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COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
Oil & Gas Management Program

877476

DEP USE ONLY	
Auth # 1231071	APS # 973018
Site # 741195	PF # 741446
Client # 304679	SF # 1041985

Application for Inactive Well Status

Well Operator LPR Energy, LLC		DEP Client ID # 304679	Well Permit or Registration Number 37-051-24442	
Address 2 E. Market Street, Suite 1			Well Farm Name Hall Unit	Well # 3H
City Clearfield	State PA	Zip Code 16830	County Fayette	Municipality Henry Clay Township
Phone 8147656300	Fax 8147656305	Bond Instrument No. LOCOSL03999	Is this an application for annual extension of inactive status? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Condition of the Well Describe in detail how the condition of the well satisfies the criteria for approval of inactive status. See 25 Pa. Code §§ 78.102(i), (2)(i) or (ii) and (3). Use additional sheets if necessary. If available, attach well records, driller's logs, and other information describing well casing, cement, equipment, and any other pertinent information.	Well Type: <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Combination Oil & Gas <input type="checkbox"/> Injection <input type="checkbox"/> Storage <input type="checkbox"/> Disposal		
	Casing Diameters: 20"	Casing Lengths: 64'	Type and amount of cement (sacks) used for surface casing: 430 sks/Type 1
	13 3/8"	588'	Tubing or Production Casing Pressure (current): 0 psi
	9 5/8"	1953'	If an oil well, state the depth to fluid in the surface casing: n/a
	Annulus Pressure (current - between tubing or production casing and surface casing): 0 psi		
Tubing or production casing diameter: N/A	Tubing or production casing length: N/A	Is the annulus open to atmosphere? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Other information about the well's condition:
Only the vertical was drilled.

Future Use of the Well Describe a viable plan, in accordance with 25 Pa. Code § 78.102(4), explaining the intended future use of the well within a reasonable time. Use additional sheets if necessary. Provide the information requested below and any other information necessary for DEP to make a determination on inactive status for this well.	Provide certification that one of the following applies (check one): <input checked="" type="checkbox"/> Significant reserves remain in place and I plan to return the well to production.
	The well will be used for: <input type="checkbox"/> Disposal <input type="checkbox"/> Storage <input type="checkbox"/> Observation <input type="checkbox"/> Injection - Recovery <input type="checkbox"/> Other (describe)

This well will be returned to use in: Month: May Year: 2019

State your plan for future use of the well.

We're currently evaluating the economics of building a pipeline to the Hall Well Pad. If the economics do not support the cost of building the pipeline infrastructure then we will proceed with Plugging and Abandoning the well by May, 2019.

Signature of Applicant (Well Operator) Signature: Date: 4/16/2018 Print or type signer's name and title: Christy Fulton - Regulatory & Compliance Spec.		DEP USE ONLY <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied by (DEP Manager): Date: 9/27/18	
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