

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

DEP	DEP USE ONLY							
1244357	APS # 9765a8							
Site # 73589 S	73,177 S							
Client # 304 67 9	SF # 1015955							

## **Application for Inactive Well Status**

Well Operator				DEP Client ID #		Well Permit or Registration Number				
LPR Energy, LL0				304679		37-051-24367				
Address						Well Farm Name		Well#	Serial #	
2 E. Market Street, Suite 1						Humberston Unit		1H		
City State			Zip Code 16830		County Fayette	Municipality Henry Cla	)\/	,		
Phone	1.23			A See Like No. 140				ау		
8147656300	814765	6305	Bond Instrument No. LOCOSL03999			Is this an application for annual extension of inactive status?			☐ 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: ☐ Gas ☐ Oil ☐ Combination Oil & Gas ☐ Injection ☐ Storage ☐ Disposal										
Casing Diameters: 20"					Type and amount of cement (sacks) used for surface casing: 430 sks Class 1 + Additives					
13 3/8"				Tub		bing or Production Casing Pressure If an oil w		oil well, state the depth to		
9 5/8"	1813' (KB)				Ann	ulus Pressure (current - between tubing or production casing and surface cas  0 psi			ace casing):	
Tubing or production casing diameter: 5 1/2	Tubing or production casing diameter: 5 1/2"  Tubing or production casing length: 1267				ls t	s the annulus open to atmosphere? 🛛 Yes 🔲			lo	
Other information about the well's condition:  2 Stages Completed  RECEIVED  SEP 04 2018  DEP Southwest Region Oil & Gas										
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):  Significant reserves remain in place and I plan to return the well to production.										
The well will be used for:   Disposal  Storage  Observation  Injection – Recovery  Other (describe)										
This well will be returned to use in: Month: October Year: 2019										
State your plan for future use of the well.  LPR will begin production on nearby wells by the end of October, 2018. The results of these wells will help to evalute the economics of building a pipeline to the Humberston 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 October 2019.										
Signature of Applicant (Well Operator)				DEP US	E ONLY					
Signature			Da 8/31/2	nte 018	J	Approved	Denied		Date	
Print or type signer's name and title: Chris	ty Fulton - Re	egulatory &	Complia	nce Spec.	Dy —	(DEP Manager):		10	8/01/	