested, postage prepaid, duly addressed to the parties at their respective addresses as set forth in the attached Exhibit B which is hereby made a part of this Affidavit.
- (4) Notice of this cause has therefore been served by mail pursuant to the applicable statutes and rules of the Board.


James E. Kaiser

SUBSCRIBED AND SWORN TO before me this 9th day of September, 2014


Susan Peterson, Notary


My commission expires: August 24, 2016.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ms. Jennifer Shaver, Esq.
P.O. Box 2032
Abingdon, VA 24212

2. Article Number
(Transfer from service label) 18343, 19096, ~~19097~~, 19092

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Jennifer Shaver* Agent Addressee

B. Received by (Printed Name) _____ C. Date of Delivery
8/25/14

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

AUG 25 2014

3. Service Type

Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, July 2013 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Stanley Keith Bowman
324 Upland Way,
Bristol, TN 37620

2. Article Number
(Transfer from service label) 18343

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Stanley Bowman* Agent Addressee

B. Received by (Printed Name) _____ C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

AUG 18 2014

3. Service Type

Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, July 2013 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pamela B. Pinkerton
440 Brookwood Dr.,
Bristol, TN 37620

2. Article Number
(Transfer from service label) 18343

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Pamela B. Pinkerton* Agent Addressee

B. Received by (Printed Name) _____ C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

AUG 19 2014

3. Service Type

Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, July 2013 Domestic Return Receipt Page Number 21

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Range Resources-Pine Mountain, Inc
 Attn: Jerry Grantham,
 PO Box 2136,
 Abingdon, VA 24212

18843

2. Article Number
 (Transfer from service label) 7009 2820 0002 7706 2442

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 Jerry Grantham 8/18/14

D. Is delivery address different from item 1? Yes
 No
 If YES, enter delivery address below:
 AUG 19 2014

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kimberley Maynard
 42 Briarfield Rd,
 Scottsville, KY 42164

18843

2. Article Number
 (Transfer from service label) 7009 2820 0002 7706 2558

PS Form 3811, July 2013

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 Roudy Maynard 8-18-14

D. Is delivery address different from item 1? Yes
 No
 If YES, enter delivery address below:
 AUG 20 2014

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jeffery Brian Bowman
 125 Gauge St.,
 Bristol, VA 24201

14443

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 Jeffery Bowman AUG 19 2014

D. Is delivery address different from item 1? Yes
 No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

RECEIVED AUG 20 2014

USPS BRISTOL TN VA 24203

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Peggy R Barton
P.O. Box 51,
Haysi, VA 24256

18843

2. Article Number

(Transfer from service label)

7009 2820 0002 7706 2626

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Peggy Barton*

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

8-19

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

AUG 20 2014

3. Service Type

Certified Mail®

Priority Mail Express™

Registered

Return Receipt for Merchandise

Insured Mail

Collect on Delivery

4. Restricted Delivery? (Extra Fee)

Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Terry Lorenzen Barton and
Barbara Gayle Barton
P.O. Box 499,
Haysi, VA 24256

18843

2. Article Number

(Transfer from service label)

7009 2820 0002 7706 2589

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Terry Barton*

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

8-19

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

AUG 20 2014

3. Service Type

Certified Mail®

Priority Mail Express™

Registered

Return Receipt for Merchandise

Insured Mail

Collect on Delivery

4. Restricted Delivery? (Extra Fee)

Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mabel A and Phillip E Taylor
3090 Patch Drive,
Bloomfield Hills, MI 48304

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *Phillip E Taylor*

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

KEARLETT TAYLOR 8-18-14

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

AUG 21 2014

3. Service Type

Certified Mail®

Priority Mail Express™

Registered

Return Receipt for Merchandise

Insured Mail

Collect on Delivery

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Chandra Cheryl Bostic and
 Kenny Bostic
 HC 4, Box 278
 Bee, VA 24217

AUG 2 1 2014

18843

2. Article Number

(Transfer from service label)

7009 2820 0002 7706 2602

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X *Kenny Bostic*

B. Received by (Printed Name)

C. Date of Delivery

7-20-14

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3246 Indian Crk Rd
Bee VA 24217

3. Service Type

- Certified Mail® Priority Mail Express™
- Registered Return Receipt for Merchandise
- Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Steve Barton
 P.O. Box 234,
 Haysi, VA 24256

18843

2. Article Number

(Transfer from service label)

7009 2820 0002 7706 2619

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X *Peggy Barton*

B. Received by (Printed Name)

C. Date of Delivery

8-19

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

AUG 2 1 2014

3. Service Type

- Certified Mail® Priority Mail Express™
- Registered Return Receipt for Merchandise
- Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sheilah Ginger Christensen
 523 Ross Road SE,
 Lancaster, OH 43130-9655

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

Jeffrey L Christensen

B. Received by (Printed Name)

C. Date of Delivery

8 19 14

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

AUG 2 2 2014

3. Service Type

- Certified Mail® Priority Mail Express™
- Registered Return Receipt for Merchandise
- Insured Mail Collect on Delivery

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>[Signature]</i>	
1. Article Addressed to: Linda C. Kirby 160 Cardigan Road, Centerville, OH 45459 <i>18843</i>	B. Received by (Printed Name) <i>Tim Ebert</i>	C. Date of Delivery <i>8/18/14</i>
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No AUG 22 2014	
3. Service Type: <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		
2. Article Number (Transfer from service label) 7009 2820 0002 7706 2497		
PS Form 3811, July 2013 Domestic Return Receipt		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>[Signature]</i>	
1. Article Addressed to: Bonnie B. Kiser c/o Dennis R. Owens-A-I-F, P.O. Box 577, Bristol, TN 37621-0577 <i>18843</i>	B. Received by (Printed Name) 	C. Date of Delivery
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No AUG 25 2014	
3. Service Type: <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		
2. Article Number (Transfer from service label) 7009 2820 0002 7706 2572		
PS Form 3811, July 2013 Domestic Return Receipt		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>[Signature]</i>	
1. Article Addressed to: Christopher M. Bowman P.O. Box 803, Chaptico, MD 20621-0803 <i>18843</i>	B. Received by (Printed Name) <i>CHRIS BOWMAN</i>	C. Date of Delivery <i>22 AUG 14</i>
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No AUG 25 2014	
3. Service Type: <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		
2. Article Number 7009 2820 0002 7706 2572		

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Tanis L. Bowman
 1125 Sharon Avenue,
 Kettering, OH 45429-3623

18843

2. Article Number (Transfer from service label) **7009 2820 0002 7706 2510**

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Tanis L. Bowman

B. Received by (Printed Name) **TANAS L. BOWMAN** C. Date of Delivery **09-02-2014**

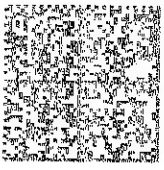
D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

RECEIVED
SEP 05 2014

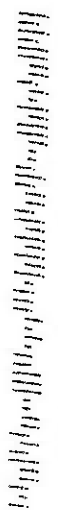
3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

UNITED STATES POSTAL SERVICE
02 1P
0003203248
MAILED FROM



7009 2620 0002 7706 2565



Wilhoit
Attorneys at Law
Broad Street, Suite 301
Nashport, TN 37660

First Notice 8/28
2nd Notice 8/27/14
Return 9/4/14

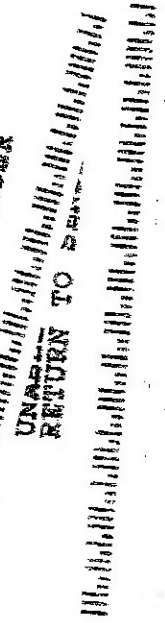
SEP 02 2014

08/30/14

NIXIE

795103008-1N

RETURN TO SENDER
UNABLE TO FORWARD
RETURN TO SENDER



U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only - No Insurance Coverage Provided)

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OFFICIAL USE

Postage \$	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Fee	

Sent To: Vicki Nichols
Street, or P.O. E: 617 Robin Hood Court, Clyde, TX 79510-3955

Postmark Here: 18873

FROM ON DELIVERY

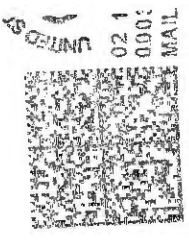
Agent
 Addressee

Name: _____ C. Date of Delivery: _____

different from item 1? Yes
y address below: No

Priority Mail Express™
 Return Receipt for Merchandise
 Collect on Delivery

? (Extra Fee) Yes



NAME
1st NOTICE
2nd NOTICE
RETURN

AUG 25 2014



7009 2820 0002 7706 2459

Angela Divi Bowman Burress
152 Basham Hill Road,
Bristol, TN 37620

NIXIE 376202046-1N 08/21/14

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD
RETURN TO SENDER



Wilboit & Kaiser
Attorneys at Law
220 Broad Street, Suite 301
Kingsport, TN 37660

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

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Certified Fee		150.75
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total		

Sent 1
Street or PO
City, State

Angela Divi Bowman Burress
152 Basham Hill Road,
Bristol, TN 37620

SECTION ON DELIVERY

Agent
 Addressee

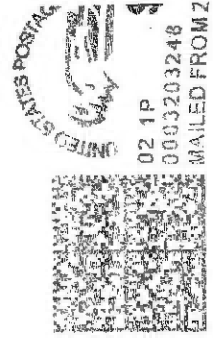
Recipient Name) C. Date of Delivery

Is different from item 1? Yes
Delivery address below: No

5 2 6 2014

Priority Mail Express™
 Return Receipt for Merchandise
 Collect on Delivery

Delivery? (Extra Fee) Yes



8-14
8/21
831



7009 2620 0002 7706 2596

MOVED LEFT NO ADDRESS
 UNCLAIMED - NOT KNOWN
 NO SUCH STREET
 NO SUCH NUMBER
 INSUFFICIENT ADDRESS
 NOT DELIVERABLE AS
 ADDRESSED UNABLE TO FORWARD

and
 Allow,
 256

UNITED STATES
 POSTAL SERVICE

CS3

SEP 03 2014
 BY:

Wilhoit & Kaiser
 Attorneys at Law
 Broad Street, Suite 301
 Kingsport, TN 37660

SEN
 7009 2620 0002 7706 2596

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only. No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 19.95
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)

Rick Lane Barton and
 Pam Agnus Barton

RETURN ON DELIVERY
 Agent
 Addressee

Name/ C. Date of Delivery
 Return from item 17 Yes
 address below: No

Priority Mail Express™
 Return Receipt for Merchandise

Page Number 29

Exhibit J
VC-702846
VGOB 93/03/16-0343
8/5/2014

Pmt Date	Pmt Amount
5/22/1995	\$5,646.08
6/20/1995	\$278.56
7/20/1995	\$268.13
8/22/1995	\$202.90
9/21/1995	\$210.67
10/23/1995	\$199.87
11/21/1995	\$242.58
12/27/1995	\$298.48
1/25/1996	\$368.17
2/23/1996	\$548.70
3/27/1996	\$442.31
4/24/1996	\$392.56
5/29/1996	\$361.88
6/21/1996	\$278.83
7/25/1996	\$202.16
8/22/1996	\$357.08
9/23/1996	\$371.36
10/24/1996	\$224.81
11/21/1996	\$224.53
12/18/1996	\$407.93
1/24/1997	\$600.07
2/25/1997	\$610.29
3/26/1997	\$405.93
4/24/1997	\$297.18
5/22/1997	\$217.41
6/25/1997	\$225.35
7/29/1997	\$233.22
8/27/1997	\$256.15
9/25/1997	\$298.60
10/23/1997	\$290.00
11/21/1997	\$361.76
12/22/1997	\$309.42
1/28/1998	\$330.29
2/25/1998	\$294.29
3/24/1998	\$265.44
4/23/1998	\$308.07
5/27/1998	\$257.12
6/25/1998	\$273.05
7/27/1998	\$230.49
8/27/1998	\$267.66
9/23/1998	\$251.13
10/27/1998	\$202.13
11/20/1998	\$238.62
12/23/1998	\$241.14
1/26/1999	\$257.32
2/24/1999	\$222.99
3/25/1999	\$235.12
4/27/1999	\$221.88
5/26/1999	\$246.92
6/24/1999	\$300.15
7/27/1999	\$264.51
8/31/1999	\$276.89
9/29/1999	\$408.17
10/29/1999	\$368.27
11/24/1999	\$297.75
12/22/1999	\$375.58

1/27/2000	\$254.71
2/25/2000	\$294.30
3/27/2000	\$340.67
4/21/2000	\$330.26
5/24/2000	\$442.80
6/28/2000	\$484.59
7/31/2000	\$479.34
8/28/2000	\$579.84
9/28/2000	\$531.87
10/30/2000	\$687.93
11/30/2000	\$705.62
12/22/2000	\$581.37
2/1/2001	\$741.58
3/1/2001	\$1,475.64
3/28/2001	\$723.46
4/25/2001	\$654.02
5/24/2001	\$655.93
6/27/2001	\$589.23
7/27/2001	\$281.85
8/28/2001	\$310.37
10/30/2001	\$775.01
11/30/2001	\$242.81
12/21/2001	\$351.52
01/30/2002	\$257.66
03/01/2002	\$309.21
04/25/2002	\$258.09
04/30/2002	\$218.15
05/24/2002	\$318.89
06/28/2002	\$390.09
07/31/2002	\$425.87
08/26/2002	\$449.63
09/27/2002	\$318.31
10/28/2002	\$283.20
11/25/2002	\$206.55
12/30/2002	\$261.76
02/01/2003	\$333.22
03/05/2003	\$441.98
04/02/2003	\$416.84
05/01/2003	\$790.90
06/02/2003	\$427.57
07/01/2003	\$411.37
08/01/2003	\$509.87
09/02/2003	\$632.10
10/01/2003	\$647.59
11/03/2003	\$412.67
12/02/2003	\$387.72
01/07/2004	\$363.22
02/02/2004	\$406.37
03/03/2004	\$511.86
04/05/2004	\$488.26
05/05/2004	\$444.71
06/02/2004	\$375.26
07/05/2004	\$416.24
08/04/2004	\$465.41
09/01/2004	\$446.66
10/04/2004	\$563.78
11/02/2004	\$585.62
12/02/2004	\$391.14
01/06/2005	\$611.56
02/07/2005	\$519.61
03/03/2005	\$425.58
04/05/2005	\$378.20
05/06/2005	\$421.27
06/07/2005	\$482.32

07/06/2005	\$417.13
08/05/2005	\$365.72
09/08/2005	\$685.10
10/06/2005	\$1,567.94
11/08/2005	\$735.87
12/07/2005	\$909.07
01/06/2006	\$764.58
02/06/2006	\$639.74
03/08/2006	\$668.41
04/07/2006	\$500.99
05/10/2006	\$397.24
06/06/2006	\$367.07
07/11/2006	\$359.14
08/07/2006	\$311.25
09/08/2006	\$265.05
10/09/2006	\$876.61
11/09/2006	\$397.76
12/07/2006	\$199.86
01/08/2007	\$268.37
02/08/2007	\$375.00
03/08/2007	\$294.92
04/06/2007	\$389.76
05/09/2007	\$267.43
06/08/2007	\$310.16
07/10/2007	\$304.07
08/07/2007	\$288.47
09/10/2007	\$266.19
10/12/2007	\$208.33
11/08/2007	\$219.30
12/10/2007	\$278.81
01/09/2008	\$369.73
02/08/2008	\$370.31
03/10/2008	\$373.76
04/08/2008	\$115.76
05/07/2008	\$141.17
06/09/2008	\$135.92
07/14/2008	\$168.64
08/07/2008	\$194.72
09/05/2008	\$332.77
10/10/2008	\$249.44
11/07/2008	\$176.70
12/09/2008	\$134.62
01/12/2009	\$119.37
02/11/2009	\$97.09
04/09/2009	\$67.23
05/12/2009	\$53.79
07/10/2009	\$75.29
09/10/2009	\$147.80
12/09/2009	\$81.12
01/13/2010	\$37.92
02/10/2010	\$38.56
03/09/2010	\$55.20
04/14/2010	\$43.42
05/10/2010	\$45.13
06/08/2010	\$31.19
07/13/2010	\$39.15
08/10/2010	\$33.95
09/10/2010	\$77.10
10/11/2010	\$35.38
11/11/2010	\$25.04
12/09/2010	\$28.79
01/13/2011	\$23.91
02/11/2011	\$42.36
03/11/2011	\$44.63

04/12/2011	\$50.68
05/11/2011	\$39.31
06/11/2011	\$41.90
07/13/2011	\$42.90
08/10/2011	\$38.46
09/12/2011	\$37.03
10/12/2011	\$61.11
11/10/2011	\$31.94
12/09/2011	\$33.59
01/17/2012	\$30.81
02/10/2012	\$30.69
03/12/2012	\$42.48
04/13/2012	\$27.84
05/11/2012	\$25.96
06/12/2012	\$17.23
07/11/2012	\$15.45
08/10/2012	\$23.38
09/12/2012	\$24.82
10/10/2012	\$32.87
11/09/2012	\$34.44
12/12/2012	\$42.00
01/10/2013	\$43.21
02/11/2013	\$52.01
03/13/2013	\$57.10
04/10/2013	\$31.57
05/10/2013	\$31.79
06/10/2013	\$34.98
07/08/2013	\$38.86
08/12/2013	\$59.04
09/13/2013	\$29.63
10/10/2013	\$48.51
11/13/2013	\$23.14
12/11/2013	\$25.44
01/10/2014	\$25.32
02/11/2014	\$31.19
03/12/2014	\$93.14
04/10/2014	\$81.66
05/14/2014	\$48.70
06/13/2014	\$39.80
	<u>\$71,615.26</u>
	-\$52,965.57 Disbursement -01
	<u>-\$5,220.95 Disbursement -02</u>
	\$13,428.74

Escrow Agent Summary June 2014

<u>Unit Name</u>	<u>Docket #</u>	<u>Unit Operator</u>	<u>Beginning Market Value</u>	<u>Deposits</u>	<u>Money Mkt Interest</u>	<u>CDARS Interest</u>	<u>Fees for 05/2014</u>	<u>Ending Market Value</u>
VC2846	0343	EQT	\$26,322.66	\$39.80	\$0.54	\$5.66	(\$2.19)	\$26,366.47

CWF 10-147

OWNER NO. 170180
LEASE NO. 244409.02

AFFIDAVIT OF HEIRSHIP
(FILL IN ALL BLANKS)

The Affiant PAMELA B. PINKERTON of BRISTOL, TN
being of lawful age and being first duly sworn according to law, on oath says: (City and State)

That the statements hereinafter set forth, including answers to questions propounded, constitute a true, correct and complete statement of the family history of the person hereinafter named as "decedent" and of the estate of such decedent.

Name of decedent DWIGHT EVANS BOWMAN
Date decedent died 10-12-09 Where? BRISTOL, TN
Did decedent leave a will? NO If so, has same been probated? _____
Or has other administration proceedings been had on decedent's estate? NO
If so, when? _____ Where? _____
Was decedent married or single at the time of his/her death? SINGLE
If married, to whom? _____ Address: _____
Was decedent ever married to any other than above-named person? YES
If so, give the following information: (List names in order of marriage)

Name of Spouse	Living or Dead	Divorced	Date of Death or Divorce
<u>TONIA EILEEN WYATT MUSICK</u>	<u>LIVING</u>	<input checked="" type="checkbox"/>	<u>1970'S</u>
<u>LINDA GALE AUSTIN LINGERFELT</u>	<u>LIVING</u>	<input checked="" type="checkbox"/>	<u>7-28-83</u>

If decedent had any children by any spouse, give following information:

Name of Child	Birth Date	Address	Living/Dead	Date of Death	By Which Spouse
<u>JEFFREY BRIAN BOWMAN</u>	<u>8-4-68</u>	<u>125 GONGE ST. BRISTOL, VA 24201</u>	<u>LIVING</u>		<u>TONIA MUSICK</u>
<u>ANGELA DWI BOWMAN</u>	<u>9-18-78</u>	<u>217 SPEARVIEW DR. BRISTOL, TN 37620</u>	<u>LIVING</u>		<u>LINDA LINGERFELT</u>

If a deceased child left decedents, give following information:

Name of Deceased Child	Birth Date	Address	Living/Dead	Date of Death

VIRGINIA
IN THE CLERK'S OFFICE OF
AUGUST 7, 2010 AT 11:01AM
WILSON/FIDUCIARY
INSTRUMENT #100000147 WAS RECORDED
UPON CERTIFICATION OF ACKNOWLEDGEMENT
THERE TO ANNEXED, ADMITTED TO RECORD.
THE FEE AND TAX OF \$16.00 IMPOSED
BY LAW HAVE BEEN PAID (RPT 1000004675)

Name of Deceased Child	Birth Date	Address	Living/Dead	Date of Death

In case decedent left no surviving spouse, and no children or descendents of deceased children, then please furnish the following information:

Name of Parents	Address	Living/Dead	Date of Death
(father)			
(mother)			

INSTRUMENT NO. 100000147
Recorded in the Clerk's Office
of Dickenson County

CWF 10-147

OWNER NO. 170180
LEASE NO. 244409.02

Give names of brothers and sisters of decedent:

Name	Relation	Address	Living/Dead	Date of Death

Gives names of children of deceased brother or sister:

Name of Child	Child of	Birth Date	Address	Living/Dead

VIRGINIA
IN THE CLERK'S OFFICE OF
DICKENSON
AUGUST 9, 2010 AT 11:01AM
WILLS/FIDUCIARY
INSTRUMENT #100000147 WAS RECORDED
UPON CERTIFICATION OF ACKNOWLEDGEMENT
THEREOF ANNEXED, ADMITTED TO RECORD.
THE FEE AND TAX OF \$16.00 IMPOSED
BY LAW HAVE BEEN PAID (POST #100000147/5)

The Affiant avers that all debts, claims or charges against the estate of the deceased have been paid and that there are now no outstanding claims, debts, or other charges, including estate or inheritance taxes against said estate which are true and owing:

RECORDED BY: CJF

Briefly state facts and circumstances (such as being a relative of, attorney for or agent for the deceased) which provide the basis and source of information hereinbefore given:

I AM DWIGHT'S SISTER AND WAS HIS CAREGIVER DURING RESPIRE CARE

Pamela B. Pinkerton
Affiant

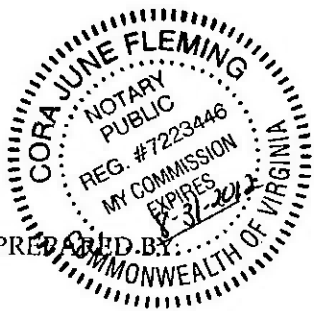
STATE OF Virginia)
COUNTY OF Dickenson) ss.

Before me, Cora June Fleming, a Notary Public, on this day personally appeared 8-09-10 to be the person whose name is subscribed to the foregoing instrument, and acknowledged before me that Pamela B. Pinkerton executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this 9 day of August, 2010.

My commission expires: 8-31-2012

Cora June Fleming
Notary Public



THIS INSTRUMENT PREPARED BY:

EQT Production
PO Box 23536
Pittsburgh, PA 15222

INSTRUMENT NO. 100000147
Recorded in the Clerk's Office
of Dickenson County

REAL ESTATE AFFIDAVIT
COMMONWEALTH OF VIRGINIA VA. CODE § 64.1-135

Court File No. CWF11-161

Dickenson County

Circuit Court

Elmer L. Bowman
NAME OF DECEDENT

February 3, 2011
DATE OF DEATH

Tanas L. Bowman, 1125 Sharon Ave., Kettering, OH 45429
NAME AND ADDRESS OF SUBSCRIBER

I have an interest as the vested beneficiary in the real property of the decedent; AND/OR

I qualified in _____ as
NAME OF COURT

the personal representative of the above-named decedent, who died intestate as to the real estate described herein, and who, at the time of death, was seized of real property in this county/city, briefly described as

The name and last known address of decedent's heirs are:

NAMES OF HEIRS	ADDRESSES	RELATIONSHIP	AGE
<u>Tanas L. Bowman</u>	<u>1125 Sharon Ave., Kettering, OH 45429</u>	<u>Daughter</u>	

DATE

Tanas L. Bowman
SIGNATURE OF SUBSCRIBER

State/Commonwealth of ~~West Virginia~~ OHIO City County of Dickenson

PREBLE

Subscribed and sworn to before me

by Tanas L. Bowman
PRINT NAME OF SIGNATORY

this 20th day of June, 2011

Constance Redwine
 CLERK DEPUTY CLERK NOTARY PUBLIC

My commission expires May 3, 2012

Registration No. _____

Dickenson Co.
VIRGINIA: In the Clerk's Office of the Circuit Court this 25th day of Oct., 2011
the foregoing AFFIDAVIT was filed and admitted to record.

RICHARD EDWARDS, CLERK
Teste: _____
CLERK

By: Dan Fleming, Deputy Clerk

LAST WILL AND TESTAMENT

OF

JANICE VELMA BOWMAN

I, JANICE VELMA BOWMAN, a resident of Bristol, Sullivan County, Tennessee, being of sound mind and disposing memory, do hereby make, publish, and declare this my Last Will and Testament, hereby revoking any and all wills and codicils made by me at any prior date.

FIRST: I desire and direct that my funeral expenses, inheritance and estate taxes, and any legal debts which I may owe, be paid as soon after my death as conveniently can be done, by my representative hereinafter named.

SECOND: I hereby give, devise, and bequeath to my husband, Edwin Garfield Bowman, a life estate in all of my personal property, whether tangible or intangible, and in the lots, land, and residence situated at, or contiguous with, No. 40 Twenty-Fourth Street, Bristol, Sullivan County, Tennessee, which realty is described on a sketch of record in Map Book 1, Page 129, in the Register's Office at Bristol, Tennessee.

THIRD: All the rest, residue, and remainder of my estate, real, personal and mixed, and wheresoever situate, I give, devise, and bequeath to my children, Jan Edwin Bowman, Pamela Bowman Pinkerton, Dwight Evans Bowman, and Stanley Keith Bowman, or such of them as shall survive me, share and share alike, per capita, and not per stirpes.

FOURTH: I hereby nominate and appoint Pamela Bowman Pinkerton as Executrix of this my Last Will and Testament, and I direct that no security or bond be required of her on her qualification, and further that she not be required to render any inventory or final accounting in the

LAW OFFICES
JAMES P. GRAYSON
BRISTOL, TENNESSEE

*J.B. C.P.
Janice Velma Bowman*

FILED 6-5, 20 08
TIME 8:45 a.m./p.m.
SARAH HOUSEWRIGHT
CLERK & MASTER
By Janice Bowman

92

administration of my estate. In the event Pamela Bowman Pinkerton should predecease me, or should be unable so to serve in said capacity, then I hereby nominate and appoint Stanley Keith Bowman as Alternate Executor of this my Last Will and Testament, and I direct that no security or bond be required of him on his qualification, and further that he not be required to render any inventory or final accounting in the administration of my estate.

IN TESTIMONY WHEREOF, I hereunto place my signature on this the 29 day of July, 1977.

Janice Velma Bowman

Signed by the said JANICE VELMA BOWMAN as and for her Last Will and Testament, in the presence of us, the undersigned, who, at her request, and in her sight and presence, and in the sight and presence of each other, have subscribed our names as attesting witnesses the day and year first herein written.

Mrs. Katy Blewett

Carolyn Reed

A F F I D A V I T

STATE OF TENNESSEE

COUNTY OF SULLIVAN

We, the undersigned attesting witnesses, after being duly sworn, make oath or affirm that the foregoing Last Will and Testament was signed by Janice Velma Bowman, as and for and at that time acknowledged, published and declared by her to be her Last Will and Testament, in the sight and presence of us and in the sight and presence of each other, and at her request we have subscribed our names as attesting witnesses on the 29th day of July, 1977, and have executed this Affidavit; and we further make oath or affirm that the testatrix was of sound mind and disposing memory and not acting under the fraud, menace, or undue influence of any person, was more than 18 years of age; and that each of the attesting witnesses is more than 18 years of age.

Mrs. Katy Blewett

Carolyn Reed

Sworn or affirmed and subscribed to before me this 29th day of July, 1977.

James P. Grayson
Notary Public

My commission expires:

June 14, 1981

LAW OFFICES
JAMES P. GRAYSON
BRISTOL, TENNESSEE

BB

BOOK

36 PAGE 765

Well # 505371, 536393, 702823

AFFIDAVIT OF HEIRSHIP
(FILL IN ALL BLANKS)

The Affiant Peggy Barton of Bee, Virginia 24217
of lawful age, being first duly sworn according to law, on oath says: (City and State)

That the statements hereinafter set forth, including answers to questions propounded, constitute a true, correct and complete statement of the family history of the person hereinafter named as "decedent" and of the estate of such decedent.

#12002

Name of decedent Lance Marcus Barton

Date decedent died July 26, 2007 Where? Richlands, Virginia

Did decedent leave a will? No If so, has same been probated? N/A

Or has other administration proceedings been had on decedent's estate? No

If so, when? N/A Where? N/A

Was decedent married or single at the time of his/her death? No

If married, to whom? N/A Address: N/A

Was decedent ever married to any other than above-named person? N/A

If so, give the following information: (List names in order of marriage)

Name of Spouse	Living or Dead	Divorced	Date of Death or Divorce
None			

If decedent had any children by any spouse, give following information:

Name of Child	Birth Date	Address	Living/Dead	Date of Death	By Which Spouse
None					

If a deceased child left decedents, give following information:

Name of Child	Birth Date	Address	Living/Dead	Date of Death
Name of Deceased Child				
Name of spouse, if married				

Name of Child	Birth Date	Address	Living/Dead	Date of Death
Name of Deceased Child				
Name of spouse, if married				

Name of Child	Birth Date	Address	Living/Dead	Date of Death
Name of Deceased Child				
Name of spouse, if married				

In case decedent left no surviving spouse, and no children or descendants of deceased children, then please furnish the following information:

Name of Parents	Address	Living/Dead	Date of Death
<u>Channe Barton</u> (father)		<u>Deceased</u>	<u>05/07/2005</u>
<u>Peggy Barton</u> (mother)	<u>P. O. Box 175, Bee, VA 24217</u>	<u>Living</u>	

Give names of brothers and sisters of decedent:

INSTRUMENT NO.
0100000110

RECEIVED AND FILED THIS 15th
DAY OF August 2007
OF STATE OF VIRGINIA
[Signature] REC. CLERK
TIME: 12:16 pm

January 14, 2014



EQT Production Company
P.O. Box 23536
Pittsburgh, PA 15222

ATTENTION: Kristie Rudick

Re: **Permanent Release of CBM Royalty
11 Wells as shown on Exhibit A
Dickenson and Russell Counties, Virginia**

Dear Kristie:

As you are aware, EQT Production Company ("EQT") has drilled the coalbed methane gas wells which are identified on the attached Exhibit A either under pooling orders from the Virginia Gas and Oil Board ("Board") or as voluntary drilling units. For these wells, we are listed as having conflicting claims with the gas owners.

EQT, as operator of these units, has placed or will place all royalty proceeds attributable to the conflicting claims as it relates to CBM ownership into an escrow or suspense account. In order to allow release of the royalty proceeds, RRPM hereby waives any claims to past or to future royalties attributable to the CBM ownership for the portion of the tract included in the well units identified on the attached Exhibit A.

RRPM is requesting EQT to initiate distribution directly to the gas owners of all current royalties, as well as all future royalties, attributable to their interests in these wells.

If you have any questions, please do not hesitate to call me at 276-619-2583.

Sincerely,

RANGE RESOURCES-PINE MOUNTAIN, INC.

A handwritten signature in blue ink that reads 'Phil Horn'.

Phil Horn
Land Manager

Enclosures

cc: Debbie Louthian, RRPM
George Heflin, EQT
Rita Barrett, EQT

EXHIBIT A

WELL NUMBER	TRACT TO RELEASE	TRACT NAME
VC-501853	T2-177	H. & E. L. KISER
VC-501853	TC-214	ELIHU L. KISER
VC-502832	T2-177	H. & E. L. KISER
VC-502832	TC-214	ELIHU L. KISER
VC-504637	TC-154	NOAH SMITH
VC-505241	TC-153	WILSON ROSE JR
VC-536070	T2-177	H. & E. L. KISER
VC-536070	TC-214	ELIHU L. KISER
VC-702846	TC-226	J.B. COMPTON
VC-702966	TC-219	J.H. POWERS
VC-703324	TC-154	NOAH SMITH
VC-703324	TC-177	ELEXIUS SMITH
VC-703655	TC-219	J.H. POWERS
VC-703655	TC-220	Z.T. SUTHERLAND
VC-703655	TC-221	Z.T. SUTHERLAND
VC-704511	TC-177	ELEXIUS SMITH
VC-503042	TC-177	ELEXIUS SMITH

SUMMARY OF DOCUMENTS SUPPORTING CHANGES IN OWNERSHIP

Tract 2: -Deed of Assumption between Laymon & Judy Kiser (Grantors) and Channe and Peggy Barton (Grantees)
-Last Will and Testament of Channe R Barton

Tract 4: -Affidavit of Heirship for Dwight Evans Bowman
-Affidavit of Heirship for Elmer Bowman
-Last Will and Testament of Janice Bowman
-Affidavit of Heirship for Lance Barton
-Death Certificate for Vernie Bowman
-Last Will and Testament and Death Certificate for Zinnia Combs

OFFICE of VITAL STATISTICS

CERTIFIED COPY

CERTIFICATE OF DEATH
FLORIDA

TYPE OR
PRINT IN
PERMANENT
BLACK INK

LOCAL FILE NO. 6093 2930

1 DECEDENT'S NAME FIRST: <u>VERNIE</u> MIDDLE: LAST: <u>BOWMAN</u>		2 SEX <u>Female</u>	
3 DATE OF DEATH (Month, Day, Year) <u>March 23, 1993</u>		4 SOCIAL SECURITY NUMBER <u>384-46-9282</u>	5a AGE-Last Birthday (year) <u>97</u>
6 DATE OF BIRTH (Month, Day, Year) <u>January 13, 1896</u>		7 BIRTHPLACE (City and State or Foreign Country) <u>Bee, Virginia</u>	
8a PLACE OF DEATH (Check only one - see instructions on other side)		8b INSIDE CITY LIMITS? (Yes or No) <u>No</u>	
9a HOSPITAL: <input type="checkbox"/> Inpatient <input type="checkbox"/> ER/Outpatient <input type="checkbox"/> DOA OTHER: <input type="checkbox"/> Nursing Home <input checked="" type="checkbox"/> Residence <input type="checkbox"/> Other (Specify)			
9b FACILITY NAME (If not institution, give street and number) <u>6099 7771 St. Andrews Rd.</u>		9c CITY, TOWN, OR LOCATION OF DEATH <u>Lake Worth</u>	
9d COUNTY OF DEATH <u>Palm Beach</u>		10 GIVE NAME OF WORK DONE DURING MOST OF WORKING LIFE DO NOT USE RETIRED	
10a DECEDENT'S USUAL OCCUPATION <u>Homemaker</u>		10b KIND OF BUSINESS/INDUSTRY <u>Own home</u>	11 MARITAL STATUS - Married, Never Married, Widowed, Divorced (Specify) <u>Widowed</u>
12 SURVIVING SPOUSE (If wife, give maiden name)		13 13a RESIDENCE - STATE <u>Florida</u>	
13b COUNTY <u>Palm Beach</u>		13c CITY, TOWN, OR LOCATION <u>Lake Worth</u>	
13d STREET AND NUMBER <u>7771 St. Andrews Road</u>		14 WAS DECEDENT OF HISPANIC OR HAITIAN ORIGIN? (Specify No or Yes - If yes, specify Cuban, Mexican, Puerto Rican, etc.) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
15 RACE - American Indian, Black, White, etc. Specify. <u>White</u>		16 DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary: <u>8</u> College (1-4 or 5+):	
17 FATHER'S NAME (First, Middle, Last) <u>Richard D. Sutherland</u>		18 MOTHER'S NAME (First, Middle, Maiden Surname) <u>Unicy Powers</u>	
19a INFORMANT'S NAME (Type/Print) <u>Bonnie B. Sedler</u>		19b MAILING ADDRESS (Street and Number or Rural Route Number, City or Town, State, Zip Code) <u>7771 St. Andrews Road, Lake Worth, FL 33467</u>	
20a 20a. METHOD OF DISPOSITION <input type="checkbox"/> Burial <input type="checkbox"/> Cremation <input checked="" type="checkbox"/> Removal from State <input type="checkbox"/> Donation <input type="checkbox"/> Other (Specify)		20b PLACE OF DISPOSITION (Name of cemetery, crematory, or other place) <u>Sutherland Cemetery</u>	
20c LOCATION - City or Town, State <u>Bee, Virginia</u>		21a SIGNATURE OF FUNERAL SERVICE LICENSEE OR PERSON ACTING AS SUCH <i>[Signature]</i>	
21b LICENSE NUMBER (of Licensee) <u>1498</u>		21c NAME AND ADDRESS OF FACILITY <u>Tillman Funeral Home, 2170 S. Military Tr. West Palm Beach, FL 33415</u>	
22a To the best of my knowledge, death occurred in the time, date and place and due to the cause(s) as stated. (Signature and Title) <i>[Signature]</i>			
22b On the basis of examination and/or investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner as stated. (Signature and Title) <i>[Signature]</i>			
22c DATE SIGNED (Mo., Day, Yr.) <u>3/30/93</u>		22d HOUR OF DEATH <u>8:15 P. M.</u>	
22e NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		22f DATE SIGNED (Mo., Day, Yr.)	
22g PRONOUNCED DEAD (Mo., Day, Yr.)		22h PRONOUNCED DEAD (Hour)	
24 NAME AND ADDRESS OF CERTIFIER (PHYSICIAN, MEDICAL EXAMINER) (Type or Print) <u>Tan B. Hassin, D.O., 1300 Corporate Center Way, West Palm Beach, Florida 33414</u>			
25a SUBREGISTRAR - SIGNATURE AND DATE <i>[Signature]</i>		25b LOCAL REGISTRAR - SIGNATURE <i>[Signature]</i>	
25c DATE REGISTERED <u>APR 01 1993</u>		26 PART I - Enter the diseases, injuries, or complications that caused the death. Do not enter only the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. <u>RESPIRATORY ARREST MIN</u> <u>CEREBROVASCULAR ACCIDENT MONTHS</u> <u>ARTERIOSCLEROTIC VASCULAR DISEASE YEARS</u>	
27a WAS AN AUTOPSY PERFORMED? (Yes or No)		27b WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? (Yes or No)	
27c CASE REPORTED TO MEDICAL EXAMINER? (Yes or No) <u>No</u>		28 IF FEMALE: WAS THERE A PREGNANCY IN THE PAST 3 MONTHS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
29a IF SURGERY IS MENTIONED IN PART I OR II ENTER CONDITION FOR WHICH IT WAS PERFORMED		30a DATE OF SURGERY (Mo., Day, Year)	
31 PROBABLE MANNER OF DEATH (Specify: Natural, accident, suicide, homicide, or undetermined)		32a DATE OF INJURY (Month, Day, Year)	
32b TIME OF INJURY <u>M</u>		32c INJURY AT WORK? (Yes or No)	
32d DESCRIBE HOW INJURY OCCURRED		32e PLACE OF INJURY - At home, farm, street, factory, etc. (Specify)	
32f LOCATION (Street and Number or Rural Route Number, City or Town, State)			

HRS Form 512, Jul 90 (Replaces previous editions)

THIS IS A CERTIFIED TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE

BY *Irene H. Stevens*

OLIVER H. BOORDE
State Registrar

WARNING: ANY REPRODUCTION OF THIS DOCUMENT IS PROHIBITED BY LAW. DO NOT ACCEPT UNLESS ON SECURITY PAPER WITH LINES AND SECURITY WATERMARK ON BACK AND COLORED BACKGROUND AND GOLD EMBOSSED GREAT SEAL OF THE STATE OF FLORIDA ON FRONT. ALTERATION OR ERASURE VOIDS THIS CERTIFICATION.

5371845



CERTIFICATION OF VITAL RECORD

Reg. Dist. No. 57
Primary Reg. Dist. No. 5701
Registrar's No. 5700 04101

Ohio Department of Health
VITAL STATISTICS
CERTIFICATE OF DEATH

State File No.

1. Decedent's Legal Name (include AKA's if any) (First Middle, LAST, suffix) ZINNIA L COMBS						2. Sex Female		3. Date of Death (Mo/Day/Year) December 31, 2009		
4. Social Security Number 227-18-3889		5a. Age (Years) 87	5b. Under 1 Year Months	5c. Under 1 day Days	5d. Under 1 day Hours	5e. Under 1 day Minutes	6. Date of Birth (Mo/Day/Year) March 24, 1922		7. Birthplace (City and State or Foreign Country) BEE, VIRGINIA	
8a. Residence State OHIO			8b. County MONTGOMERY			8c. City or Town WASHINGTON TOWNSHIP				
8d. Street and Number 160 Cardigan Road						8e. Apt. No.		8f. Zip Code 45459		8g. Inside City Limits? No
9. Ever in US Armed Forces? No		10. Marital Status at Time of Death Widowed (and not remarried)				11. Surviving Spouse's Name (if wife, give name prior to first marriage)				
12. Decedent's Education HIGH SCHOOL GRADUATE OR GED			13. Decedent of Hispanic Origin No			14. Decedent's Race White				
15. Father's Name GARFIELD BOWMAN					16. Mother's Name (prior to last marriage) VERNIE SUTHERLAND					
17a. Informant's Name LINDA KIRBY					17b. Relationship to Decedent Daughter		17c. Mailing Address (Street and Number, City, State, Zip Code) 160 Cardigan Road WASHINGTON TOWNSHIP, OHIO 45459			
18a. Place of Death NonHospital - Hospice Facility						18b. Facility Name (if not institution, give street & number) HOSPICE OF DAYTON INC				
18c. City or Town, State and Zip Code DAYTON, OH 45420						18d. County of Death MONTGOMERY				
19. Signature of Funeral Service Licensing Board Agent <i>[Signature]</i>					20. License Number (of licensee) 007049		21. Name and Complete Address of Funeral Facility TOBIAS FUNERAL HOME INC 5471 FAR HILLS AVE DAYTON, OH 45429			
22a. Method of Disposition Burial					22b. Date of Disposition January 06, 2010		22c. Place of Disposition (Name of Cemetery, Crematory, or other place) David's Cemetery			
22d. Location (City/Town and State) KETTERING, OH					22e. Date of Disposition January 06, 2010					
23. Signature of Registrar <i>[Signature]</i>					24. Use Fee JANUARY 5, 2010		25. District No. 5700			
26a. Name of Registrar JORDAN ROY					26b. Date Burial Permit Issued January 4, 2010		26c. License Number 35.049058			
26d. Date Signed 1/4/2010					27. Name (Last, First, Middle) and Address of Person who Completed Cause of Death REDDY, ANNE M., 324 Wilmington Ave DAYTON, OH 45420					
28. Part I. Enter the disease, injury, or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory arrest, shock, or blood failure. List only one cause on each line. Type or print in permanent blue or black ink.										
Immediate Cause (Final disease or condition resulting in death)	a. EMBOLIC Cerebrovascular LAL Accident								Approximate Interval Between Onset and Death 5 days	
Sequentially list conditions, if any, leading to immediate cause.	b. Due to (or as Consequence of) ATRIAL FIBRILLATION								years	
Enter Underlying Cause (Disease or injury that initiated events resulting in a death)	c. Due to (or as Consequence of) Myocardial								14 years	
Part II. Other significant conditions contributing to death but not resulting in the underlying cause given in Part I.										
29a. Was An Autopsy Performed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					29b. Were Autopsy Findings Available Prior To Completion Of Cause of Death? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Not Applicable					
30. Did Tobacco Use Contribute to Death? <input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> No <input type="checkbox"/> Probably			31. If Female, Pregnancy Status <input checked="" type="checkbox"/> Not pregnant within past year <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> unknown if pregnant within the past year			32. Manner of Death <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Pending Investigation <input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined				
33a. Date of Injury (Mo/Day/Year)		33b. Time of Injury		33c. Place of Injury (e.g., Decedent's home, construction site, restaurant, wooded area)				33d. Injury at Work? <input type="checkbox"/> Yes <input type="checkbox"/> No		
33e. Location of Injury (Street and Number or Rural Route Number, City or Town, State)										
33f. Describe How Injury Occurred:						33g. If Transportation Injury, Specify: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Pedestrian <input type="checkbox"/> Passenger <input type="checkbox"/> Other				

HEA 2724 Rev. 01/07

HEREBY CERTIFY THIS DOCUMENT IS AN EXACT COPY OF THE RECORD ON FILE WITH THE OHIO DEPARTMENT OF HEALTH.

10 JA -5128377

Roy E. Jordan
ROY E. JORDAN, LOCAL REGISTRAR
OFFICE OF VITAL STATISTICS
OHIO DEPARTMENT OF HEALTH & SEAL

Last Will and Testament

of

ZINNIA L. COMBS

I, ZINNIA L. COMBS, of the State of Ohio, being of full age and of sound mind and memory, do make, publish and declare this to be my Last Will and Testament, hereby revoking all wills and codicils by me heretofore made.

ITEM I I direct that all my just debts and funeral expenses be paid out of my estate as soon as practicable after the time of my decease. I direct my executor to pay from the assets of my estate all taxes assessed against my estate or my beneficiaries.

ITEM II All the property, real and personal, of every kind and description, wheresoever situate, which I may own or have the right to dispose of at the time of my decease, I give, bequeath and devise to my spouse, JAMES T. COMBS, to be his in fee simple.

ITEM III In the event my spouse, JAMES T. COMBS, shall predecease me, or is deemed by law to predecease me, then all the property, both real and personal, of every kind and description, wheresoever situate, which I may own or have the right to dispose of at the time of my decease, I give, bequeath and devise between my children, JAMES K. COMBS and LINDA C. KIRBY, equally, to take per stirpes.

ITEM IV I make, nominate and appoint my spouse, JAMES T. COMBS, to be the executor of this my Last Will and Testament, hereby authorizing and empowering my said executor to compound, compromise, settle and adjust all claims and demands in favor of or against my estate; and to sell, at private or public sale, at such prices and upon such terms of credit or otherwise, as he may deem best, the whole or any part of my real or personal property, and to execute, acknowledge and deliver deeds and other proper instruments of conveyance thereof to the purchaser or purchasers. No purchaser from my executor need see to the application of the purchase money to or for the purpose of the trust, but the receipt of my executor shall be a complete discharge and acquittance therefor. I request that no bond be required of my said executor.

In the event that my spouse, JAMES T. COMBS, cannot serve for any reason whatsoever, or predeceases me, or relinquishes his right, then I make, nominate and appoint my children, JAMES K. COMBS and LINDA C. KIRBY, jointly and/or severally to be the co-executors of this my estate with all powers and authority granted in the preceding paragraph, to serve without bond.

IN WITNESS WHEREOF, I have heretofore set my hand at Dayton, Ohio, this 28th day of August, 1996.

COPY
ZINNIA L. COMBS

Signed by the said ZINNIA L. COMBS and by her acknowledged to be her Last Will and Testament, before us and in our presence and by us subscribed as attesting witnesses in her presence and at her request and in the presence of each other this 28th day of August, 1996.

Zt Au J of Dayton, Ohio

Angela K Allen of Dayton, Ohio

TAM:aa uwp\data/wills/combs,j&v