

APPLICATION FOR APPROVAL TO FLARE



Department of Environmental Conservation

THIS APPLICATION IS A LEGAL DOCUMENT. READ THE AFFIRMATION AND SIGNATURE CAREFULLY BEFORE SIGNING.

Instructions: Print or type in black ink. This form shall be used for application to the Department for an Approval To Flare for: 1) flaring associated with any well completion, stimulation, clean up, testing, plugging or other Department-identified operation; and 2) extension of a previously approved flaring period. Note: Flaring during well drilling is considered part of the drilling process and does not require a separate Approval to Flare from the Department, except under special circumstances as determined by the Department. For additional assistance completing this form, contact the appropriate Regional office.

WELL INFORMATION	
WELL NAME & NUMBER Snyder E 1-A	API WELL IDENTIFICATION NUMBER 31 1 0 7 - 3 0 0 0 0 - 0 1 - 0 0
OWNER CONTACT INFORMATION	
NAME (Full Name of Organization or Individual as registered with the Division) Tioga Energy Partners, LLC	
ADDRESS - Business (P.O. Box or Street Address, City, State, Zip Code) P.O. Box 22222, Albany, NY 12201	TELEPHONE NUMBER (518) 426-4600
ADDRESS - Night, Weekend and Holiday (P.O. Box or Street Address, City, State, Zip Code) 207 Carlton Road, Eight Four, PA	TELEPHONE NUMBER (281) 450-6294
WELL LOCATION DATA	
COUNTY Tioga	TOWN Barton
FIELD/POOL NAME (or "Wildcat") New Field Wildcat	PROPOSED TARGET FORMATION OR EXISTING FORMATION Marcellus
PRESENT LAND USE(S) WITHIN ¼ MILE OF EDGE OF WELL PAD (check all that apply)	
<input checked="" type="checkbox"/> Rural <input type="checkbox"/> Urban <input checked="" type="checkbox"/> Agriculture <input type="checkbox"/> Commercial <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Suburban <input checked="" type="checkbox"/> Forest <input type="checkbox"/> Park/Recreation <input checked="" type="checkbox"/> Industrial	
DISTANCE IN FEET TO NEAREST PRIVATE DWELLING, PUBLIC BUILDING OR PLACE OF ASSEMBLY FROM EDGE OF WELL PAD Distance <u>approx. 2400'</u> Describe <u>Nearest residence</u>	
PROPOSED FLARING OPERATION	
TYPE OF FLARE REQUEST (check all that apply)	
<input checked="" type="checkbox"/> Initial Approval To Flare <input type="checkbox"/> Extension of Previously Approved Flaring Period <input checked="" type="checkbox"/> Extension of Time Period(s) Specified in 6 NYCRR § 556.2(b) <input type="checkbox"/> Other (specify below)	
REASON FOR FLARING (check all that apply)	
<input checked="" type="checkbox"/> Well Completion <input type="checkbox"/> Well Testing <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Well Stimulation <input type="checkbox"/> Well Plugging	
ANTICIPATED DATE FLARING TO START 9 / 1 / 2017	ANTICIPATED DATE FLARING TO CEASE 9 / 15 / 2017
ESTIMATED DURATION OF FLARING OPERATION (net hours) 360	
ESTIMATED VOLUME OF GAS TO BE FLARED (Mcf) 105 mmcsf (max)	IS ANY FLARING AT NIGHT PLANNED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ANTICIPATED MAXIMUM RATE OF FLOW (Mcf/d) Up to 7 mmcsfd	IS H ₂ S ANTICIPATED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
TARGET FORMATION	
FORMATION(S) (origin of gas to be flared) Marcellus	PERFORATION INTERVAL (note depths in ft. of top and bottom perforation) Top 3,601.92 usft Bottom 3652.89 usft
PREVIOUS FLARING	
HAS GAS FROM ABOVE RESERVOIR INTERVAL BEEN PREVIOUSLY FLARED UNDER DEPARTMENT-ISSUED APPROVAL(S) TO FLARE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	IF YES, ESTIMATED VOLUME OF GAS PREVIOUSLY FLARED (Mcf)
AFFIRMATION AND SIGNATURE	
I affirm under penalty of perjury that the information provided in this application is true to the best of my knowledge and belief. I am aware that any false statement made in this application is punishable pursuant to Section 210.45 of the Penal Law.	
Printed or Typed Name of Authorized Representative (see below note) Adam Schultz	
Signature of Authorized Representative (see below note) 	Date 8, 3, 17
Note: The Authorized Representative must be listed in Box 7 of the Organizational Report on file with the Division of Mineral Resources.	