

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

DEP USE ONLY							
129851	APS#						
Site #2570(0	PF #						
Client #	SF#						

Application for Inactive Well Status

Well Operator DEP Client ID #						Well Permit or Registration Number					
LPR Energy, LLC 304679				304679		37-051-24325					
Address						Well Farm Name	8	Well # Serial #			
2 E. Market Street, Suite 1						Burnworth U	Jnit		1H		
City State Zip Code				Zip Code		County		Municipality			
Clearfield			16830		Fayette		Henry Cla	ıy Townsl	nip		
1000 CONTRACTOR 1000 CONTRAC				rument No.			lication for annua	l			
8147656300	147656300 8147656305 LOCOSL039			SL03999		extension of in	nactive 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: Casing Length 60'			1 .			Type and amount of cement (sacks) used for surface casing: 110 sks/Type 1					
13 3/8" 400'						ubing or Production Casing Pressure current): 0 psi If an oil well, state the depth to fluid in the surface casing:					
9 5/8" 1996'					Annulus Pressure (current - between tubing or				AND AND A CONTRACTOR OF THE AND		
Tubing or production Tubing or produc				١,٠	Is the annulus open to atmosphe				es 🔲 N	0	
casing diameter: 5 1/		casing length:	12,000								
Other information about the well's condition: N/A											
IN/A								Dr			
_								KL	CEIVED		
								DEC	ECEIVED 1 0 2019	7	
								DEL	Citien		
								OIL	& GAS		
									CAN		
Future Use 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											
of the Well				DEP to make a	a det	ermination on i	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 Dobservation Injection – Recovery Other (describe)											
This well will be returned to use in: Month: October Year: 2020											
State your plan for future use of the well.											
We're currently evaluating nearby gas production and the economics of building a pipeline to the Burnworth 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.											
		// 11 6									
Signature of	Applicant	(Well Op				TO THE REAL PROPERTY.	DEP USE	: ONLY	Section .		
Signature			9/20/2	ate 2010	7	Approved	d □ D	enied	г	Date	
- Transp			312012	.U 18	by	(DEP Manag	94ptt (***********************************		1	1	
Print or type signer's V									12/10		
name and title: Christy Fulton - Regulatory & Compliance Spec											