

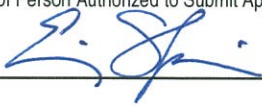


COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS MANAGEMENT

PERMIT APPLICATION TO DRILL AND OPERATE AN UNCONVENTIONAL WELL

Please read instructions before you begin filling in this form.

WELL INFORMATION											
Well Operator Rice Drilling B LLC		DEP ID# 268470		Well API No. 37-059-27486-00-00		Well Farm Name Thunder 1		Well # 20			
Address 2400 Ansys Drive, Suite 200				LAT 39.826919		NAD 83	Project Number		Serial # 596189		
				LONG - 80.279236							
City Canonsburg		State PA	Zip Code 15317	Municipality Name/ City, Borough, Township Center / Township			County Greene				
Phone No. 724-271-7380		Fax No. 724-749-5581		Email espine@eqt.com			USGS 7.5 min. quadrangle map Holbrook		Section 6		
24/7 Emergency Phone Contact No.: EQT Emergency Contact: 1-800-926-1759				ESGP Permit No. ESX10-059-0080			Well Pad (cluster) Name/Identification Hoover Access Road				
911 address of well site (if available) 466 Turkey Hollow Road, Waynesburg, PA 15370											
Surface Elev. 1410		Deepest Formation to be Penetrated Marcellus		Anticipated TVD 8026		PERMIT TYPE Check applicable. Application is to <input checked="" type="checkbox"/> Modify existing well/permit		TYPE OF WELL Check applicable. <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Comb. (gas & oil/condensate) Configuration <input type="checkbox"/> Vertical <input checked="" type="checkbox"/> Horizontal <input type="checkbox"/> Deviated <input type="checkbox"/> Multiple laterals		APPLICATION FEE Check applicable. <input type="checkbox"/> Vertical <input checked="" type="checkbox"/> Non-vertical Total Application Fee \$ 5,250	
Target Formation(s) Proposed for Production Marcellus			Anticipated Target Top/Bottom TVD 7977 / 8074							Bond Agreement Id: RLB0014476	
Number of wellbore laterals proposed under this application 1.											
Total feet of wellbore to be drilled under this application 29899 Ft.											
PNDI Attached: <input checked="" type="checkbox"/> Any threatened or endangered "hit" must include a demonstration of how the impact will be avoided or minimized and mitigated, or justification that section 78a.15(e) applies.											
Application submitted as: <input checked="" type="checkbox"/> Coal well (Attach Coal Module) <input type="checkbox"/> Non coal well (Attach justification)											
COORDINATION WITH REGULATIONS AND OTHER PERMITS								Yes	No		
1. Will the well be subject to the Oil and Gas Conservation Law? If "No," go to 2).								<input type="checkbox"/>	<input checked="" type="checkbox"/>		
a. If "Yes" to #1, is the well at least 330 feet from outside lease or unit boundary?								<input type="checkbox"/>	<input type="checkbox"/>		
b. Does the location fall within an area covered by a spacing order?								<input type="checkbox"/>	<input checked="" type="checkbox"/>		
c. If the well will be multilateral, identify the wellbores on the sketch on page 3 of the plat that will be completed as conservation and non-conservation.											
2. Will the proposed limit of disturbance of the well site be within 100 feet measured horizontally from any watercourse or any high quality of exceptional value body of water or any wetland one acre or greater in size?								<input type="checkbox"/>	<input checked="" type="checkbox"/>		
If yes, attach the following if applicable: a site-specific E&S control plan, a permit consistent with Chapter 102, applicable portions of the Pollution Prevention Control Plan, applicable portions of the Well Site Emergency Response Plan, applicable portions of the Site Containment Plan, the permit number of a Water Obstruction and Encroachment Permit issued pursuant to Chapter 105, or justification that section 78a.15(e) applies.								<input type="checkbox"/>	<input type="checkbox"/>		
Will the well or well site be located within a defined 100 year floodplain or where the floodplain is undefined, within 100 feet of the top of the bank of a perennial stream or within 50 feet of the top of the bank of an intermittent stream.								<input type="checkbox"/>	<input checked="" type="checkbox"/>		
If yes, attach a plan that identifies the additional measure, facilities or practices to be employed during well site construction, drilling and operations to protect the waters of the Commonwealth								<input type="checkbox"/>	<input type="checkbox"/>		

COORDINATION WITH REGULATIONS AND OTHER PERMITS (cont'd)		Yes	No
3. Will the vertical wellbore section penetrate or be within 3,000 feet of an active gas storage reservoir boundary?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a. If Yes, print the names of:	Storage Field: _____ Operator: _____		
4. Is the proposed well location within the permitted area of a landfill ?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Will the vertical wellbore section of the unconventional well be drilled within 500 feet from any existing building or an existing water supply?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. If "Yes," is written consent from the owner attached?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. If written consent is not attached, is a variance request (form 8000-FM-OOGM0058) attached?		<input type="checkbox"/>	<input type="checkbox"/>
5.1. Will the vertical wellbore of the unconventional well be drilled within 1,000 feet from any existing water well, surface water intake, reservoir or other water supply extraction point used by a water purveyor?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a. If "Yes," is written consent from the owner attached?		<input type="checkbox"/>	<input type="checkbox"/>
b. If written consent is not attached, is a variance request (form 8000-FM-OOGM0058) attached?		<input type="checkbox"/>	<input type="checkbox"/>
6. Is this permit application for a well that will be drilled on a well site for which construction was completed prior to April 16, 2012?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
a. If "Yes," was there a permitted well at this well site prior to April 16, 2012?		<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. If the answer to question no. 6a is "Yes", provide the US Well Number (API No.) of the well permitted at this site prior to April 16, 2012. <u>059-25352</u>		<input type="checkbox"/>	<input type="checkbox"/>
7. Will the well be located where it may impact a public resource as outlined in the "Coordination of a Well Location with Public Resources" form 8000-PM-OOGM0076? If yes, attach a completed copy of the form.		<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Will any portion of the well site be in a Special Protection High Quality <input checked="" type="checkbox"/> (HQ) or Exceptional Value <input type="checkbox"/> (EV) watershed? Provide name of special protection watershed <u>Turkey Hollow</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Is this well part of a development which requires an Earth Disturbance Permit for Oil and Gas Activities disturbing more than 5 acres? If yes, list the number of the ESCGP approval if the permit has been issued. ESX10-059-0080 If no, is this well part of a development that involves 1 to less than 5 acres of earth disturbance over the life of the project and is the answer to question no. 8 "Yes"? If yes, attach a site-specific E&S control plan.		<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Is the well to be located within a H ₂ S area pursuant to §78a.77a?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. Attach a current Ownership & Control form 8000-FM-OOGM0118 with the first application submitted after the effective date of the final "Environmental Protection Performance Standards at Oil and Gas Well Sites" rulemaking, or if there have been any changes to parent and subsidiary business corporations.			
Signature of Applicant	The person signing this form attests that they have the authority to submit this application on behalf of the applicant, and that the information, including all related submissions, is true and accurate to the best of their knowledge.		
Signature of Person Authorized to Submit Application 	(Print or Type)	Name of Signer: ERIN SPINE Title: Regional Land Supervisor	Date 7/25/2018
Application Preparer/Contact: BSHRUM@EQT.COM		Phone: 724-271-7314	



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

**PERMIT APPLICATION TO DRILL AND OPERATE
AN UNCONVENTIONAL WELL
Record of Notification**

US Well No. (API No.)
37-059-27486-00-00

Signature of Applicant I hereby certify that, for all interested parties identified on the plat of this application for which written consent or an "Affidavit of Non-Delivery of Certified Mail" has not been uploaded, copies of the well plat have been sent via certified mail and I have received a return receipt verifying delivery.

Signature of Person Authorized to Submit Application 	(Print or Type) Erin Spine	Name of Signer: ERIN SPINE Title: Regional Land Supervisor	Date 6/6/2018
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List the following: surface landowner; surface landowners and water purveyors with water supplies within 3,000 feet; municipality where the well will be drilled; adjacent municipality; municipalities within 3,000 feet of the vertical well bore; gas storage operator if within 3,000 feet. Mark the boxes, "X," which show the parties' interests. Use additional forms if you need more space. You are required to notify each of these parties. Notification: Signature below name indicates the party's acknowledgement of receipt of the well location plat and serves as proof of notification				Notification Note the means and attach proof.			
				Certified Mail Dates		Address Affidavit	Written Consent
				Sent	Return Receipt		
Print Name: MARK & LISA MAIN Signature	Address:	Address: 297 IRON ROCK RD WAYNESBURG, PA 15370	Surface Landowner X	5/18/2018	5/22/2018		
Print Name: ROBERT W REED ET UX Signature	Address:	Address: 113 IRON ROCK ROAD WAYNESBURG, PA 15370		5/18/2018	5/21/2018		
Print Name: CARL S RABER ET UX Signature	Address:	Address: 366 IRON ROCK RD WAYNESBURG, PA 15370		5/18/2018		X	
Print Name: ROBERT C HOOVER ET UX Signature	Address:	Address: 161 IRON ROCK ROAD WAYNESBURG, PA 15370		5/18/2018	5/21/2018		
Print Name: CATHY S EDDY REVOCABLE TRUST Signature	Address:	Address: 285 IRON ROCK RD WAYNESBURG, PA 15370		5/18/2018		X	


Record of Written Consent

Written Consent: Signature below indicates the party's approval of the well location, or indicates written consent and waives the 15-day objection period where applicable.

			Check applicable box		
Print and Sign Name:	Address:	Date	Surface Owner	Water Well within 500 feet	Building within 500 feet
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PERMIT APPLICATION TO DRILL AND OPERATE AN UNCONVENTIONAL WELL Record of Notification

US Well No. (API No.)
37-059-27486-00-00

Signature of Applicant		I hereby certify that, for all interested parties identified on the plat of this application for which written consent or an "Affidavit of Non-Delivery of Certified Mail" has not been uploaded, copies of the well plat have been sent via certified mail and I have received a return receipt verifying delivery.									
Signature of Person Authorized to Submit Application 		(Print or Type) Todd Klaner		Name of Signer: TODD KLANER				Date 8/2/2018			
<p>List the following: surface landowner; surface landowners and water purveyors with water supplies within 3,000 feet; municipality where the well will be drilled; adjacent municipality; municipalities within 3,000 feet of the vertical well bore; gas storage operator if within 3,000 feet. Mark the boxes, "X," which show the parties' interests. Use additional forms if you need more space. You are required to notify each of these parties.</p> <p>Notification: Signature below name indicates the party's acknowledgement of receipt of the well location plat and serves as proof of notification</p>				Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies within 3,000'	Municipalities	Notification Note the means and attach proof.			
								Certified Mail Dates		Address Affidavit	Written Consent
								Sent	Return Receipt		
Print Name: LUKE J KIGER ET UX	Address:	Address: 295 IRON ROCK RD WAYNESBURG, PA 15370			X		5/18/2018	5/30/2018			
Signature											
Print Name: WILLIAM JERDAN SIMMS	Address:	Address: 198 IRON ROCK RD WAYNESBURG, PA 15370			X		5/18/2018	5/21/2018			
Signature											
Print Name: JEFFREY N GRIMES ET UX	Address:	Address: 292 IRON ROCK RD WAYNESBURG, PA 15370			X		5/18/2018	6/5/2018			
Signature											
Print Name: CENTER TOWNSHIP	Address:	Address: 100 MUNICIPAL DRIVE PO BOX 435 ROGERSVILLE, PA 15359				X	5/18/2018	5/21/2018			
Signature											
Print Name: FRANKLIN TOWNSHIP	Address:	Address: 568 ROLLING MEADOWS ROAD WAYNESBURG, PA 15370				X	5/18/2018	5/21/2018			
Signature											
Record of Written Consent											
Written Consent: Signature below indicates the party's approval of the well location, or indicates written consent and waives the 15-day objection period where applicable.											
Check applicable box											
			Surface Owner		Water Well within 500 feet		Building within 500 feet				
Print and Sign Name:	Address:	Date	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>				
Print and Sign Name:	Address:	Date	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>				
Print and Sign Name:	Address:	Date	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>				

7017 0530 0000 0938 3642

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

WAYNESBURG, PA 15370

OFFICIAL USE

Certified Mail Fee \$3.45

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$2.47

Total Postage and Fees \$8.67

Sent To Jeffrey Grimes

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

0518
MCMURRAY PA
MAY 18 2018
05/18/2018
15370

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

JEFFREY N GRIMES ET UX
292 IRON ROCK RD
WAYNESBURG, PA 15370

2. Article Number (Transfer from service label)
7017 0530 0000 0938 3642

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
[Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery
6/5/18

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No


3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

Domestic Return Receipt

PERMIT APPLICATION TO DRILL AND OPERATE AN UNCONVENTIONAL WELL Record of Notification

US Well No. (API No.)
37-059-27486-00-00

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Signature of Person Authorized to Submit Application 	(Print or Type) Erin Spine	Name of Signer: ERIN SPINE Title: Regional Land Supervisor	Date 6/6/2018

List the following: surface landowner; surface landowners and water purveyors with water supplies within 3,000 feet; municipality where the well will be drilled; adjacent municipality; municipalities within 3,000 feet of the vertical well bore; gas storage operator if within 3,000 feet. Mark the boxes, "X," which show the parties' interests. Use additional forms if you need more space. You are required to notify each of these parties. Notification: Signature below name indicates the party's acknowledgement of receipt of the well location plat and serves as proof of notification			Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies within 3,000'	Municipalities	Notification Note the means and attach proof.			
							Certified Mail Dates		Address Affidavit	Written Consent
							Sent	Return Receipt		
Print Name: JACKSON TOWNSHIP Signature	Address:	Address: 104 TUNNEL ROAD HOLBROOK, PA 15341				X	5/18/2018	5/21/2018		
Print Name: WAYNE TOWNSHIP Signature	Address:	Address: 132 SPRAGGS ROAD SPRAGGS, PA 15362				X	5/18/2018	5/21/2018		
Print Name: RICHHILL TOWNSHIP Signature	Address:	Address: 109 MUNICIPAL LANE WIND RIDGE, PA 15380				X	5/18/2018	5/21/2018		
Print Name: GRAY TOWNSHIP Signature	Address:	Address: 193 STRINGTOWN ROAD GRAYSVILLE, PA 15337				X	5/18/2018	5/21/2018		
Print Name: MORRIS TOWNSHIP Signature	Address:	Address: 1317 BROWNS CREEK ROAD SYCAMORE, PA 15364				X	5/18/2018	5/21/2018		

Record of Written Consent

Written Consent: Signature below indicates the party's approval of the well location, or indicates written consent and waives the 15-day objection period where applicable.					
Check applicable box					
			Surface Owner	Water Well within 500 feet	Building within 500 feet
Print and Sign Name:	Address:	Date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Print and Sign Name:	Address:	Date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Print and Sign Name:	Address:	Date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>