



- 1) API Well No. 47 - _____ - _____
- 2) UIC Permit No. _____
- 3) Operator's Well Name/No. _____
- 4) Date: _____

STATE OF WEST VIRGINIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL & GAS
UIC WELL WORK PERMIT APPLICATION

- 5) WELL TYPE: Class 1 (Hazardous or Non-Hazardous Waste) Class 2D (Oil/Gas Waste Disposal)
 Class 2R (Secondary Recovery) Class 3 (Solution Mining) Class 6 (Carbon Sequestration)
 Deep Shallow

6) LOCATION: County _____ District: _____ Quadrangle: _____
 Watershed: _____ Surface Elevation: _____

7) WELL OPERATOR: _____ 8) DESIGNATED AGENT _____
 Address _____ Address _____

9) OIL & GAS INSPECTOR TO BE NOTIFIED 10) DRILLING CONTRACTOR
 Name _____ Name _____
 Address _____ Address _____

- 11) PROPOSED WELL WORK: New Drill Drill Deeper Redrill Stimulate Convert
 Plug off old formation Perforate new formation

Other physical change in well (specify) _____

12) GEOLOGIC TARGET FORMATION _____ Depth _____ Feet (top) to _____ Feet (bottom)

13) Estimated Depth of Completed Well, (or actual depth of existing well): _____ Feet

14) Approximate water strata depths: Fresh _____ Feet Salt _____ Feet

15) Is coal being mined in the area? Yes No Approximate coal seam depths: _____

16) Approximate void depths (coal, karst, other) _____

17) Virgin reservoir fracture pressure _____ psig. Estimated reservoir fracture pressure _____

18) MAXIMUM PROPOSED INJECTION OPERATIONS: Volume per hour _____ bbl. Bottom hole pressure _____

19) DETAILED IDENTIFICATION OF MATERIALS TO BE INJECTED, INCLUDING ADDITIVES:

20) FILTERS (if applicable) _____ 23) CATHODIC PROTECTION _____

21) DESCRIBE PROPOSED WELL WORK AND FRACTURING METHODS IN DETAIL (attach additional sheets)

22) CASING AND TUBING PROGRAM

TYPE	PIPE SPECIFICATIONS					FOOTAGE INTERVALS			Packers
	Size	Grade	Weight per ft.	New	Used	Used for Drilling	Left in Well	Cement Fill (Cu.Ft.)	
Conductor									Kinds
Fresh Water									
Coal									Sizes
Intermediate									
Production									Depth Set
Tubing									
Liners									Perforations
									Top
									Bottom

23) APPLICANTS OPERATING RIGHTS for the proposed activity were acquired from _____ by deed lease other contract dated _____ of record in the _____ County Clerk's office in _____ Book _____ Page _____

24) SIGNATURE: I certify under penalty of law that all the information submitted above is true and correct to the best of my knowledge. _____ Date: _____

1). Date: _____
2.) Operator's Well Number _____
State County Permit
3.) API Well No.: 47- _____ - _____

STATE OF WEST VIRGINIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION, OFFICE OF OIL AND GAS
NOTICE AND APPLICATION FOR A WELL WORK PERMIT

4) Surface Owner(s) to be served: (a) Name _____ Address _____
(b) Name _____ Address _____
(c) Name _____ Address _____
6) Inspector Address _____ Telephone _____
5) (a) Coal Operator Name _____ Address _____
(b) Coal Owner(s) with Declaration Name _____ Address _____
(c) Coal Lessee with Declaration Name _____ Address _____

TO THE PERSONS NAMED ABOVE TAKE NOTICE THAT:

____ Included is the lease or leases or other continuing contract or contracts by which I hold the right to extract oil and gas

OR
____ Included is the information required by Chapter 22, Article 6, Section 8(d) of the Code of West Virginia (see page 2)

I certify that as required under Chapter 22-6 of the West Virginia Code I have served copies of this notice and application, a location plat, and accompanying documents pages 1 through ____ on the above named parties by:

- _____ Personal Service (Affidavit attached)
- _____ Certified Mail (Postmarked postal receipt attached)
- _____ Publication (Notice of Publication attached)

I have read and understand Chapter 22-6 and 35 CSR 4, and I agree to the terms and conditions of any permit issued under this application.

I certify under penalty of law that I have personally examined and am familiar with the information submitted on this application form and all attachments, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate and complete.

I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Well Operator _____
By: _____
Its: _____
Address: _____
Telephone: _____
Email: _____

Subscribed and sworn before me this _____ day of _____, _____

____ Notary Public

My Commission Expires _____

Oil and Gas Privacy Notice

The Office of Oil and Gas processes your personal information, such as name, address and phone number, as a part of our regulatory duties. Your personal information may be disclosed to other State agencies or third parties in the normal course of business or as needed to comply with statutory or regulatory requirements, including Freedom of Information Act requests. Our office will appropriately secure your personal information. If you have any questions about our use of your personal information, please contact DEP's Chief Privacy Officer at depprivacyofficer@wv.gov

SURFACE OWNER WAIVER

County _____

Operator _____

Operator well number _____

INSTRUCTIONS TO SURFACE OWNERS NAMED ON PAGE WW2-A

The well operator named on page WW2A is applying for a permit from the State to do oil or gas well work. (Note: If the surface tract is owned by more than three persons, then these materials were served on you because your name appeared on the Sheriff's tax ticket on the land or because you actually occupy the surface tract. In either case, you may be the only owner who will actually receive these materials.) See Chapter 22 of the West Virginia Code. Well work permits are valid for 24 months. If you do not own any interest in the surface tract, please forward these materials to the true owner immediately if you know who it is. Also, please notify the well operator and the Office of Oil and Gas.

NOTE: YOU ARE NOT REQUIRED TO FILE ANY COMMENT.

WHERE TO FILE COMMENTS AND OBTAIN ADDITIONAL INFORMATION:

Chief, Office of Oil and Gas
Department of Environmental Protection
601 57th St. SE
Charleston, WV 25304
(304) 926-0450

Time Limits and methods for filing comments. The law requires these materials to be served on or before the date the operator files his Application. You have **FIFTEEN (15) DAYS** after the filing date to file your comments. Comments must be filed in person or received in the mail by the Chief's office by the time stated above. You may call the Chief's office to be sure of the date. Check with your postmaster to ensure adequate delivery time or to arrange special expedited handling. If you have been contacted by the well operator and you have signed a "voluntary statement of no objection" to the planned work described in these materials, then the permit may be issued at any time.

Comments must be in writing. Your comments must include your name, address and telephone number, the well operator's name and well number and the approximate location of the proposed well site including district and county from the application. You may add other documents, such as sketches, maps or photographs to support your comments.

The Chief has the power to deny or condition a well work permit based on comments on the following grounds:

- 1) The proposed well work will constitute a hazard to the safety of persons.
- 2) The soil erosion and sediment control plan is not adequate or effective;
- 3) Damage would occur to publicly owned lands or resources;
- 4) The proposed well work fails to protect fresh water sources or supplies;
- 5) The applicant has committed a substantial violation of a previous permit or a substantial violation of one or more of the rules promulgated under Chapter 22, and has failed to abate or seek review of the violation..."

If you want a copy of the permit as it is issued or a copy of the order denying the permit, you should request a copy from the Chief.

List of Water Testing Laboratories. The Office maintains a list of water testing laboratories which you can hire to test your water to establish water quality prior to and after drilling. Contact the Chief to obtain a copy.

VOLUNTARY STATEMENT OF NO OBJECTION

I hereby state that I have read the instructions to surface owners and that I have received copies of a Notice and Application for a Well Work Permit on Form WW2-A, and attachments consisting of pages 1 through ___ including a work order on Form WW2-B, a survey plat, WW-9, and a soil and erosion plan, all for proposed well work on my surface land as described therein.

I further state that I have no objection to the planned work described in these materials, and I have no objection to a permit being issued on those materials.

FOR EXECUTION BY A NATURAL PERSON

FOR EXECUTION BY A CORPORATION, ETC.

Signature

Date

Print Name

Company Name _____
By _____
Its _____ Date _____

Signature

Date

WW-2A Coal Waiver

COAL OPERATOR, OWNER, OR LESSEE WAIVER

County _____
Operator _____ Operator's Well Number _____

INSTRUCTIONS TO COAL OPERATOR, OWNER, OR LESSEE

To the coal operator, owner, or lessee named on page WW2-A. You are hereby notified that any objection you wish to make or are required to make by WV Code 22-6-15, 16 or 17, must be filed with the Chief of the Office of Oil and Gas within fifteen (15) days after the receipt of this application by the Office. Mail objections to:

Chief, Office of Oil and Gas
Department of Environmental Protection
601 57th St. SE
Charleston, WV 25304
(304) 926-0499 extension 1654

WAIVER

The undersigned coal operator _____/ owner _____/ lessee _____/ of the coal under this well location has examined this proposed well location. If a mine map exists which covers the area of well location, the well location has been added to the mine map. The undersigned has no objection to the work proposed to be done at this location, provided, the well operator has complied with all applicable requirements of the West Virginia Code and the governing regulations.

FOR EXECUTION BY A NATURAL PERSON

FOR EXECUTION BY A CORPORATION, ETC.

Signature Date _____

Company Name _____
By _____
Its _____ Date _____

Signature Date _____

WW-2B1
(5-12)

Well No. _____

West Virginia Department of Environmental Protection
Office of Oil and Gas

NOTICE TO SURFACE OWNERS

The well operator named below is preparing to file for a permit from the state to drill a new well. Before a well work permit can be filed with the Chief of the Office of Oil and Gas, the well operator is required to have given notice of the right to request water well or spring analytical testing. This notice shall be given to the owners or occupants of land which have a water well or spring being utilized for human consumption, domestic animals, or other general use and which is located within 1000 feet of the proposed well site.

With this form, the operator is giving you notice of your right to request analytical testing. The operator is required to sample and analyze the water wells or springs of all owners or occupants who request it. Therefore, if you wish to have your water well or spring tested, contact the operator named below.

All sampling shall be completed prior to drilling. Within thirty (30) days of the receipt of such sample analyses the operator shall submit the results to the Chief of the Office of Oil and Gas and to the owners or occupants who may have requested them.

Be advised, you have the right to sample and analyze any water supply at your own expense.

Listed below is the laboratory chosen by operator to perform analysis, and contactor chosen to collect sample.

Certified Laboratory Name _____
Sampling Contractor _____

Well Operator _____
Address _____

Telephone _____

FOR OPERATOR'S USE ONLY: Below, or on an attached page, list those persons which were given this notice. Place an asterisk beside the one(s) that contacted you and requested sampling and analyses. If there were no requests made, indicate by underling which one you have selected to sample and analyze. If there are no water wells or springs within 1000 feet of the proposed site, the Chief may require the operator to test wells up to 2000 feet from the proposed site.

STATE OF WEST VIRGINIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS
FLUIDS/ CUTTINGS DISPOSAL & RECLAMATION PLAN

Operator Name _____ OP Code _____

Watershed (HUC 10) _____ Quadrangle _____

Do you anticipate using more than 5,000 bbls of water to complete the proposed well work? Yes No

Will a pit be used? Yes No

If so, please describe anticipated pit waste: _____

Will a synthetic liner be used in the pit? Yes No If so, what ml.? _____

Proposed Disposal Method For Treated Pit Wastes:

- _____ Land Application (if selected provide a completed form WW-9-GPP)
- _____ Underground Injection (UIC Permit Number _____)
- _____ Reuse (at API Number _____)
- _____ Off Site Disposal (Supply form WW-9 for disposal location)
- _____ Other (Explain _____)

Will closed loop system be used? If so, describe: _____

Drilling medium anticipated for this well (vertical and horizontal)? Air, freshwater, oil based, etc. _____

-If oil based, what type? Synthetic, petroleum, etc. _____

Additives to be used in drilling medium? _____

Drill cuttings disposal method? Leave in pit, landfill, removed offsite, etc. _____

-If left in pit and plan to solidify what medium will be used? (cement, lime, sawdust) _____

-Landfill or offsite name/permit number? _____

Permittee shall provide written notice to the Office of Oil and Gas of any load of drill cuttings or associated waste rejected at any West Virginia solid waste facility. The notice shall be provided within 24 hours of rejection and the permittee shall also disclose where it was properly disposed.

I certify that I understand and agree to the terms and conditions of the GENERAL WATER POLLUTION PERMIT issued on April 1, 2016, by the Office of Oil and Gas of the West Virginia Department of Environmental Protection. I understand that the provisions of the permit are enforceable by law. Violations of any term or condition of the general permit and/or other applicable law or regulation can lead to enforcement action.

I certify under penalty of law that I have personally examined and am familiar with the information submitted on this application form and all attachments thereto and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine or imprisonment.

Company Official Signature _____

Company Official (Typed Name) _____

Company Official Title _____

Subscribed and sworn before me this _____ day of _____, 20_____

Notary Public

My commission expires _____

Proposed Revegetation Treatment: Acres Disturbed _____ Prevegetation pH _____

Lime _____ Tons/acre or to correct to pH _____

Fertilizer type _____

Fertilizer amount _____ lbs/acre

Mulch _____ Tons/acre

Seed Mixtures

Temporary

Permanent

Seed Type lbs/acre

Seed Type lbs/acre

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Attach:

Maps(s) of road, location, pit and proposed area for land application (unless engineered plans including this info have been provided). If water from the pit will be land applied, provide water volume, include dimensions (L, W, D) of the pit, and dimensions (L, W), and area in acres, of the land application area.

Photocopied section of involved 7.5' topographic sheet.

Plan Approved by: _____

Comments: _____

Title: _____ Date: _____

Field Reviewed? (_____) Yes (_____) No

STATE OF WEST VIRGINIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS
GROUNDWATER PROTECTION PLAN

Operator Name: _____

Watershed (HUC 10): _____ Quad: _____

Farm Name: _____

1. List the procedures used for the treatment and discharge of fluids. Include a list of all operations that could contaminate the groundwater.

2. Describe procedures and equipment used to protect groundwater quality from the list of potential contaminant sources above.

3. List the closest water body, distance to closest water body, and distance from closest Well Head Protection Area to the discharge area.

4. Summarize all activities at your facility that are already regulated for groundwater protection.

5. Discuss any existing groundwater quality data for your facility or an adjacent property.

6. Provide a statement that no waste material will be used for deicing or fill material on the property.

7. Describe the groundwater protection instruction and training to be provided to the employees. Job procedures shall provide direction on how to prevent groundwater contamination.

8. Provide provisions and frequency for inspections of all GPP elements and equipment.

Signature: _____

Date: _____