



OHIO DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL AND GAS RESOURCES MANAGEMENT

2045 MORSE RD., BLDG. F-2, COLUMBUS, OH 43229-6693
Phone: (614) 265-6922 • Fax: (614) 265-6910



HORIZONTAL WELL SITE CONSTRUCTION APPLICATION

(REVISED 0715)

APPLICANT INFORMATION

Name of Applicant: PDC Energy	Date: 9/18/2015
Name of Proposed Well Site: Neff	
Applicant Address: 216C State Route 821 Marietta, OH 45750	
Email Address: Jenifer.Hakkarinen@pdce.com	
Phone Number: (740)336-7831	

IF A BUSINESS ENTITY, LIST THE STATUTORY AGENT AND INCLUDE A CERTIFIED COPY OF APPOINTMENT

Name: CSC-Lawyers Incorporating Service		
Address: 50 W. Broad St Suite 1800 Columbus OH 43215		

LOCATION OF WELL SITE

County: Guernsey	Township: Wills
Section/Lot Number: 23	

CENTERLINE OF ACCESS ROAD AT PUBLIC RIGHT-OF-WAY (decimal degree, six significant figures)

Latitude: 40.005019	Longitude: -81.391141
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PROFESSIONAL ENGINEER OF RECORD

Name: Peter Clarke		
Ohio Professional Engineering License Number: E-74542		
Address: 104 Newell Ave St Clairsville OH 43950		

EMERGENCY CONTACT INFORMATION

911 Emergency Address of Well Site: 62755 Salem Rd Salesville OH 43778		
Name: Blake Roush	Phone Number: 740-336-7831	
Email Address: Blake.Roush@pdce.com		

FEDERAL PERMITS OBTAINED

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Detailed Drawings	<input checked="" type="checkbox"/> Dust Control Plan
<input checked="" type="checkbox"/> Emergency Release Conveyance Map	<input checked="" type="checkbox"/> Geotechnical Report
<input checked="" type="checkbox"/> Sediment and Erosion Control Plan	<input checked="" type="checkbox"/> Stormwater Hydraulic Report
<input checked="" type="checkbox"/> Well Site Boundary GIS Files	



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I, the undersigned, being fully sworn, depose and state under penalties of law, that I am authorized to make this application, that this application was prepared by me or under my supervision and direction, and that the facts stated herein are true, correct, and complete, to the best of my knowledge.

I certify that the horizontal well site will comply with or is currently in compliance with all provisions of Chapter 1509 ORC, Chapter 1501 OAC, and all terms and conditions of orders and permits issued by the Chief, Division of Oil and Gas Resources Management.

J. Hakkarinen

(Signature of Applicant)

Jenifer Hakkarinen

Name (type or print)

Regulatory Tech

Title

SWORN TO AND SUBSCRIBED BEFORE ME THIS 18th day of September, 20 15

Laurel J. Brown

(Signature of Notary Public)

7-24-2017

(Date Commission Expires)

FOR ODNR USE ONLY (check all that apply)

<input type="checkbox"/>	Detailed Drawings
<input type="checkbox"/>	PE Signed and Sealed
<input type="checkbox"/>	PS Signed and Sealed
<input type="checkbox"/>	Emergency Release Conveyance Map
<input type="checkbox"/>	Sediment and Erosion Control Plan
<input type="checkbox"/>	Dust Control Plan
<input type="checkbox"/>	Geotechnical Report
<input type="checkbox"/>	Stormwater Hydraulic Report
<input type="checkbox"/>	Well Site Boundary GIS Files
Well Site Identification Number (provided by ODNR)	

LAUREL J. BROWN
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID 19934009356
My Commission Expires July 24, 2017

(Notary Seal)