



PRINT OR TYPE IN BLACK INK

# APPLICATION FOR PERMIT TO DRILL, DEEPEN, PLUG BACK OR CONVERT A WELL SUBJECT TO THE OIL, GAS AND SOLUTION MINING LAW

THIS APPLICATION IS A LEGAL DOCUMENT. READ THE APPLICABLE AFFIRMATION AND ACKNOWLEDGMENT CAREFULLY BEFORE SIGNING.  
For instructions on completing this form, visit the Division's website at [www.dec.ny.gov/energy/205.html](http://www.dec.ny.gov/energy/205.html) or contact your local Regional office.

PLANNED OPERATION: (Check one)			
Drill	Deepen	Plug Back	Convert
TYPE OF WELL: (Check one)		<b>Existing API Well Identification Number</b>	
New	Existing	31-	- - - - -
TYPE OF WELL BORE: (Check one)			
Vertical	Directional	Horizontal	
NAME OF OWNER (Full Name of Organization or Individual as registered with the Division)			TELEPHONE NUMBER (include area code)
ADDRESS (P.O. Box or Street Address, City, State, Zip Code)			
NAME AND TITLE OF LOCAL REPRESENTATIVE WHO CAN BE CONTACTED WHILE OPERATIONS ARE IN PROGRESS			
ADDRESS-Business (P.O. Box or Street Address, City, State, Zip Code)			TELEPHONE NUMBER (include area code)
ADDRESS-Night, Weekend and Holiday (P.O. Box or Street Address, City, State, Zip Code)			TELEPHONE NUMBER (include area code)
<b>WELL LOCATION DATA (attach plat)</b>			
COUNTY	TOWN	FIELD/POOL NAME (or "Wildcat")	
WELL NAME	WELL NUMBER	NUMBER OF ACRES IN UNIT	
7½ MINUTE QUAD NAME	QUAD SECTION	PROPOSED TARGET FORMATION	
LOCATION DESCRIPTION	Decimal Latitude (NAD83)	Decimal Longitude (NAD83)	
Surface	0' 0	.	.
Top of Target Interval	_____	.	.
Bottom of Target Interval	_____	.	.
Bottom Hole	_____	.	.
TVD	TMD		
<b>PROPOSED WELL DATA</b>			
WELL TYPE (check one)	PLANNED TOTAL DEPTH	PLANNED DATE OF COMMENCEMENT OF OPERATIONS	
Oil Production    Gas Production    Brine    Storage	TVD _____ ft.		
Injection    Brine Disposal    Geothermal    Stratigraphic	TMD _____ ft.		
Other _____	Kickoff _____ TMD		
SURFACE ELEVATION (check how obtained)	TYPE TOOLS	PLANNED DRILLING FLUID	
_____ ft.    Surveyed    Topo Map    Other _____	Cable    Rotary	Air    Water    Mud	
NAME OF PLANNED DRILLING CONTRACTOR (as registered with the Division)			TELEPHONE NUMBER (include area code)
ON ATTACHED SHEET GIVE DETAILS FOR EACH PROPOSED CASING STRING AND CEMENT JOB INCLUDING BUT NOT LIMITED TO: Bit size, casing size, casing weight and grade, TVD and TMD of casing set, scratchers, centralizers, cement baskets, sacks of cement, class of cement, cement additives with percentages or pounds per sack, estimated TVD and TMD of the top of cement, estimated amount of excess cement and waiting-on-cement time.			
FOR DIRECTIONAL OR SIDETRACK WELLS ALSO INCLUDE A WELL BORE DIAGRAM SHOWING THE LOCATION OF THE ITEMS INCLUDED IN THE ABOVE REFERENCED DETAILS.			
<b>DEPARTMENT USE ONLY</b>			
BOND NUMBER			
API WELL IDENTIFICATION NUMBER			
31- RECEIPT NUMBER			
DATE ISSUED			

