

PERMIT APPLICATION TO DRILL AND OPERATE A WELL COAL MODULE

Coal module attachment to address coal related issues with drilling, altering, or operating wells.		
	Yes	No
1. Will the well penetrate a workable coal seam ? If "No," attach justification and supporting documentation a. Have the coal rights been severed from the surface estate	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>
2. If the well will penetrate a workable coal seam and the well is a "non-conservation" gas well, does the location comply with the distance requirements of section 7 of the Coal and Gas Resource Coordination Act? (At least 1,000 feet from all existing wells). 58 P.S. §§ 501 - 518. a. If "No," is the required exception request attached? (Check N/A if re-working an existing well. <input type="checkbox"/> N/A) b. Will the well be part of a Well Cluster that is an area within a well pad intended to host multiple horizontal wells and which comprises an area no greater than 5,000 square feet?	<input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
3. Will this well be drilled in solid coal or into an open underground void?	solid coal <input checked="" type="checkbox"/>	open void <input checked="" type="checkbox"/>
	Yes	No
4. Will the well be drilled through an operating coal mine , or within 1,000 feet of the boundary? a. If "Yes," provide the names of: Mine _____ and Operator _____ b. If yes, does it meet the Gas Well Pillar Study? 58 P.S. § 512.1. c. If yes, provide a copy of the most recent underground mine workings map that shows well location, a map scale, the lease/unit boundary, and a north arrow.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
5. If the well will be a Coal Bed Methane (CMB) well is the alternate method request of drilling/completing the well attached <i>Proposed Alternate Method or Material for Casing, Plugging, Venting or Equipping a Well</i> form 8000-PM-OOGM0024?	<input type="checkbox"/>	<input type="checkbox"/>
6. If the well is a CBM well, has the surface landowner been notified and provided a copy of <i>Landowner Notification of Right to Participate in Alternate Dispute Resolution to Coal Bed Methane Wells</i> , form 8000-FM-OOGM0052?	<input type="checkbox"/>	<input type="checkbox"/>

COAL MODULE RECORD OF NOTIFICATION / WRITTEN CONSENT

List the following: all coal owners and lessees of all underlying coal seams; operators of operating coal mines at the proposed location; and coal operators with Operating Coal Mine. Mark the boxes "X" that show the parties' interests. Use additional forms if you need more space. You are required to notify each of these parties.		Coal Owner	Coal Lessee	Operator of Operating Coal Miner	Within 1,000 ft. Coal Mine Operator	Notification Note the Means and Attach Proof			
						Certified Mail Dates		Address Affidavit	Written Consent
						Sent	Return Receipt		
Name Joseph Herriott	Address PO Box 62 McClellandtown, PA 15458	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2/26/20	2/27/20	<input type="checkbox"/>	<input type="checkbox"/>
Name Dolores Berkshire	Address 262 College Avenue McClellandtown, PA 15458	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2/26/20	2/27/20	<input type="checkbox"/>	<input type="checkbox"/>
Name	Address	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Name	Address	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Name	Address	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Optional: Signature below indicates the party's approval of the well location and waives the 15-day objection period. Check applicable box.									
Coal <input type="checkbox"/> Operator, <input type="checkbox"/> Owner, or <input type="checkbox"/> Lessee								Date	
Coal <input type="checkbox"/> Operator, <input type="checkbox"/> Owner, or <input type="checkbox"/> Lessee								Date	
Coal <input type="checkbox"/> Operator, <input type="checkbox"/> Owner, or <input type="checkbox"/> Lessee								Date	
Coal Operator within 1,000 feet of proposed location								Date	