



PERMIT APPLICATION TO DRILL AND OPERATE AN UNCONVENTIONAL WELL

		DEP USE ONLY	
Notes	OGO #	Objection Date - Do not issue before:	
	Client Id	Date Approved:	
	Bond #	API #'s37- _____; _____; and - _____; _____; _____; _____; _____	
	C: _____ G: _____	Special Cond.	
	INV: _____	Watershed Name: Designation: <input type="checkbox"/> HQ <input type="checkbox"/> EV	
APS #	Auth Id	Site Id	PF Id
			SF Id

Please read instructions before you begin filling in this form.

WELL INFORMATION							
Well Operator	DEP ID#	Well API # (if available)	Well Farm Name	Well #			
Address	LAT	° ' "	NAD 83	Project Number	Serial #		
	LONG	° ' "					
City	State	Zip	Municipality Name/ City, Borough, Township		County		
Phone	Fax	Email		USGS 7.5 min. quadrangle map	Section		

<input type="checkbox"/> Check if this is a new address		24/7 Emergency Phone contact number	911 address of well site (if available)
Freshwater Impoundment Name/ Identification	Centralized Impoundment Name/ Identification	Well Pad (cluster) Name/Identification	Borrow Area Name/Identification
Surface Elev	Deepest Formation to be penetrated:	Anticipated TVD	PERMIT TYPE Check applicable. Application is to: <input type="checkbox"/> Drill a new well <input type="checkbox"/> Re-permit expired permit <input type="checkbox"/> Deepen well <input type="checkbox"/> Redrill wellbore <input type="checkbox"/> Alter well <input type="checkbox"/> Other (specify)
Target Formation(s) proposed for production	Anticipated Target Top/Bottom TVD		
Number of wellbore laterals proposed under this application _____ Total feet of wellbore to be drilled under this application _____ Ft. If applying for a permit to rework an existing well not registered or permitted, check this box <input type="checkbox"/> and enter date drilled , if known: _____ (see instructions)			TYPE OF WELL Check applicable. <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Comb. (gas & oil/condensate) <input type="checkbox"/> Other (specify) _____ Configuration <input type="checkbox"/> Vertical <input type="checkbox"/> Horizontal <input type="checkbox"/> Deviated <input type="checkbox"/> Multiple laterals
PNDI Attached: <input type="checkbox"/> Any threatened or endangered "hit" must include a copy of the clearance letter from the applicable agency(ies).			
Application submitted as: Coal well: <input type="checkbox"/> Attach Coal Module CBM well <input type="checkbox"/> Attach Coal Module Non coal well <input type="checkbox"/> Attach justification.			APPLICATION FEE Check applicable. <input type="checkbox"/> Marcellus I <input type="checkbox"/> Unconventional Total Application Fee \$ _____ Bond Agreement Id _____

COORDINATION WITH REGULATIONS AND OTHER PERMITS	Yes	No
1. Will the well be subject to the Oil and Gas Conservation Law ? If "No," go to 2).	<input type="checkbox"/>	<input type="checkbox"/>
a. If "Yes" to #1, is the well at least 330 feet from outside lease or unit boundary?	<input type="checkbox"/>	<input type="checkbox"/>
b. Does the location fall within an area covered by a spacing order?	<input type="checkbox"/>	<input type="checkbox"/>
c. If the well will be multilateral, identify the wellbores on the sketch on page 3 of the plat that will be completed as conservation and non-conservation.		
2. Will either the edge of the disturbed area of any portion of the well site of the unconventional well be within 100 feet, or the vertical well bore be within 300 feet, from the edge of any solid blue lined stream, spring or body of water identified on the most current 7½' topographic quadrangle map or wetland greater than one acre in size or in a wetland?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, is a waiver request (form 5500-FM-OG0057) and site-specific E&S control plan attached?	<input type="checkbox"/>	<input type="checkbox"/>

3. Will the vertical wellbore penetrate or be within 3,000 feet of an active gas storage reservoir boundary? a. If Yes, print the names of: Storage Field: Operator:	<input type="checkbox"/>	<input type="checkbox"/>
4. Is the proposed well location within the permitted area of a landfill ?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will the vertical wellbore of the unconventional well be drilled within 500 feet from any existing building or an existing water supply? a. If "Yes," is written consent from the owner attached? b. If written consent is not attached, is a variance request (form 8000-FM-OOGM0058) attached?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
5.1. Will the vertical wellbore of the unconventional well be drilled within 1,000 feet from any existing water well, surface water intake, reservoir or other water supply extraction point used by a water purveyor? a. If "Yes," is written consent from the owner attached? b. If written consent is not attached, is a variance request (form 8000-FM-OOGM0058) attached?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
6. Will the well be located where it may impact a public resource as outlined in the "Coordination of a Well Location with Public Resources" form 5500-PM-OG0076? If yes, attach a completed copy of the form and clearance letters from applicable agencies.	<input type="checkbox"/>	<input type="checkbox"/>
7. Will any portion of the well site be in a Special Protection High Quality <input type="checkbox"/> (HQ) or Exceptional Value <input type="checkbox"/> (EV) watershed? Provide name of special protection watershed _____	<input type="checkbox"/>	<input type="checkbox"/>
8. Is this well part of a development which requires an Earth Disturbance Permit for Oil and Gas Activities disturbing more than 5 acres? If yes, list the number of the ESCGP approval if the permit has been issued.	<input type="checkbox"/>	<input type="checkbox"/>
9. Is waste, including drill cuttings, from the drilling of this well to be disposed of on this well site?	<input type="checkbox"/>	<input type="checkbox"/>
10. Will the well or well site be located within a defined 100 year floodplain or where the floodplain is undefined, within 100 feet of the top of the bank of a perennial stream or within 50 feet of the top of the bank of an intermittent stream. a. If yes, is a waiver request attached that will protect the Waters of the Commonwealth?	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
11. Is the well to be located within a H ₂ S area pursuant to §78.77a?	<input type="checkbox"/>	<input type="checkbox"/>
12. Attach a current Ownership & Control form 8000-FM-OOGM0118		

Signature of Applicant	The person signing this form attests that they have the authority to submit this application on behalf of the applicant, and that the information, including all related submissions, is true and accurate to the best of their knowledge.		
Signature of Person Authorized to Submit Application	(Print or Type)	Name of Signer:	Date
		Title:	
Application Preparer/Contact:		Phone:	

**PERMIT APPLICATION TO DRILL AND OPERATE
 AN UNCONVENTIONAL WELL
 Record of Notification**

Farm Name - Well #	
Applicant Name	
DEP ID#	
DEP USE ONLY	APS #

List the following: surface landowner; surface landowners and water purveyors with water supplies within 3000 feet; municipality where the well will be drilled; adjacent municipality; municipalities within 3,000 feet of the vertical well bore; gas storage operator if within 3000 feet. Mark the boxes, "X," which show the parties' interests. Use additional forms if you need more space. You are required to notify each of these parties. Notification: Signature below name indicates the party's acknowledgement of receipt of the well location plat and serves as proof of notification	Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies <3000'	Municipalities	Notification Note the means and attach proof. Certified Mail Dates		Return Receipt	Address Affidavit	Written Consent
	Print Name:	Address:	Sent						
Signature									
Print Name:	Address:								
Signature									
Print Name:	Address:								
Signature									
Print Name:	Address:								
Signature									

Record of Written Consent

Written Consent: Signature below indicates the party's approval of the well location, or indicates written consent and waives the 15-day objection period where applicable.
 Check applicable box

	Address:	Date	Surface Owner	Water Well within 500 feet	Building within 500 feet
Print and Sign Name:			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Print and Sign Name:			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Print and Sign Name:			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Print and Sign Name:			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Print and Sign Name:			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>