

# PERMIT APPLICATION TO DRILL AND OPERATE AN UNCONVENTIONAL WELL Record of Notification

US Well No. (API No.)
Edenborn/RGGS B M15H
37-051-24689

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Mail" has	Mail has not been uploaded, copies of the well plat have been sent via certified mail and I have received a return receipt verifying delivery.													
Signature of Person Authorized to Sub	mit Application		(Print or Type)			Name of Signer: Kenneth D. Martz								
Kenneth D. Martz Title							Title: Permitting Team Lead 2/11/202							
List the following: gurface landowners aurface le				0011	***							fication	,	
List the following: surface landowner, surface lar well will be drilled; adjacent municipality; munici	palities within 3.000 fee	eyors with water s	suppiles within 3,01 Il bore: das storad	oo reet; municip e operator if wi	thin 3 000 feet	_	ator	δ		Cortifie	Note the mean: d Mail Dates	eans and attach proof.		
Mark the boxes, "X," which show the parties' in	terests. Use additional	forms if you need	more space. You	are required to	notify each of	wne	ber	wne yors plies		Ceruie	I Ividii Dates	-		
these parties.	naliantan tha maut	!a aalemassila da		-!4 - 841		andc	ge (	ando urve sup	ties				1	
Notification: Signature below name i plat and serves as proof of notification		's acknowledg	gement of rece	eipt of the w	ell location	ce Li	Stora	ce La ter P vater	ipali			ľ		
plat and serves as proof of flotificati	OII					Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies	Municipalities	Sent	Return Rece	Address ipt Affidavit	Written Consent	
Print Name: Commonwealth of Penr	sylvania Addres	: 2001 Elme	erton Ave	*		- ()		0) 80 S V	-	COIN	TTOTALLITTOGG	Andavit	Consent	
Commonwealth of Fem	isylvallia   1.15.55	1	g, PA 17110			х				1/7/20	1/9/20		1	
Signature			,,							1///20	1/3/20			
Print Name: Mark R. Cerullo ETAL	Addres	: 233 Gates	Road										-	
Adah, PA								х		1/7/20	1/9/20		1	
Signature		1.13.17, 1.1.23								-, -,   -, -, -		1		
Print Name: Michael & Charity P. Karlowicz Address: 375 Gates			Road											
Adah, PA			· -					х		1/7/20	1/13/20		1	
Signature														
Print Name: Robert Jr. & Pat Sterbur:	zel Address	: PO Box 33	7											
	ľ	McClellan	dtown, PA 15	458				Х		1/7/20	1/8/20		1 1	
Signature														
Print Name: Robert L. & Patricia Steri	butzel Address	: PO Box 33	7											
		McClelland	dtown, PA 15	458		l		. X		1/7/20	1/8/20			
Signature														
			Record	of Writ	tten Coi	nsei	nt							
Written Consent: Signature below in	dicates the party'	approval of t	he well locati	on, or indic	ates written o	conser	nt and	waives the	e 15-c	day objection	period whe	re applicable.		
							Check applicable box							
						urface	Owne	r	Wate	r Well within 5	00 feet	Building withi	n 500 feet	
Print and Sign Name:	Address:		Date											
Print and Sign Name:	Address:		Date								-			
Print and Sign Name:	Address:		Date											



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Signature of Applicant  I hereby certify that, for all interested parties identified on the plat of this application for which written consent or an "Affidavit of Non-Delivery of Certified Mail" has not been uploaded, copies of the well plat have been sent via certified mail and I have received a return receipt verifying delivery.												
Signature of Person Authorized to Submit Ap	plication	(	Print or Type)	Name of Signer:						Date		
				Title:	Title:							
List the following: surface landowner; surface landowners and water purveyors with water supplies within 3,000 feet; municipality where the										Notifica Note the means ar		
well will be drilled; adjacent municipality; municipalities	vithin 3,000 feet o	f the vertical well	bore; gas storage operator if within	3,000 feet.	er	rator	ers S S		Certified	Mail Dates	iu attacii prooi.	
Mark the boxes, "X," which show the parties' interests. these parties.	Use additional fo	ms if you need m	nore space. You are required to no	tify each of	down	Ope	down veyor upplie	S				
Notification: Signature below name indica	es the party's	acknowledge	ement of receipt of the well	location	Lan	orage	r Pur Iter su	alitie				
plat and serves as proof of notification					Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies	Aunicipalities	Sent	Return Receipt	Address Affidavit	Written Consent
Print Name: James Matthew Brown	Address:	54 W. Elm	Street		<i>O</i> )	<u> </u>	() ∞ ≤ V	2	Jent	return receipt	Tillidavit	CONSCIR
Time value. James wateriew brown		Fairchance					Х		1/7/20	1/11/20		
Signature												
Print Name: Luzerne Township	Address:	·						.,	4 /7 /20	4 /0 /20		
Brownsvil			e, PA 15417					Х	1/7/20	1/8/20		
Signature Print Name: German Township	Address:	s: 2 Long Street										
		McClellandtown, PA 15458						Х	1/7/20	1/8/20		
Signature												
Print Name: Redstone Township	Address:	225 Twin F						.,	4 /7 /20	4 /0 /20		
Grindstone			e, PA 15442					Х	1/7/20	1/9/20		
Signature Print Name: Menallen Township	Address:	427 Searig	ht Herbert Road									
Print Name. We name in Township	riddi 033.	_	Uniontown, PA 15401					Х	1/7/20	1/8/20		
Signature												
			Record of Writte	<u>en Co</u>	nse	nt						
Written Consent: Signature below indicate	s the party's	approval of th	ne well location, or indicate	es written	conse	nt and	d waives th	e 15-	day objectior	period where	applicable.	
									heck applicable l			
				,	Surface Owner Water			er Well within 5	00 feet E	uilding with	n 500 feet	
	ess:		Date									
Print and Sign Name: Add	ess:		Date									
Print and Sign Name: Add	ress:		Date									



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				Title:	Title:							
										Notifica		
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Mark the boxes, "X," which show the parties' interests.					Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies		Octune	i Wali Dates		
these parties.  Notification: Signature below name indicat	es the narty's	acknowledgem	ent of receipt of the well	location	Land	rage	Land Purv er sup	Municipalities				
plat and serves as proof of notification	os trio purty s	dokilowicageli	ioni or recorpt or the wen	iocation	face	s Stor	Surface   Water with water	nicipa			Address	Written
		1			Sur	Gas	Sur & V with	Mui	Sent	Return Receipt	Affidavit	Consent
Print Name: South Union Township	Address:	151 Townshi						v	1 /7 /20	1 /0 /20		
Signature		Uniontown, PA 15401						Х	1/7/20	1/8/20		
Print Name: Georges Township	Address:	1151 Townsh	ip Drive									
Uniontown			PA 15401					Χ	1/7/20	1/8/20		
Signature												
Thirthanic. Wicholson Township			e Old Frame Road					х	1/7/20	1/8/20		
Signature		Smithfield, P	4 13476					^	1///20	1/0/20		
Print Name: Borough of Masontown	Address:	2 Court Aven	ue									
		Masontown, PA 15461						Χ	1/7/20	1/9/20		
Signature												
Print Name: Cumberland Township	Address:	100 Municipa Carmichaels,						х	1/7/20	1/8/20		
Signature		Carmichaeis,	FA 13320					^	1///20	1/0/20		
0.9.14.4.		R	ecord of Writte	en Co	nse	nt					•	
Written Consent: Signature below indicate	s the party's	approval of the	well location, or indicate	s written	conse	nt and	d waives th	e 15-	day objection	period where	applicable.	
								CI	neck applicable l	юх		
						Owne	er	Wate	er Well within 5	00 feet E	uilding withi	n 500 feet
Print and Sign Name: Addi	ess:		Date									
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plat and serves as proof of			uoo			Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies	Municipalities			Addr	ess	Written
			I			Sur	Gas	Sur & V with	M	Sent	Return Receip	Affid	avit	Consent
Print Name: Monongahela	Township	Address:	-	Ridge Road					\	4 /7 /20	4 /0 /20			
Signature			Greensbor	o, PA 15338					Х	1/7/20	1/8/20			
		Address:	XXXX											
Print Name: XXXX Signature	5	Addicss.	7000											
Print Name: XXXX Signature	9	Address:	XXXX											
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									CI	neck applicable l	хос			
			;	Surface	Owne	er	Wate	er Well within 5	00 feet	Building	within	500 feet		
Print and Sign Name:	Address:		Date											
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