



NEW YORK STATE
DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF MINERAL RESOURCES

APPLICATION FOR A.P.I. WELL IDENTIFICATION NUMBER

PRINT OR TYPE IN BLACK INK

WELL OWNER

Full name of organization or individual _____

Complete mailing address _____

Telephone (include area code) () _____

WELL INFORMATION

Lease or well name _____ Well No. _____ Depth (ft) _____

Type (check one) Oil Gas Injection Other (Specify) _____

Date drilled (year) _____ Producing formation (if known) _____

Surface casing size (OD in.) _____ Cemented to surface (yes or no) Yes No

Current down hole condition, use or remarks (attach additional sheets if necessary).

WELL LOCATION INFORMATION

County _____ Town _____

Check which applies: Map attached Description (see below)

Location Description:

I hereby affirm under penalty of perjury that information provided on this form is true to the best of my knowledge and statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Signature _____ Date _____

DO NOT COMPLETE

DEPARTMENT USE ONLY

DO NOT COMPLETE

A.P.I. Number 31-| | | | - | | | | | - | | | | |

LOCATION DESCRIPTION

Decimal Latitude (NAD83)

Decimal Longitude (NAD83)

Location verified by _____ Date _____

INSTRUCTIONS FOR A.P.I. WELL IDENTIFICATION APPLICATION FORM (85-16-1 04/08)

The Division of Mineral Resources has developed this form to accommodate newer drilling technologies and to conform to the American Petroleum Institute's (API) well identification number system. For a complete description of the API numbering system, visit the Division's website at www.nysm.nysed.gov/esogis/apiGuide.cfm. Instructions and examples for completing the form are below.

The completed form should be submitted along with any maps to the appropriate Regional office. If you have any questions or need any further assistance with the forms, please feel free to contact the Regional office responsible for the area where the well is located or visit our website at www.dec.ny.gov/energy/205.html.

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|-----------------|----------------|---|
| Allegany Office | (716) 372-0645 | (Allegany, Cattaraugus, Chautauqua, Erie, Niagara and Wyoming counties) |
| Avon Office | (585) 226-2466 | (Jefferson, St. Lawrence, Lewis, Oneida, Herkimer, Oswego, Cayuga, Onondaga, Madison, Tompkins, Cortland, Chenango, Broome, Orleans, Monroe, Wayne, Genesee, Livingston, Ontario, Yates, Seneca, Steuben, Schuyler, Tioga and Chemung counties) |
| Albany Office | (518) 402-8056 | (All other counties) |

A.P.I. WELL IDENTIFICATION NUMBER INSTRUCTIONS

GENERAL

Complete one form for each well which requires an identification number.

WELL OWNER INFORMATION

Please complete this section exactly as it appears on your Organization Report Form (85-15-1). If you have never filed an Organizational Report, please complete the Form included with this package. The form is also available on our website at www.dec.ny.gov/energy/205.html.

WELL INFORMATION

Lease or Well Name: Enter the complete original name associated with the well. If you do not know that name, enter the name by which you will identify the well in the future.

Well Number: Enter the well number. For example, the first well on the Smith farm would be the Smith 1, the second well would be the Smith 2, and so on.

Date Drilled: To the best of your knowledge, enter the year the well was drilled.

Type: What the well is being used for, oil production, gas production, injection, etc.

Depth and Formation: Enter the depth in feet and the formation in which it is completed (for instance, 950 feet Chipmunk or 4250 Medina, etc.) if you know. If neither is known, please write "unknown".

Current Use: Please indicate how the well is currently being used. Is it actively producing, inactive or abandoned? If the well is actively producing, how is the gas or oil used? Does it supply a home? Is it sold?

Remarks: Please put here any other information concerning the well. This includes the casing and cementing program, who drilled the well, and if there were any changes made since the original completion.

WELL LOCATION

County and Town: Enter the County and Town in which the well is located.

It is important that we have the correct location of the well; therefore, please **BE AS ACCURATE AS POSSIBLE WHEN DESCRIBING THE WELL LOCATION**. A map that shows the location in relation to known markers such as roads, town lines, etc. is preferred. Sections of tax maps, road maps or land surveys also work well. Please indicate the well's location as accurately as possible on the map, circle the location and attach the map to your application.

If the location description is used, please describe as accurately as possible the distance in feet North or South and East or West from known boundaries such as roads, town lines, and so on in the space provided.

SIGNATURE AND DATE

Please sign and date the application and return it with any maps to the DEC.