

## PERMIT APPLICATION TO DRILL AND OPERATE A WELL COAL MODULE

	Coal module attachment to address coal related issues with drilling, altering, or operative	ating wells.	
		Yes	No
1.	Will the well penetrate a <b>workable coal seam</b> ?	$\boxtimes$	
	If "No," attach justification and supporting documentation		
	a. Have the coal rights been severed from the surface estate	$\boxtimes$	
2.	If the well will penetrate a <b>workable coal seam</b> and the well is a "non-conservation" gas well, does the location comply with the distance requirements of section 7 of the Coal and Gas Resource Coordination Act? (At least 1,000 feet from all existing wells). 58 P.S. §§ 501 - 518.	$\boxtimes$	
	<ul> <li>a. If "No," is the required exception request attached? (Check N/A if re-working an existing well:</li> <li>N/A)</li> </ul>		
	<ul> <li>b. Will the well be part of a Well Cluster that is an area within a well pad intended to host multiple horizontal wells and which comprises an area no greater than 5,000 square feet?</li> </ul>	$\boxtimes$	
3.	Will this well be drilled in solid coal or into an open underground void?	solid coal	open void
		Yes	No
4.	Will the well be drilled through an <b>operating coal mine</b> , or within 1,000 feet of the boundary?	$\boxtimes$	
	<ul> <li>a. If "Yes," provide the names of: Mine Foundation Mine &amp; Cumberland Mine and Operator Foundation Mining LLC &amp; Cumberland Contura LLC</li> <li>b. If yes, does it meet the Gas Well Pillar Study? 58 P.S. § 512.1.</li> <li>c. If yes, provide a copy of the most recent underground mine workings map that shows well location, a map scale, the lease/unit boundary, and a north arrow.</li> </ul>		
5.	If the well will be a Coal Bed Methane (CMB) well is the alternate method request of drilling/completing the well attached <i>Proposed Alternate Method or Material for Casing, Plugging, Venting or Equipping a Well</i> form 8000-PM-OOGM0024?		
6.	If the well is a CBM well, has the surface landowner been notified and provided a copy of Landowner Notification of Right to Participate in Alternate Dispute Resolution to Coal Bed Methane Wells, form 8000-FM-OOGM0052?		

## COAL MODULE RECORD OF NOTIFICATION / WRITTEN CONSENT

List the following: all coal owners and lessees of all underlying coal seams; operators of operating coal mines at the proposed location; and coal operators with Operating Coal Mine. Mark the boxes " <b>X</b> " that show the parties' interests. Use additional forms if you need more space. You are required to notify each of these parties.			ler	see	of Operating er	Within 1,000 ft.	<b>Notification</b> Note the Means and Attach Proof			
						0	Certified Mail Dates			
			Coal Owner	Coal Lessee	Operator of Coal Miner	Coal Mine Operator	Sent	Return Receipt	Address Affidavit	Written Consent
Name: Realty Company of Pennsylvania	Address	2 N 9th Street Allentown, PA 18101					5/18/2018	5/23/2018		
Name: Contura Pennsylvania Land, LLC	Address	158 Portal Road PO Box 1020 Waynesburg, PA					5/18/2018	5/21/2018		
Name Cumberland Contura, LLC	Address	158 Portal Road PO Box 1020 Waynesburg, PA					5/18/2018	5/21/2018		
Name Foundation Mining, LLC	Address	158 Portal Road PO Box 1020 Waynesburg, PA					5/18/2018	5/21/2018		
Name Mark A & Lisa Main	Address	297 Iron Rock Rd Waynesburg, PA 15370					5/18/2018	5/22/2018		
Optional: Signature below indicates the party's approval of the well location and waives the 15-day objection period. Check applicable box.										
Coal  Operator,  Owner, or  Lessee Date										
Coal Operator, Owner, or Lessee Date										
Coal Operator, Owner, or Lessee Date										
Coal Operator within 1,000 feet of proposed location Date										



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Remove X

**Expected Delivery on** 



## **Or Delivered**

May 23, 2018 at 9:23 am Delivered, Front Desk/Reception ALLENTOWN, PA 18102

**Tracking History** 

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May 23, 2018, 9:23 am Delivered, Front Desk/Reception ALLENTOWN, PA 18102 Your item was delivered to the front desk or reception area at 9:23 am on May 23, 2018 in ALLENTOWN, PA 18102.

May 23, 2018, 8:52 am Out for Delivery ALLENTOWN, PA 18101 May 23, 2018, 8:42 am Sorting Complete ALLENTOWN, PA 18101

May 23, 2018, 7:41 am Arrived at Unit ALLENTOWN, PA 18109

May 22, 2018 In Transit to Next Facility

May 21, 2018 In Transit to Next Facility

May 20, 2018, 9:02 pm Departed USPS Regional Destination Facility LEHIGH VALLEY PA DISTRIBUTION CENTER

May 20, 2018 In Transit to Next Facility

May 19, 2018, 3:33 pm Arrived at USPS Regional Destination Facility LEHIGH VALLEY PA DISTRIBUTION CENTER

May 19, 2018 In Transit to Next Facility

May 18, 2018, 8:16 pm Departed USPS Regional Facility PITTSBURGH PA DISTRIBUTION CENTER

May 18, 2018, 8:14 pm Arrived at USPS Regional Origin Facility PITTSBURGH PA DISTRIBUTION CENTER May 18, 2018, 4:34 pm Departed Post Office CANONSBURG, PA 15317

May 18, 2018, 11:21 am USPS in possession of item CANONSBURG, PA 15317

**Product Information** 

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See Less ∧

## Can't find what you're looking for?

Go to our FAQs section to find answers to your tracking questions.

FAQs (http://faq.usps.com/?articleId=220900)

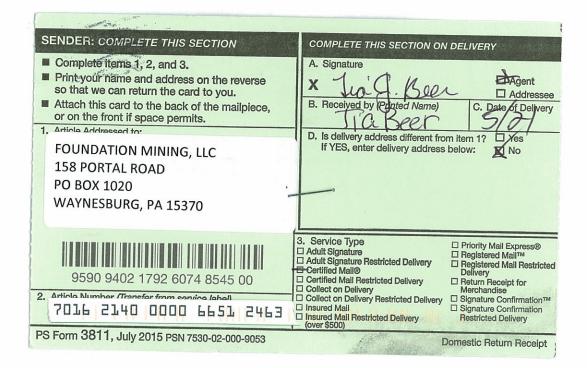
1 CL	
т Л	For delivery information, visit our website at www.usps.com®.
6651	Certified Mail Fee \$3.45
0000	Extra Services & Fees (check box, add fee as appropriate) Return Receipt (hardcopy) \$ ± 1 ± 111 Return Receipt (electronic) \$ ± 11 ± 111 Cortified Mail Restricted Delivery \$ ± 11 ± 111 Adult Signature Required \$ ± 111 Here
0415	Postage         \$2.26           \$         \$2.46           \$         \$8.46
7076	Sent To Cintura PA Lavel
	City, State, ZIP+4® PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

<ul> <li>SENDER: COMPLETE THIS SECTION</li> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>CONTURA PENNSYLVANIA LAND, LLC 158 PORTAL ROAD PO BOX 1020 WAYNESBURG, PA 15370</li> </ul>	A. Signature       A. Signature         X       Job Beh         B. Received by (Printed Name)       C. Date of Delivery         D. Is delivery address different from Item 1?       Yes If YES, enter delivery address below:
9590 9402 1792 6074 8543 64 2 Article Number (Transfer from service label) 7016 2140 0000 6651 2456	3. Service Type       □ Priority Mail Express®         □ Adult Signature       □ Registered Mail™         □ Adult Signature Restricted Delivery       □ Registered Mail™         □ Certified Mail®       □ Return Receipt for         □ Collect on Delivery       □ Signature Confirmation™         □ Insured Mail Restricted Delivery       □ Signature Confirmation™         □ Insured Mail Restricted Delivery       □ Signature Confirmation™         □ Insured Mail Restricted Delivery       □ Signature Confirmation         □ Insured Mail Restricted Delivery       □ Signature Confirmation         □ Keysen Solo       □ Signature Confirmation
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature X Joi A. Ben Agent B. Received by (Printed Name) C. Date of Delivery
CUMBERLAND CONTURA, LLC 158 PORTAL ROAD PO BOX 1020 WAYNESBURG, PA 15370	D. Is delivery address different from item 1? Ves If YES, enter delivery address below: No
9590 9402 1792 6074 8544 94 2 Article Number (Transfer from service lobel) 7016 2140 0000 6651 2470	3. Service Type       □ Priority Mail Express®         □ Adult Signature       □ Registered Mail™         □ Adult Signature Restricted Delivery       □ Registered Mail Restricted Delivery         □ Certified Mail®       □ Registered Mail Restricted Delivery         □ Collect on Delivery       □ Return Receipt for Merchandise         □ Insured Mail Restricted Delivery       □ Signature Confirmation™         □ Insured Mail Restricted Delivery       □ Signature Confirmation ™         □ Insured Solo       □ Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt







SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> <li>Attach MAIN ET UX 297 IRON ROCK RD WAYNESBURG, PA 15370</li> </ul>	A Signature A Signature Addressee B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery C. Date of Delivery C. Date of Delivery D. Is delivery address different from item 1? If YES, enter delivery address below: D No
9590 9402 2185 6193 6075 09 2 Article Number (Transfer from service label) 7016 2140 0000 6651 2388	3. Service Type       □ Priority Mail Express®         □ Adult Signature       □ Registered Mail™         □ Adult Signature Restricted Delivery       □ Registered Mail™         □ Adult Signature Restricted Delivery       □ Registered Mail™         □ Certified Mail®       □ Receipt for Merchandise         □ Collect on Delivery       □ Signature Confirmation™         □ Insured Mail       □ Signature Confirmation Restricted Delivery         □ Insured Mail       □ Signature Confirmation Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053	Pomastic Return Receipt