

## AREA OF REVIEW HYDRAULIC FRACTURING COMMUNICATION INCIDENT REPORT INSTRUCTIONS (Unconventional Operations Only)

### GENERAL INFORMATION

The following instructions are designed to assist the applicant in properly completing the *Area of Review Hydraulic Fracturing Communication Incident Report (unconventional operations only)* form. Pursuant to 25 Pa. Code Section 78a.73 (relating to General Provision for Well Construction and Operation), unconventional operators who are stimulating wells by way of hydraulic fracturing are required to notify the Department of Environmental Protection (DEP) upon confirmation of a hydraulic fracturing communication incident. Following notification, an incident report must be provided to DEP.

To complete the *Area of Review Hydraulic Fracturing Communication Incident Report*, unconventional operators must download the electronic form from the DEP website and use it to compile incident information. Upon completion of the incident report, the operator must submit the information electronically through the DEP website. In certain cases, operators may be required to complete additional activities to resolve the communication incident. When completing the form, please note that a separate line must be used for each unique well that was communicated with.

### INSTRUCTIONS

Enter the US Well Number (API No.) assigned to the well that was undergoing hydraulic fracturing at the time of the communication incident. Use the following format: CCC-XXXXX. CCC represents the three-digit county code and XXXXX represents the unique, 5-digit county ID. The sections of the API No. must be separated by a dash (-).

For the US Well No. (API No.)/ID of Well where Communication Incident was Observed, enter the API No., if known, or ID from Area of Review Report Summary Table of well that was communicated with. If the well was not identified as part of area of review survey and does not have API No., use the following nomenclature: (C1, C2, C3, etc.). If multiple wells were communicated with, use as many lines as are necessary. If an adjacent operator's well was involved in the communication incident, provide the OGO No. for that operator. Leave blank if it is the same as the operator who was conducting hydraulic fracturing activities. Indicate "No RP" if well does not have an operator associated with it.

Enter the start date as the date that the communication incident was first confirmed in MM/DD/YYYY format. In the end date column enter the date incident control was established at the well where the communication incident was observed, i.e., environmental or safety concerns mitigated. Leave blank if the incident is ongoing when the report is submitted. Use MM/DD/YYYY format.

In the environmental/safety incident column indicate "Y" if a surface release, water supply impact, other environmental impacts, or a well control or other safety incident has occurred, otherwise indicate "N."

Please choose the communication type of hydraulic fracturing communication incident from the list of available options: stimulation to operating well, stimulation to well being drilled, stimulation to abandoned/orphan well, stimulation to inactive well, stimulation to plugged well, or other.

For adjacent lateral effects, indicate "Y" if communication originated at horizontal well and intervening horizontal wells fall between the source of the communication and the well where the communication incident was observed, otherwise indicate "N."

Provide the latitude and longitude in decimal degrees. This should be North American Datum of 1983 (NAD 83) and must meet the current DEP policy regarding locational accuracy (+/- 10 m).

- The midpoint of the stage being hydraulically fractured when the communication was observed. If a vertical well was being hydraulically fractured, indicate the tophole location.
- The surface hole location of the receiving well where the communication incident was observed. This applies for vertical wells or when the vertical section of an intentionally deviated is the point of entry for pressure/fluids associated with the well undergoing hydraulic fracturing.
- The bottomhole location of the receiving well where the communication incident was observed. If being drilled, indicate the bit location, otherwise indicate the bottomhole location. This field applies for intentionally deviated wells only.

- The landing point of the receiving well where the communication incident was observed. This field applies for intentionally deviated wells only.

Provide the volume of the kick, in barrels (bbls), circulated out of the well where the communication incident was observed. This field only applies to offset drilling scenarios when a kick was detected in association with the hydraulic fracturing communication incident. Enter the volume of fluid pumped, in bbls, at the stage that was being hydraulically fractured during the time of the communication incident. Provide the maximum treatment pressure, in pounds per square inch (psi), at the stage that was being hydraulically fractured during the time of the communication incident. Provide the average treatment pressure, in psi, at the stage that was being hydraulically fractured during the time of the communication incident.

Indicate "Y" for abnormal treatment volumes noted, if the treatment volume of the stage being hydraulically fractured at the time of the communication incident was significantly higher compared to adjacent stages; otherwise indicate "N."

Indicate "Y" for abnormal treatment pressures noted, if the treatment pressure of the stage being hydraulically fractured at the time of the communication incident was significantly higher compared to adjacent stages; otherwise indicate "N."

Indicate "Y" if the presence of faults or other geologic anomalies were observed, otherwise indicate "N" in the faults present or geologic anomalies noted column. Orientation of fault/geologic anomaly in horizontal plane (degrees) column is for if any faults are present, provide azimuth in 0 to 360 degrees.

Provide additional details related to incident, as needed. Limit description to 255 characters or less.

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