Operator Name:									
DEP ID/OGO No.:									
Contact:									
Contact Telephone No.:									
							Property Address		
Farm Name	Well No.	Serial No.	US Well No. (API No.)	County	Municipality	Surface Landowner	Street Name and Number	City	Zip Code

DRAFT

	Telephone Number					Well Information: only indicate number of wells for which physical evidence was provided and access permitted					
Surface Property Tax ID No.	Home/Business	Cell	Other	Contact Time	Actionable Information	Active	Inactive	Abandoned	Plugged	Orphan	AOR Summary Table Reference

DRAFT

Survey Completion Date	**Survey Period**	**DEP Authorizing Contact**	**Operator Comments**

DRAFT

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS MANAGEMENT

AREA OF REVIEW LANDOWNER SURVEY DEVELOPMENT PLAN OPTION INSTRUCTIONS (Unconventional Operations Only)

GENERAL INFORMATION

The following instructions are designed to assist the applicant in properly completing the *Area of Review Landowner Survey Development Plan Option for Unconventional Operations*. Pursuant to 25 Pa. Code Section 78a.52a (relating to area of review), unconventional operators who are planning to drill new wells are required to submit a questionnaire to landowners in an effort to identify all nearby offset oil and gas wells. As part of this regulation, the operator must send a questionnaire form to surrounding landowners within 1,000 feet of the proposed new well.

The *Area of Review Landowner Survey Development Plan Option for Unconventional Operations* is intended to facilitate the collection of information on offset wells from multiple landowners and in association with multiple new well locations. Operators choosing this option must download the electronic form and use it to compile the necessary information.

Area of Review Landowner Survey for Unconventional Wells may be used to gather the necessary information for populating the electronic form. However, the *Area of Review Landowner Survey Development Plan Option for Unconventional Operations* is intended to encourage engagement of landowners well in advance of well drilling and, therefore, operators should allow up to 30 business days to collect information about offset wells from any given parcel falling within the area or review.

DRAFT

INSTRUCTIONS

Operator Name, OGO number, Contact, and Telephone number

In the header section of the form, enter the operator name, OGO number, point of contact, and telephone number at which the point of contact can be reached.

Well Farm Name, Well number, and Serial number

For the well the operator intends to hydraulically fracture, enter the farm name and well number, and, if applicable, the serial number assigned to the well for tracking purposes. The farm name, well number, and serial number are the applicant's designations to identify the well.

US Well Number (API number)

For the well the operator intends to hydraulically fracture, enter the API number assigned to the well using 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 number must be separated by a dash (-).

County and Municipality

Enter the name of the county and municipality of the surface location of the well the operator intends to hydraulically fracture. Type in the municipality name and the appropriate designation type. i.e.: city, borough (boro), or township (twp).

Surface Landowner

Enter the name of the current surface landowner for the property evaluated. If the surface landowner is a land management agency or commission, enter the name of the responsible agency or commission.

Property Address

Enter the current mailing address, including name and street number, P.O. Box, city, state, and zip code.

Surface Property Tax ID number

Enter the tax parcel ID for the tract of land where the offset well is located.

Telephone Number

Enter all provided telephone numbers for the surface landowner or their designee, including a home/business number, a cell phone number, and any other telephone number.

Contact Time

Indicate the time of day when it is best to contact the surface landowner or their designee.

Actionable Information

Enter "Y" if the landowner provided actionable information per Guidance Document 800-0810-001 – *Guidelines for Implementing Area of Review Regulatory Requirement*, otherwise enter "N."

Well Information

In the appropriate column, provide the number of active, inactive, abandoned, plugged, and orphan wells for which physical evidence was provided and access for inspection permitted. In lieu of this, the operator may list the API numbers/Alternate Well IDs provided in the AOR Summary Table Report.

Survey Completion Date

Provide the date that the survey information was completed for the parcel. For each parcel surveyed, this date marks the date from which the expiration date for information gathered is measured.

Survey Period

Indicate the number of years for which the survey remains valid. This is either three (3) or five (5) years. DEP must authorize an extension to five (5) years in all cases.

DEP Authorizing Contact

If an extension to five (5) years has been provided, enter the name of the DEP employee authorizing this extension.

Operator Comments

Provide additional information about the landowner survey process, as needed. Entries are limited to 255 characters or less.

DRAFT