





**PERMIT APPLICATION TO DRILL AND OPERATE A CONVENTIONAL WELL**

Notes <b>Check # 23110 \$2800 (7 apps)</b>		DEP USE ONLY	
OGO #	68490	Objection Date - Do not issue before:	2/12/25
Client Id	300544	Date Approved:	SGP 3/6/25
Bond #	13420	API #'s37-	123-49097
C: 2/12/25 dg G: ACM 3/6/25		and -	
INV:		Watershed Name:	East Branch Tionesta Creek
APS # 1130741	Auth Id 1515665	Designation:	<input checked="" type="checkbox"/> HQ <input type="checkbox"/> EV
Site Id	877964	Special Cond. Frac Stim 24 Hr/ Zoning/ LE bat	
PF Id	881521	SF Id	1439058

Please read instructions before you begin filling in this form.

WELL INFORMATION										
Well Operator Cameron Energy Company		DEP ID# 300544	Well API # 37- - -	Well Farm Name Lot 396			Well # 396-5			
Address 507 Cherry Grove Road			LAT 41°39' 35.70"	NAD 83	Project Number		Serial #			
LONG - 79°0' 10.80"			Municipality Name/ City, Borough, Township Sheffield Township			County Warren				
City Clarendon	State PA	Zip 16313	Municipality Name/ City, Borough, Township			County Warren				
Phone 814-968-3337	Fax 814-968-3330	Email			USGS 7.5 min. quadrangle map Sheffield (513)		Section 9			

<input type="checkbox"/> Check if this is a new address	24/7 Emergency Phone contact number 814-968-3337	911 address of well site (if available) N/A
---	---	--

Freshwater Impoundment Name/ Identification N/A	Centralized Impoundment Name/ Identification N/A	Well Pad Name/Identification N/A	Borrow Area Name/Identification N/A
--	---	-------------------------------------	--

Surface Elev 1468	Deepest Formation to be penetrated: Cooper	Anticipated TVD 2000	<b>PERMIT TYPE</b> Check applicable. Application is to: <input checked="" type="checkbox"/> Drill a new <input type="checkbox"/> Re-permit expired permit <input type="checkbox"/> Deepen well <input type="checkbox"/> Redrill wellbore <input type="checkbox"/> Alter well <input type="checkbox"/> Other (specify)	<b>TYPE OF WELL</b> Check applicable. <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Comb. (gas & oil/condensate) <input type="checkbox"/> Injection, recovery <input type="checkbox"/> Injection, disposal <input type="checkbox"/> Coalbed Methane <input type="checkbox"/> Gas Storage <input type="checkbox"/> Other (specify)	<b>APPLICATION FEE</b> Check applicable. <input checked="" type="checkbox"/> Conventional <input type="checkbox"/> \$200 (Home Use Well) Total Application Fee \$ <u>400</u>  Bond Agreement Id 13420
Target Formation(s) proposed for production Cooper		Anticipated Target Top/Bottom TVD 1970 2000			
Number of wellbore laterals proposed under this application 0		Total feet of wellbore to be drilled under this application 2000 Ft.			
If applying for a permit to rework an existing well not registered or permitted, check this box <input type="checkbox"/> and enter date drilled, if known: (see instructions)					
PNDI Attached: <input checked="" type="checkbox"/> Any threatened or endangered "hit" must include a copy of the clearance letter from the applicable agency(ies).			<b>RECEIVED</b>  FEB 12 2025  Environmental Protection Northwest Regional Office		
Application submitted as: Coal well: <input type="checkbox"/> Attach Coal Module CBM well <input type="checkbox"/> Attach Coal Module Non coal well <input checked="" type="checkbox"/> Attach justification. Please see the attached Map 11 or Map 61.					

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 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 edge of the disturbed area of any portion of the well site of a conventional well be within 100 feet from the edge of any solid blue lined stream, spring or body of water identified on the most current 7½' topographic quadrangle map or wetland greater than one acre in size or in a wetland? If yes, is a waiver request (form 5500-FM-OG0057) and site-specific E&S control plan attached?		<input type="checkbox"/>	<input checked="" type="checkbox"/>

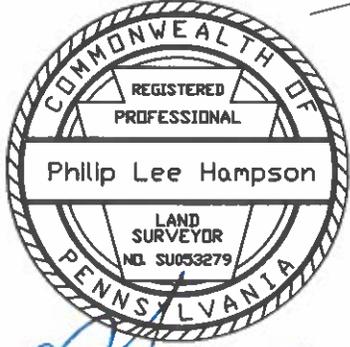
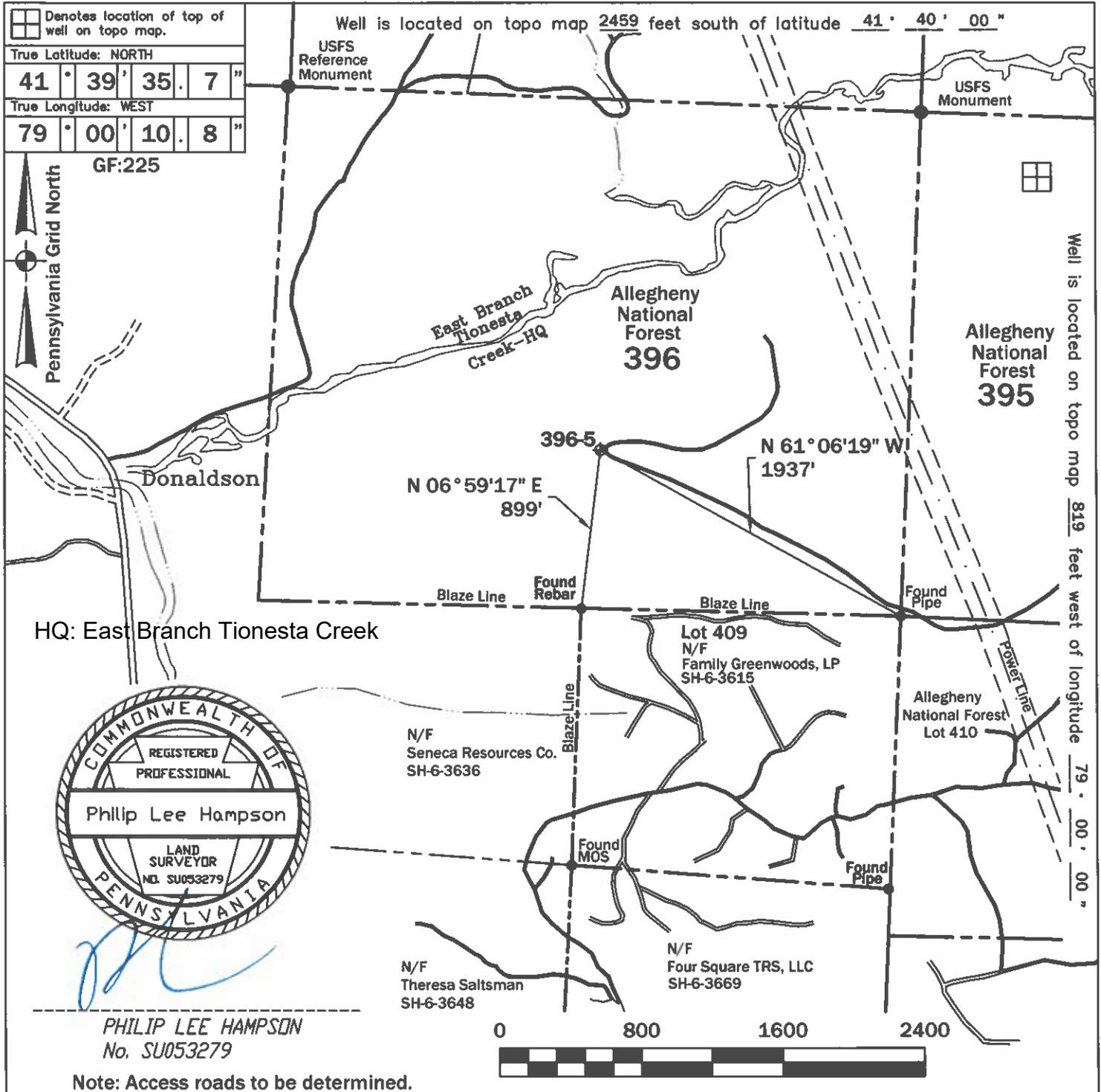




WELL LOCATION PLAT

PAGE 1 Surface Location

DEP	Auth ID #: 1515665	ACM
USE	Permit #: 123-49097	G:
ONLY	Project #:	C:



PHILIP LEE HAMPSON  
No. SU053279

Note: Access roads to be determined.

Applicant/Well Operator Name: Cameron Energy Company, Inc.		DEP ID # 300544	Well (Farm) Name: Lot 396		Well #: 396-5	Serial #:
Address: 507 Cherry Grove Road, Clarendon, PA 16313			County: Warren (62)	Municipality: Sheffield Township	Well Type: Oil	
911 address of well site: NA			USGS 7 1/2' Quadrangle Map Name: Sheffield (513)	Map Section: 9	Surface Elevation: 1468 ft.	
Surveyor or Engineer: Phillip L Hampson	Phone #: 814-730-1822	Dwg #: E:/396-5	Date: 01/16/25	Scale: 1"=800"	Tract Acreage: +/-237 acres	
Lat. & Long Metadata Method: Direct GPS	Accuracy: +/-15' ft.	Datum: NAD83	Elevation Metadata Method: Scaled	Accuracy: LIDAR	Datum: NAD 83	Survey Date: 01/15/25





**PERMIT APPLICATION TO DRILL AND OPERATE  
A CONVENTIONAL WELL  
Record of Notification**

Farm Name - Well # Lot 396 / 396-5	
Applicant Name Cameron Energy Company	DEP ID# 300544
<b>DEP USE ONLY</b>	APS #

List the following: surface landowner; surface landowners and water purveyors with water supplies within 1000 feet; municipality where the well will be drilled; adjacent municipality; gas storage operator if within 2000 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. <b>Notification: Signature below name indicates the party's acknowledgement of receipt of the well location plat and serves as proof of notification</b>		Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies <1000'	Municipalities	Notification Note the means and attach proof.			
						Certified Mail Dates		Address Affidavit	Written Consent
						Sent	Return Receipt		
Print Name: Allegheny National Forest Signature	Address: 4 Farm Colony Drive Warren, PA 16365	X				1/16/25	1/17/25		
Print Name: Sheffield Township Signature	Address: P.O. Box 784 Sheffield, PA 16347				X	1/16/25	1/22/25		
Print Name: Mead Township Signature	Address: 119 Mead Blvd. Clarendon, PA 16313				X	1/16/25	1/18/25		
Print Name: Hamilton Township Signature	Address: P.O. Box 23 Ludlow, PA 16333				X	1/16/25	1/21/25		
Print Name: Wetmore Township Signature	Address: 318 Spring Street Kane, PA 16735				X	1/16/25	1/28/25		

**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 200 feet	Building within 200 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"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## PERMIT APPLICATION TO DRILL AND OPERATE A CONVENTIONAL WELL Record of Notification

Farm Name - Well # Lot 396 / 396-5	
Applicant Name Cameron Energy Company	DEP ID# 300544
<b>DEP USE ONLY</b>	APS #

List the following: surface landowner; surface landowners and water purveyors with water supplies within 1000 feet; municipality where the well will be drilled; adjacent municipality; gas storage operator if within 2000 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. <b>Notification: Signature below name indicates the party's acknowledgement of receipt of the well location plat and serves as proof of notification</b>		Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies <1000'	Municipalities	Notification Note the means and attach proof.			
						Certified Mail Dates		Address Affidavit	Written Consent
						Sent	Return Receipt		
Print Name: Highland Township  Signature	Address: P.O. Box 505 James City, PA 16734				X	1/16/25	1/24/25		
Print Name: Howe Township  Signature	Address: 7947 Route 666 Sheffield, PA 16347				X	1/16/25	1/21/25		
Print Name: Cherry Grove Township  Signature	Address: 6039 Cherry Grove Road Clarendon, PA 16313				X	1/16/25	1/18/25		
Print Name:  Signature	Address:								
Print Name:  Signature	Address:								

### 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 200 feet	Building within 200 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"/>
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"/>

**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:  
**Sheffield Township**  
**P.O. Box 784**  
**Sheffield, PA 16347**



9590 9402 8819 4005 5856 41

2. Art **9589 0710 5270 1280 6480 02** **Actual Delivery**  
 PS Form 3811, July 2020 PSN 7530-02-000-9053 **225** Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  Agent  Addressee  
 B. Received by (Printed Name) *Christy Schneider* C. Date of Delivery *1-22-25*  
 D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery
  - Priority Mail Express®
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

**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:  
**Allegheny National Forest**  
**4 Farm Colony Drive**  
**Warren, PA 16365**



9590 9402 8819 4005 5856 34

2. Art **9589 0710 5270 1280 6480 19** **Actual Delivery**  
 PS Form 3811, July 2020 PSN 7530-02-000-9053 **225** Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  Agent  Addressee  
 B. Received by (Printed Name) *[Signature]* C. Date of Delivery *1-11-25*  
 D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery
  - Priority Mail Express®
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

**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:  
**Mead Township**  
**119 Mead Blvd.**  
**Clarendon, PA 16313**



9590 9402 8819 4005 5856 58

2. Article Number (Transfer from service label) **9589 0710 5270 1280 6479 99** **Actual Delivery**  
 PS Form 3811, July 2020 PSN 7530-02-000-9053 **225** Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*  Agent  Addressee  
 B. Received by (Printed Name) *Christy Schneider* C. Date of Delivery *1-18-25*  
 D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail®
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery
  - Priority Mail Express®
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

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:  
 Weirmore Township  
 318 Spring Street  
 Kane, PA 16735



9590 9402 8819 4005 5856 72

2. Article Number (Transfer from service label)  
 PS Form 3811, July 2020 PSN 7530-02-000-9053

225

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  
 X *Spou Rounbley*  Agent  Addressee  
 B. Received by (Printed Name)  
 Jodi Brinkley  Addressee  
 Date of Delivery  
 1/28
- D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

318 Spring St

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:  
 Hamilton Township  
 P.O. Box 23  
 Ludlow, PA 16333



9590 9402 8819 4005 5856 65

2. Article Number (Transfer from service label)  
 PS Form 3811, July 2020 PSN 7530-02-000-9053

225

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  
 X *Rebecca R. Davidson*  Agent  Addressee  
 B. Received by (Printed Name)  
 Rebecca R. Davidson  Addressee  
 Date of Delivery  
 1/28/25
- D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Restricted Delivery
  - Priority Mail Express
  - Registered Mail™
  - Registered Mail Restricted Delivery
  - Signature Confirmation™
  - Signature Confirmation Restricted Delivery

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:  
 Highland Township  
 P.O. Box 505  
 James City, PA 16734



9590 9402 8819 4005 5857 02

2. Article Number (Transfer from service label)

9589 0710 5270 1280 6479 44

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  
*[Signature]*  Agent  Addressee  
 B. Received by (Printed Name)  
 Spou Rounbley  
 Date of Delivery  
 1-24-25
- D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type
- Adult Signature
  - Adult Signature Restricted Delivery
  - Certified Mail
  - Certified Mail Restricted Delivery
  - Collect on Delivery
  - Collect on Delivery Restricted Delivery

- Priority Mail Express
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

2/12/22 dgdg  
 3/28/25 dgdg

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
<ul style="list-style-type: none"> <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>	<p>A. Signature  <input checked="" type="checkbox"/> <i>Beverly Pollock</i> <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <i>Beverly Pollock</i></p> <p>C. Date of Delivery  <i>1-21-25</i></p>												
<p>1. Article Addressed to:</p> <p><b>Howe Township</b>  <b>7947 Route 666</b>  <b>Sheffield, PA 16347</b></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center; color: red; font-size: 24px;">JAN 21 2025</p>												
 9590 9402 8819 4005 5856 89	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®												
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™												
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery												
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™												
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
<input type="checkbox"/> Collect on Delivery Restricted Delivery													
<p>2. Article Number (transfer from service label)</p> <p><b>9589 0710 5270 1280 6479 68</b></p>	<p>Restricted Delivery</p>												

PS Form 3811, July 2020 PSN 7530-02-000-9053 225 Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
<ul style="list-style-type: none"> <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>	<p>A. Signature  <input checked="" type="checkbox"/> <i>[Signature]</i> <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)  <i>[Signature]</i></p> <p>C. Date of Delivery  <i>1-18</i></p>												
<p>1.</p> <p><b>Cherry Grove Township</b>  <b>6039 Cherry Grove Road</b>  <b>Clarendon, PA 16313</b></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>												
 9590 9402 8819 4005 5856 96	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> </table>	<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"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<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"/> Signature Confirmation™												
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
<input type="checkbox"/> Collect on Delivery Restricted Delivery													
<p>2. Article Number (transfer from service label)</p> <p><b>9589 0710 5270 1280 6479 51</b></p>	<p>Restricted Delivery (over \$500)</p>												

PS Form 3811, July 2020 PSN 7530-02-000-9053 225 Domestic Return Receipt

Due Date 3/28/25  
2/12/25

## 1. PROJECT INFORMATION

Project Name: **GF-225 Lot 396 Orphan Well Plugging and New Well Development**

Date of Review: **12/30/2024 12:31:21 PM**

Project Category: **Energy Storage, Production, and Transfer, Energy Production (generation), Oil or Gas - new wells, expansion of well field**

Project Area: **79.24 acres**

County(s): **Warren**

Township/Municipality(s): **Sheffield Township**

ZIP Code:

Quadrangle Name(s): **LUDLOW; SHEFFIELD**

Watersheds HUC 8: **Middle Allegheny-Tionesta**

Watersheds HUC 12: **East Branch Tionesta Creek**

Decimal Degrees: **41.659778, -78.999547**

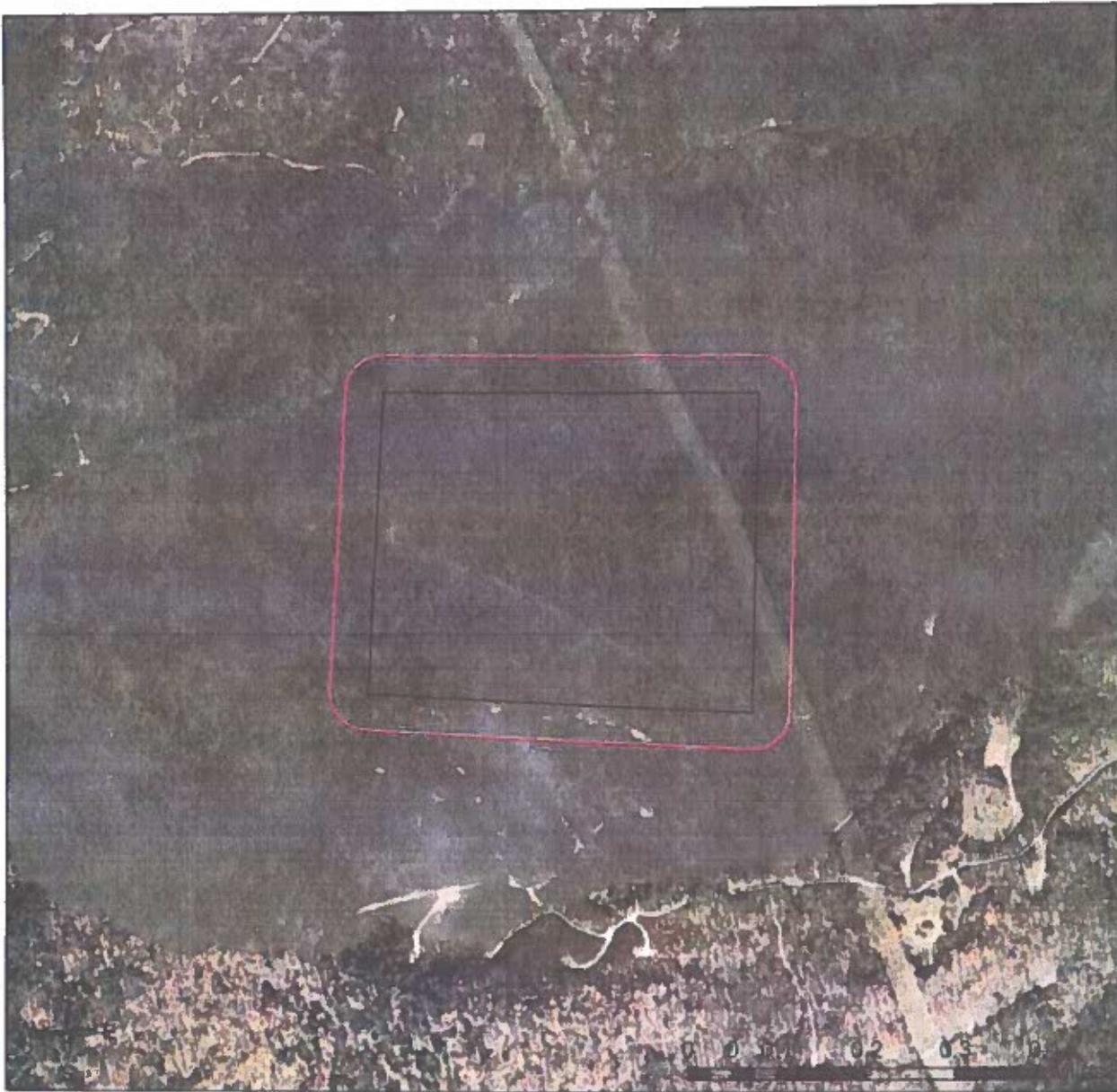
Degrees Minutes Seconds: **41° 39' 35.2003" N, 78° 59' 58.3687" W**

## 2. SEARCH RESULTS

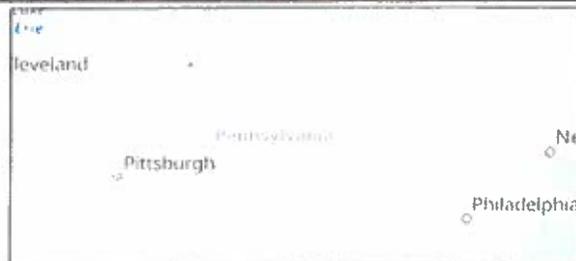
Agency	Results	Response
PA Game Commission	<b>Conservation Measure</b>	<b>No Further Review Required, See Agency Comments</b>
PA Department of Conservation and Natural Resources	No Known Impact	No Further Review Required
PA Fish and Boat Commission	No Known Impact	No Further Review Required
U.S. Fish and Wildlife Service	<b>Avoidance Measure</b>	<b>See Agency Response</b>

As summarized above, Pennsylvania Natural Diversity Inventory (PNDI) records indicate there may be potential impacts to threatened and endangered and/or special concern species and resources within the project area. If the response above indicates "No Further Review Required" no additional communication with the respective agency is required. If the response is "Further Review Required" or "See Agency Response," refer to the appropriate agency comments below. Please see the DEP Information Section of this receipt if a PA Department of Environmental Protection Permit is required.

# GF-225 Lot 396 Orphan Well Plugging and New Well Development

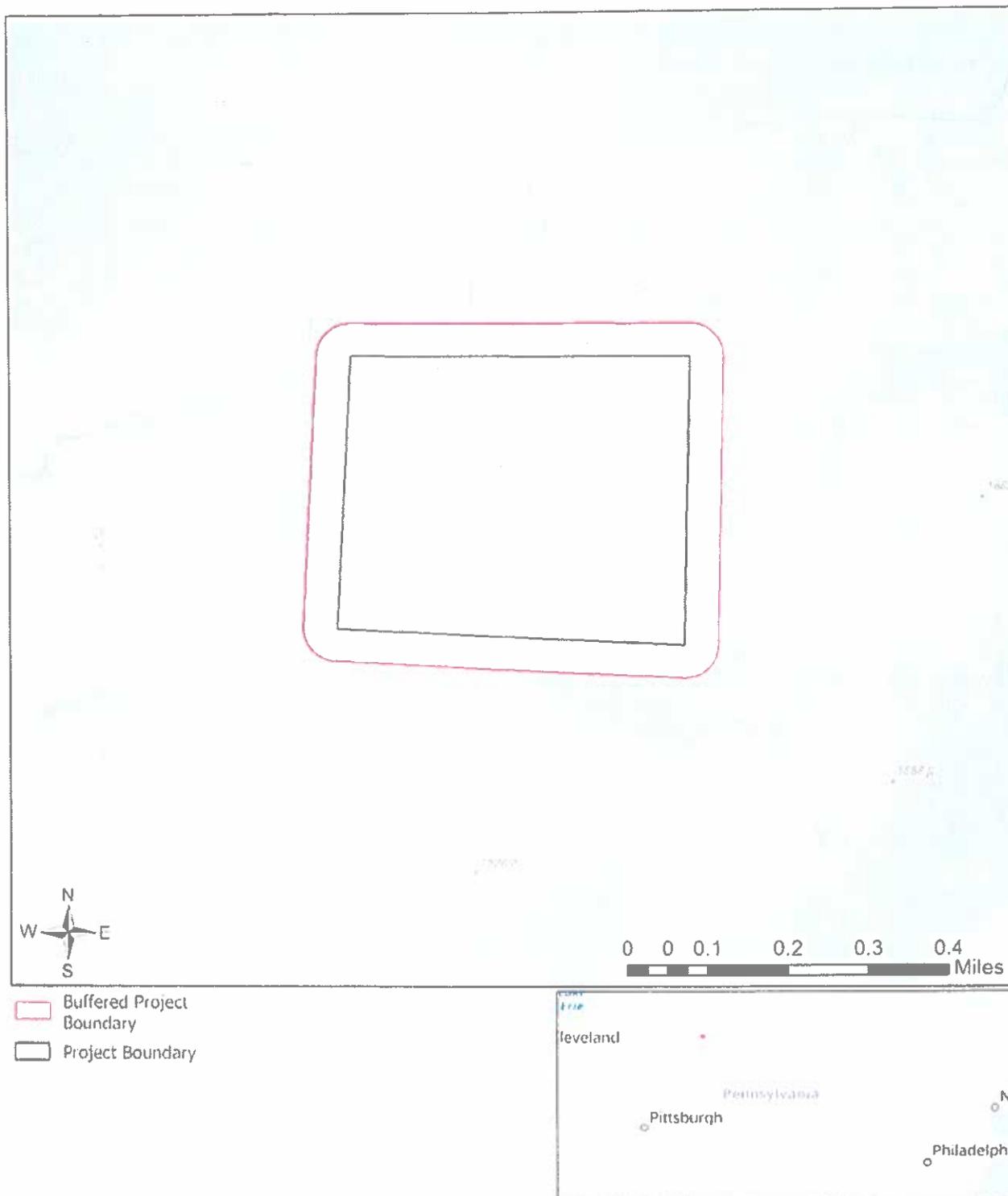


-  Buffered Project Boundary
-  Project Boundary



Sources: Esri, Airbus DS, USGS, NGA, NASA, CGIAR, N. Robinson, NCEAS, NLS, US, NNA, Geodatasyröslen, Rijkswaterstaat, GSA, Googland, FEMA, Intemap, and the GIS user community

### GF-225 Lot 396 Orphan Well Plugging and New Well Development



Sources: Esri, Airbus DS, USGS, NGA, NASA, CGIAR, N Robinson, NCEAS, NLS, OS, NMA, GoodDataStyrolsen, Rijkswaterstaat, GSA, Geoland, FEMA, Intermap and the GIS user community

## RESPONSE TO QUESTION(S) ASKED

**Q1:** Is tree removal, tree cutting or forest clearing necessary to implement all aspects of this project?

**Your answer is:** Yes

**Q2:** How many acres of woodland, forest, forested fencerows and trees will be cut, cleared, removed, disturbed or flooded (inundated) as a result of carrying out all aspects or phases of this project? [Round acreages UP to the nearest acre (e.g., 0.2 acres = 1 acre).]

**Your answer is:** 1 to 10 acres

### 3. AGENCY COMMENTS

Regardless of whether a DEP permit is necessary for this proposed project, any potential impacts to threatened and endangered species and/or special concern species and resources must be resolved with the appropriate jurisdictional agency. In some cases, a permit or authorization from the jurisdictional agency may be needed if adverse impacts to these species and habitats cannot be avoided.

These agency determinations and responses are **valid for two years** (from the date of the review), and are based on the project information that was provided, including the exact project location; the project type, description, and features; and any responses to questions that were generated during this search. If any of the following change: 1) project location, 2) project size or configuration, 3) project type, or 4) responses to the questions that were asked during the online review, the results of this review are not valid, and the review must be searched again via the PNDI Environmental Review Tool and resubmitted to the jurisdictional agencies. The PNDI tool is a primary screening tool, and a desktop review may reveal more or fewer impacts than what is listed on this PNDI receipt. The jurisdictional agencies **strongly advise against** conducting surveys for the species listed on the receipt prior to consultation with the agencies.

#### PA Game Commission

##### RESPONSE:

Conservation Measure: Potential impacts to state and federally listed species which are under the jurisdiction of both the Pennsylvania Game Commission (PGC) and the U.S. Fish and Wildlife Service may occur as a result of this project. As a result, the PGC defers comments on potential impacts to federally listed species to the U.S. Fish and Wildlife Service. No further coordination with the Pennsylvania Game Commission is required at this time.

#### PA Department of Conservation and Natural Resources

##### RESPONSE:

No Impact is anticipated to threatened and endangered species and/or special concern species and resources.

#### PA Fish and Boat Commission

##### RESPONSE:

No Impact is anticipated to threatened and endangered species and/or special concern species and resources.

#### U.S. Fish and Wildlife Service

##### RESPONSE:

Avoidance Measure: The proposed project is in the vicinity of a northern long-eared bat maternity roost(s), capture, or detection. To ensure take is not reasonably certain to occur, do not conduct tree removal from May 15 to August 15. The U.S. Fish and Wildlife Service determined take is not reasonably certain to occur from tree removal if activities are avoided during the pup season (i.e., the range of time when females are close to giving birth (i.e., two weeks prior to birth) and have non-volant (i.e., unable to fly) young). For more information, see the Interim Voluntary Guidance for the Northern Long-Eared Bat: Forest Habitat Modification, available here: <https://www.fws.gov/library/collections/interim-habitat-modification-guidance>.

As the project proponent or applicant, I certify that I will implement the above Avoidance Measure:

 (Signature)

**SPECIAL NOTE: If you agree to implement the above Avoidance Measure and if applicable, any Information Requests, no further coordination with this agency regarding threatened and endangered species and/or special concern species and resources is required. If you are not able to comply with the Avoidance Measures, you are required to coordinate with this agency - please send project information to this agency for review (see "What to Send" section).**

## WHAT TO SEND TO JURISDICTIONAL AGENCIES

If project information was requested by one or more of the agencies above, upload\* or email the following information to the agency(s) (see AGENCY CONTACT INFORMATION). Instructions for uploading project materials can be found [here](#). This option provides the applicant with the convenience of sending project materials to a single location accessible to all three state agencies (but not USFWS).

\*If information was requested by USFWS, applicants must email, or mail, project information to [IR1\\_ESPenn@fws.gov](mailto:IR1_ESPenn@fws.gov) to initiate a review. USFWS will not accept uploaded project materials.

### Check-list of Minimum Materials to be submitted:

\_\_\_ Project narrative with a description of the overall project, the work to be performed, current physical characteristics of the site and acreage to be impacted.

\_\_\_ A map with the project boundary and/or a basic site plan (particularly showing the relationship of the project to the physical features such as wetlands, streams, ponds, rock outcrops, etc.)

**In addition to the materials listed above, USFWS REQUIRES the following**

\_\_\_ **SIGNED** copy of a Final Project Environmental Review Receipt

### The inclusion of the following information may expedite the review process.

\_\_\_ Color photos keyed to the basic site plan (i.e. showing on the site plan where and in what direction each photo was taken and the date of the photos)

\_\_\_ Information about the presence and location of wetlands in the project area, and how this was determined (e.g., by a qualified wetlands biologist), if wetlands are present in the project area, provide project plans showing the location of all project features, as well as wetlands and streams.

## 4. DEP INFORMATION

The Pa Department of Environmental Protection (DEP) requires that a signed copy of this receipt, along with any required documentation from jurisdictional agencies concerning resolution of potential impacts, be submitted with applications for permits requiring PNDI review. Two review options are available to permit applicants for handling PNDI coordination in conjunction with DEP's permit review process involving either T&E Species or species of special concern. Under sequential review, the permit applicant performs a PNDI screening and completes all coordination with the appropriate jurisdictional agencies prior to submitting the permit application. The applicant will include with its application, both a PNDI receipt and/or a clearance letter from the jurisdictional agency if the PNDI Receipt shows a Potential Impact to a species or the applicant chooses to obtain letters directly from the jurisdictional agencies. Under concurrent review, DEP, where feasible, will allow technical review of the permit to occur concurrently with the T&E species consultation with the jurisdictional agency. The applicant must still supply a copy of the PNDI Receipt with its permit application. The PNDI Receipt should also be submitted to the appropriate agency according to directions on the PNDI Receipt. The applicant and the jurisdictional agency will work together to resolve the potential impact(s). See the DEP PNDI policy at <https://conservationexplorer.dcnr.pa.gov/content/resources>.

## 5. ADDITIONAL INFORMATION

The PNDI environmental review website is a preliminary screening tool. There are often delays in updating species status classifications. Because the proposed status represents the best available information regarding the conservation status of the species, state jurisdictional agency staff give the proposed statuses at least the same consideration as the current legal status. If surveys or further information reveal that a threatened and endangered and/or special concern species and resources exist in your project area, contact the appropriate jurisdictional agency/agencies immediately to identify and resolve any impacts.

For a list of species known to occur in the county where your project is located, please see the species lists by county found on the PA Natural Heritage Program (PNHP) home page ([www.naturalheritage.state.pa.us](http://www.naturalheritage.state.pa.us)). Also note that the PNDI Environmental Review Tool only contains information about species occurrences that have actually been reported to the PNHP.

## 6. AGENCY CONTACT INFORMATION

### PA Department of Conservation and Natural Resources

Bureau of Forestry, Ecological Services Section  
400 Market Street, PO Box 8552  
Harrisburg, PA 17105-8552  
Email: [RA-HeritageReview@pa.gov](mailto:RA-HeritageReview@pa.gov)

### PA Fish and Boat Commission

Division of Environmental Services  
595 E. Rolling Ridge Dr., Bellefonte, PA 16823  
Email: [RA-FBPACENOTIFY@pa.gov](mailto:RA-FBPACENOTIFY@pa.gov)

### U.S. Fish and Wildlife Service

Pennsylvania Field Office  
Endangered Species Section  
110 Radnor Rd; Suite 101  
State College, PA 16801  
Email: [IR1\\_ESPenn@fws.gov](mailto:IR1_ESPenn@fws.gov)  
NO Faxes Please

### PA Game Commission

Bureau of Wildlife Management  
Division of Environmental Review  
2001 Elmerton Avenue, Harrisburg, PA 17110-9797  
Email: [RA-PGC\\_PNDI@pa.gov](mailto:RA-PGC_PNDI@pa.gov)  
NO Faxes Please

## 7. PROJECT CONTACT INFORMATION

Name: Tyler Q Martin  
Company/Business Name: Cameron Energy Company  
Address: 507 Cherry Grove Rd  
City, State, Zip: Clarks Summit PA 16313  
Phone: (814) 968-3337 Fax: (814) 968-3330  
Email: tylerqmartin@gmail.com

## 8. CERTIFICATION

I certify that ALL of the project information contained in this receipt (including project location, project size/configuration, project type, answers to questions) is true, accurate and complete. In addition, if the project type, location, size or configuration changes, or if the answers to any questions that were asked during this online review change, I agree to re-do the online environmental review.

Tyler Q Martin  
applicant/project proponent signature

1-13-2025  
date

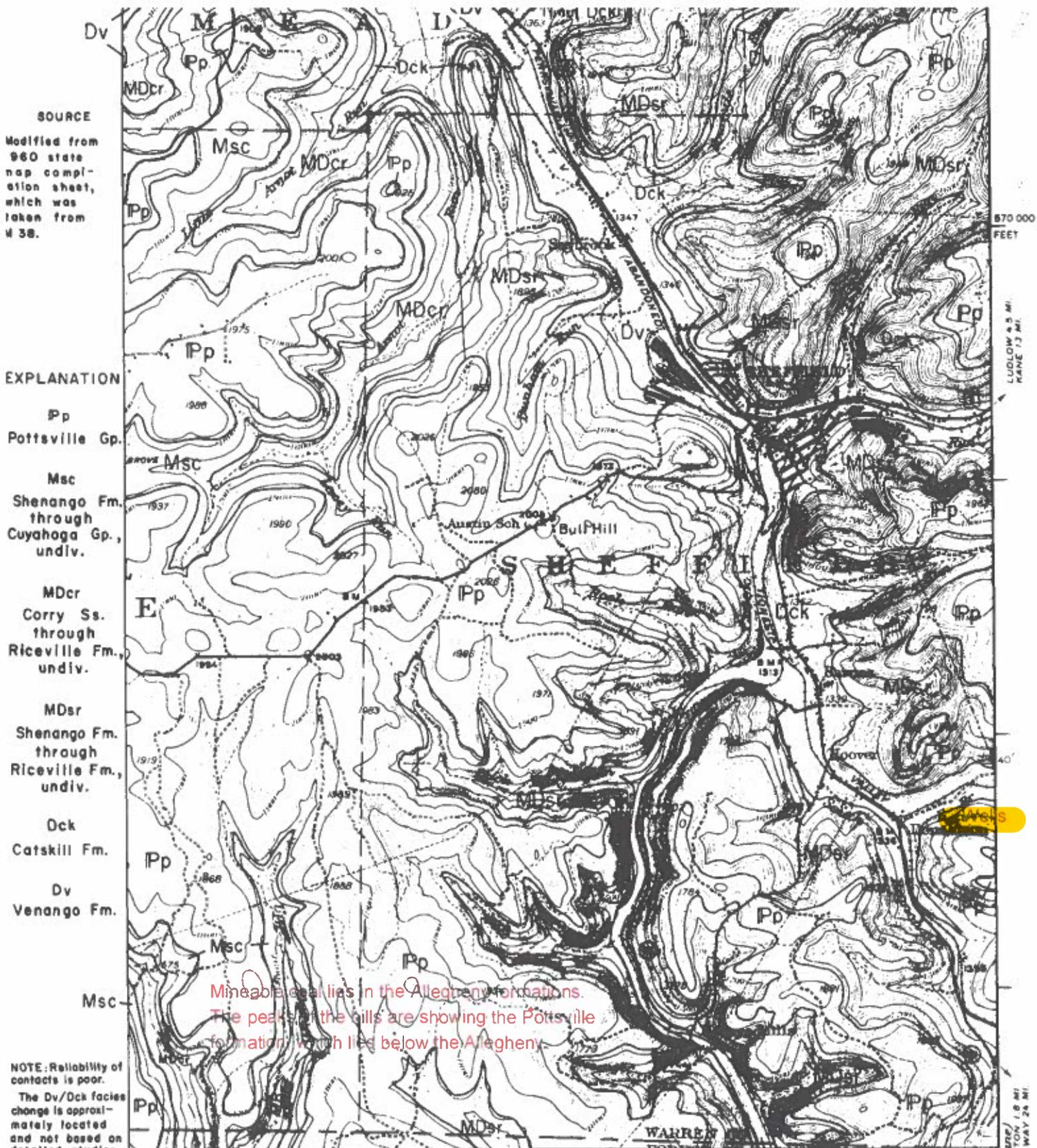


COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
OIL AND GAS MANAGEMENT PROGRAM

DEP USE ONLY	
APS #	Site #
Permit #	Auth ID #

## Coordination of a Well Location with Public Resources

Well Operator Cameron Energy Company		DEP ID# 300544	Well Farm Name and Number Lot 396 396-5	
Address 507 Cherry Grove Road			Project Number (if previously assigned)	
City Clarendon	State PA	Zip Code 16313	County Warren	Municipality Sheffield Township
Phone 814-968-3337	Fax 814-968-3330	Latitude N 41° 39' 35.7"	Longitude W 79° 00' 10.8"	
1. Will the well be located in or within 200 feet of a publicly owned park, forest, gameland, designated wildlife area or Natural National Landmark? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
2. Will the well be located within the corridor of a state or national scenic river? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<p>Portions of the Allegheny River and Clarion River are currently on the National Wild and Scenic Rivers list. Detailed descriptions are available on the National Scenic Rivers website: <a href="http://www.nps.gov/rivers/wildriverslist.html#pa">www.nps.gov/rivers/wildriverslist.html#pa</a></p> <p>Portions of three other creeks and streams in oil and gas producing areas are currently listed as Pennsylvania Scenic Rivers. These are: Pine Creek in Tioga County, Lick Run in Clinton County, and Bear Creek in Fayette County. The streams corridor maps are available on DCNR's web site: <a href="http://www.dcnr.state.pa.us/brc/rivers/scenicrivers/locationmap.htm">www.dcnr.state.pa.us/brc/rivers/scenicrivers/locationmap.htm</a></p>				
3. If answering "Yes" to questions 1 or 2, name the public resource(s): Allegheny National Forest				
List the name, address and phone number of the person responsible for management of the public resource. Allegheny National Forest, 4 Farm Colony Drive Warren, PA 16365, (814)723-5150				
Must the administrator of the public resource approve or otherwise authorize the proposed well, well site, access road, or gathering pipeline? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Has the approval or authorization been received? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
4. Has the search of the proposed well location against the Pennsylvania Natural Diversity Inventory (PNDI), or any other evaluation, identified a potential conflict with a species of special concern? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, provide PNDI Search Number _____ or attach a copy of the PNDI Search Results.				
If a potential conflict with a species of concern was identified, give the name of the responsible agency.				
Has the potential conflict been resolved? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
5. Will the well be located within 200 feet of any historical or archaeological sites listed as federal or state historic places? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
6. Describe in detail the additional measures, facilities, or practices specific to this site to be employed during site construction, drilling and operation to ensure the safety of the public and to protect public resource identified above. Use additional sheets as needed.				
Question #3 was answered "Yes" in both instances. The ANF has been notified as required by the Minard Run and Minard Run II decisions. All operations will be carried out in cooperation with the Allegheny National Forest.				
The PA Game Commission defers comments to the US Fish and Wildlife Service.				
US Fish and Wildlife Service, Avoidance Measure, tree removal will not occur between May 15 and August 15.				



**SOURCE**  
 Modified from  
 960 state  
 map compila-  
 tion sheet,  
 which was  
 taken from  
 # 38.

**EXPLANATION**

Pp  
 Pottsville Gp.

Msc  
 Shenango Fm.  
 through  
 Cuyahoga Gp.,  
 undiv.

MDcr  
 Corry Ss.  
 through  
 Riceville Fm.,  
 undiv.

MDsr  
 Shenango Fm.  
 through  
 Riceville Fm.,  
 undiv.

Dck  
 Catskill Fm.

Dv  
 Venango Fm.

**NOTE:** Reliability of  
 contacts is poor.  
 The Dv/Dck facies  
 change is approx-  
 imately located  
 and not based on  
 detailed studies.

**REFERENCE**  
 Ingham, A. I., Lytle, W. S., Matteson,  
 L. S., and Sherrill, R. E. (1956), *Oil  
 and gas geology of the Sheffield  
 quadrangle, Pennsylvania*, Pennsylv-  
 ania Geological Survey, 4th ser.,  
 Mineral Resource Report 38, 72 p.



Compiled by W. E EDMUNDS 1977

SHEFFIELD 15' (NE)

This Map is from Map 61 - Atlas of Preliminary Geologic Quadrangle Maps of Pennsylvania  
 1981 PA Geological Survey

Due Date 3/28/25  
 2/12/05 dg



**CHECKLIST FOR COMPLETING AN APPLICATION  
FOR A PERMIT TO DRILL, OPERATE OR ALTER  
AN OIL OR GAS WELL**

(Forms 8000-PM-OOGM0001 and 8000-PM-OOGM0002)

Farm Name - Well # Lot 396 / 396-5	
Applicant Name Cameron Energy Company	DEP ID# 300544
<b>DEP USE ONLY</b>	Auth Id

This optional checklist is for your use to help assure that you submit a complete application. Failure to provide all required information will delay processing. Compare your finished application to this list to make sure you include all the required information, forms, and documents. Mark the box in the appropriate column for those items which are attached, or not applicable.

REQUIREMENT	Conventional		Unconventional	
	Included	N/A	Included	N/A
a. Page 1 with all spaces filled in where applicable.	<input type="checkbox"/>		<input type="checkbox"/>	
b. Page 2, with names, addresses, and signatures (surface owner, water supplies purveyors, coal mines, and gas storage operator municipality and adjacent municipalities).	<input type="checkbox"/>		<input type="checkbox"/>	
c. Location plat, form 8000-PM-OOGM0002, Original and one copy	<input type="checkbox"/>		<input type="checkbox"/>	
d. Application fee based on permit fee calculator, check or money order payable to "Commonwealth of Pennsylvania."	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Proof and record of notifications and/or written consent, as applicable: 1. Attach copies of signed and dated certified mail receipt cards or a completed "Affidavit of Non-Delivery of Certified Mail" as proof that you notified the parties listed on page 2. Note that you are required to send a copy of the whole application (pages 1 and 2 of form 8000-PM-OOGM0001 as well as the plat, form 8000-PM-OOGM0002 and attachments). Also, to parties with water supplies within 1,000 or 3,000 feet of the well location as applicable, include "Landowner Notification of Well Drilling or Alterations," form (8000-FM-OOGM0052). 2. For required or optional written consent from a notified party -- is the party's signature in ink on the appropriate blank on Page 2, or on a separate document.	<input type="checkbox"/>		<input type="checkbox"/>	
f. Bond instrument, if not already in effect	<input type="checkbox"/>		<input type="checkbox"/>	
g. Bond Agreement Id # provided on Page 1 if bond is in effect	<input type="checkbox"/>		<input type="checkbox"/>	
h. For a "Phased Deposit" bond -- additional collateral, if required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. "Coal well" -- spacing exception request or well cluster spacing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Request for Waiver for Distance Requirements from Springs, Stream, Body of Water, or Wetland, form 8000-FM-OOGM0057.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Request For Variance From Distance Restriction From Existing Building Or Water Supply, form 8000-FM-OOGM0058.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Request For Approval of Alternate Waste Management Practices (form 5500-PM-OG0071), if needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Proposed Alternate Method of Casing, Plugging, Venting or Equipping (form 8000-PM-OOGM0024), if needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Coordination of a Well Location with Public Resources (form 8000-PM-OOGM0076), if needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. For a disposal well or an enhanced recovery well, include the additional information required by regulations §78.18 (EPA UIC permit; control and disposal plan; erosion and sedimentation control plan).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Attach a copy of your PNDI check for the proposed well location shown on your plat.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Earth Disturbance Permit: Attached on prior ESCGP approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. WMP for Unconventional Well: Attached prior approval.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Signature of Applicant</b>				
s. On page 1 of the application -- the signature, and printed name and title of the person authorized to submit the application, and date. See instructions, <b>SIGNATURE OF APPLICANT.</b>	<input type="checkbox"/>		<input type="checkbox"/>	





COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
OIL & GAS MANAGEMENT PROGRAM

DEP USE ONLY	
Auth # 1515669	APS # 1130741
Site # 877964	Facility # 881521
FIX Client # 300544	Sub-fac # 1439058

FEB 12 2025

**Request for Approval of**

**Environmental Protection Alternative Waste Management Practices**  
**Northwest Regional Office**

*Please read instructions on back before completing this form.*

Well Operator Cameron Energy Company		DEP ID 300544	Well Permit or Registration Number 123-49097	
Address 507 Cherry Grove Road			Well Farm Name Lot 396	
City Clarendon	State PA	Zip Code 16313	Well # 396-5	Serial #
Phone 814-968-3337	Fax 814-968-3330	County Warren	Municipality Sheffield Township	

**INTENDED ALTERNATIVE PRACTICE** *Check the appropriate box and complete the applicable section of the form.*

- For temporary containment of fluids and wastes generated during drilling, altering, or completing a well, complete Section A. PITS AND TANKS FOR TEMPORARY CONTAINMENT. See 25 Pa. Code § 78.56 for regulations.
- For disposal of drill cuttings from above the surface casing seat, complete Section B. ALTERNATE WASTE DISPOSAL PRACTICES. See 25 Pa. Code § 78.61 for regulations.
- For disposal of residual waste and drill cuttings from below the surface casing seat, complete Section B. ALTERNATE WASTE DISPOSAL PRACTICES. See 25 Pa. Code § 78.62 or § 78.63 for regulations.
- For onsite pretreatment systems being used to treat frac flowback fluid for reuse/recycling or transportation to a permitted treatment/disposal facility, complete Sections A and C. See 25 PA Code 78.56; 78.61; 78.62 & 78.63 for regulations.

**A. PITS AND TANKS FOR TEMPORARY CONTAINMENT**

Complete this section if requesting approval of an alternative practice for temporary containment of polluttional substances and wastes from drilling, altering, or completing a well. See 25 Pa. Code § 78.56.

- a) Check the box below and fill in the dates the pit will be used if you are requesting a variance from the requirement that the bottom of the pit be at least 20 inches above the seasonal high groundwater table for a pit that exists only during dry times of the year and is located above groundwater. See 25 Pa. Code § 78.56(a)(4)(iii).
  - Variance requested; dates to be used, from \_\_\_\_\_ to \_\_\_\_\_
- b) Check the box below if you are requesting approval of an alternative practice for temporary containment.
  - Approval of an other alternative practice is requested. Describe the type of waste and the temporary containment method. Include information which will demonstrate that the proposed alternative practices will provide equivalent or superior protection to the practices indentified in 25 Pa. Code § 78.56.

Due Date 3/28/25  
2/12/25 dg

**B. ALTERNATIVE WASTE DISPOSAL PRACTICES**

Complete this section if requesting approval of an alternative practice to dispose of drill cuttings or residual wastes at the well site. Describe the type of waste, including any additives, and the proposed alternative practice. Include information that will demonstrate the proposed practice will provide protection equivalent or superior to the practices identified in 25 Pa. Code § 78.61, 78.62, or 78.63.

Cameron Energy Comany is requesting DEP approval for disposal of uncontaminated drill cuttings into a structurally sound and initially unlined drill pit (to be lined later).

Before the drill cuttings enter the pit, fresh water will be injected into the blooie line, eliminating dust. The pit will be located more than 100' from a stream or wetland and 200' from an existing building or water supply.

East Branch of the Tionesta Creek lies +/-830' northwest of the clearing limits, there aren't any wetlands or buildings within 400' of the project.

The attached site plans depict the proposed well and pit locations (depending upon soils, drainage and other conditions observed during construction) and any stream, wetland or building that may be within 250' of the well.

According to the Map Unit Description of Warren and Forest Counties, the soil at the well location is Hazleton channery sandy loam (HvF).

Historical records indicate fresh water will be encountered at a depth of 435'.

Prior to fracing, a 20 mil liner will be installed in the pit on top of the drill cuttings to contain frac fluids.

The pit will be backfilled, graded and seeded and mulched.

Ph and conductivity will be tested and reported according to regulations.

**C. ONSITE PRETREATMENT OF DRILLING FLUIDS OR FRAC FLOWBACK FLUID**

Complete this section if requesting approval of an onsite mobile pretreatment system for drilling fluids and/or frac flowback for recycling/reuse or transportation to a permitted treatment/disposal facility.

a) Check the appropriate box or boxes that best describe the planned treatment on site.

Use of chemicals or technologies not part of the original permitted well site or in the PPC plan.

Storage of drilling fluids or frac flowback for recycle/reuse.

Transportation of drilling fluids or frac flowback for recycle/reuse.

Disposal of the original waste stream and/or any new waste streams created through pretreatment at an approved permitted facility.

b) Provide a narrative description for all boxes checked above including pretreatment facility design and methodology (use additional pages if necessary)

c) Company/contractor for the onsite treatment facility including name, address, contact person and contact information.

d) Disposal location and permit number for all residual waste generated from the treatment process:

**SIGNATURE OF APPLICANT**

Signature of Applicant / Well Operator 	Print or Type Signer's Name and Title Arthur J. Stewart, President	Date 2.10.25
---	---	-----------------

DEP USE ONLY		
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied DEP Representative:	Conditions: <input checked="" type="checkbox"/> YES, see below or attached. <input type="checkbox"/> NO	Date 02.25.25
Conditions:  <p style="text-align: center;">Please see the attached special conditions.</p>		

**Instructions**

Use this form to apply for approval of alternative waste management practices under 25 Pa. Code § 78.56, 78.61, 78.62, or 78.63.

Complete this form and submit it with all other necessary documentation. Label each attachment with applicant's name and the information item it refers to.

Send your application to the Oil and Gas Management Program at the appropriate DEP regional office:

PA DEP  
 Oil & Gas Management Program  
 Northwest Regional Office  
 230 Chestnut Street  
 Meadville, PA 16335-3481  
 Phone: 814-332-6860  
 Fax: 814-332-6121

PA DEP  
 Oil & Gas Management Program  
 Southwest Regional Office  
 400 Waterfront Drive  
 Pittsburgh, PA 15222-4745  
 Phone: 412-442-4015  
 Fax: 412-442-4328

PA DEP  
 Oil & Gas Management Program  
 Northcentral Regional Office  
 208 West Third Street  
 Williamsport, PA 17701-6448  
 Phone: 570-321-6550  
 Fax: 570-327-3565

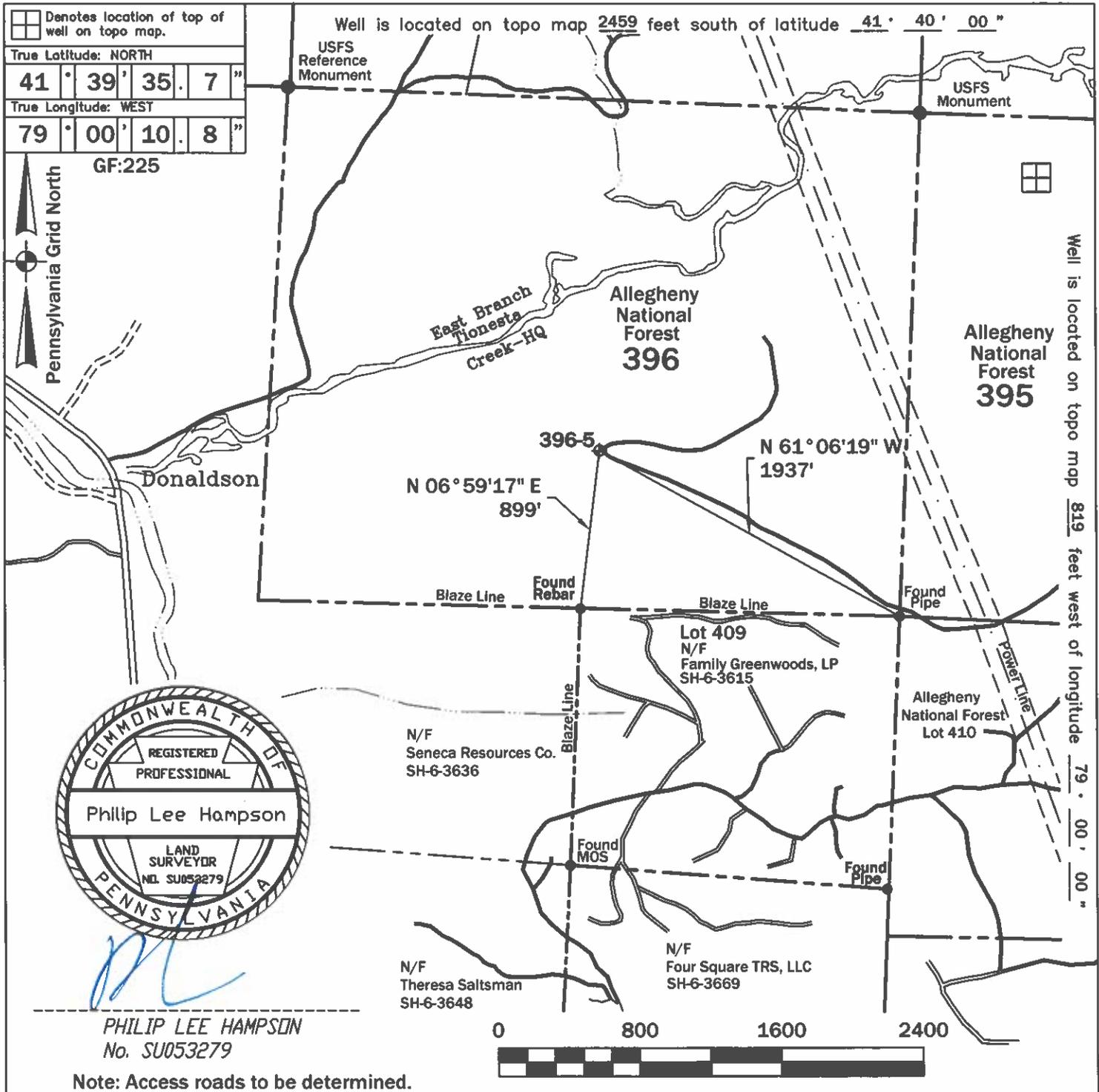


COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
OFFICE OF OIL AND GAS MANAGEMENT

DEP	Auth ID #:	G:
USE	Permit #:	C:
ONLY	Project #:	

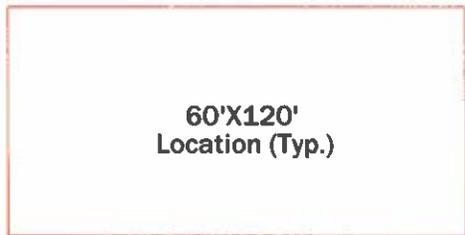
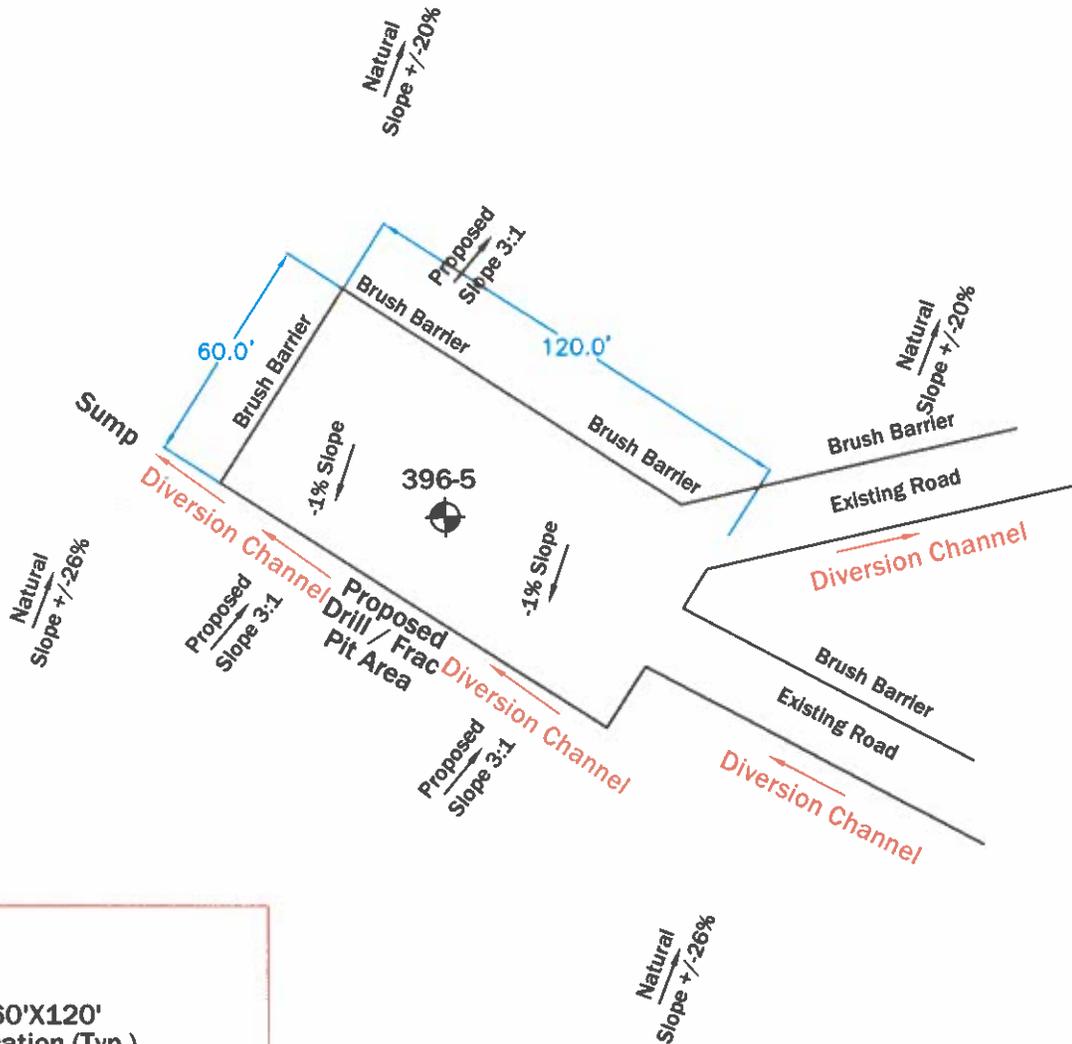
WELL LOCATION PLAT

PAGE 1 Surface Location



Applicant/Well Operator Name: Cameron Energy Company, Inc.		DEP ID # 300544	Well (Farm) Name: Lot 396		Well #: 396-5	Serial #:
Address: 507 Cherry Grove Road, Clarendon, PA 16313			County: Warren (62)	Municipality: Sheffield Township	Well Type: Oil	
911 address of well site: NA			USGS 7½' Quadrangle Map Name: Sheffield (513)	Map Section: 9	Surface Elevation: 1468 ft.	
Surveyor or Engineer: Philip L Hampson	Phone #: 814-730-1822	Dwg #: E/396-5	Date: 01/16/25	Scale: 1"=800"	Tract Acreage: +/-237 acres	
Lat. & Long Metadata Method: Direct GPS	Accuracy: +/-15' ft.	Datum: NAD83	Elevation Metadata Method: Scaled	Accuracy: LIDAR	Datum: NAD 83	Survey Date: 01/15/25





60'X120'  
Location (Typ.)



10'X15" Drill / Frac  
Pit (Typ.)

A minimum of 100' must be maintained  
between pits and mapped blue line streams.

Note: Diversion Channel must be plugged to  
prevent drill and frac fluids from leaving the site.

Note: Install energy dissipaters at the out fall  
of culverts where high flow may cause  
accelerated erosion.

Note: Use additional erosion and sediment  
control methods on an as needed basis.

Scale: Not to Scale

Date: 1/21/2025



105 Willoughby Avenue • Warren, PA 16365  
(814)730-1822 • hampson@westpa.net

Well 396-5

Cameron Energy Company

Lot 396

*Allegheny National Forest*

Sheffield Township, Warren County

Pennsylvania

## **Special Conditions:**

### **AWMI**

The Operator shall comply with the following:

1. Notify their local Oil and Gas Inspector three days prior to dusting.
2. Drill cuttings shall remain on the well site they are generated and shall not be dispersed off-site via air, surface water, or groundwater.
3. All isolation distances identified in 25 Pa. Code § 78.60 – 78.63 are applicable.
4. Drill cuttings may be disposed of in a pit, without contact with season high ground water.
5. Upon well completion, the pit shall be backfilled and graded to promote runoff. The stability of the backfilled pit shall be compatible with surrounding area and the pit area shall be revegetated to stabilize surface soil.
6. Land application may only occur on the cleared well pad area and the drill cuttings shall be spread and incorporated to a depth of at least 6 inches and revegetated to stabilize surface soil.
7. No land application shall occur if the ground is frozen or saturated.

**From:** [Hogue, Kate](#)  
**To:** [Tyler Martin](#); [Marlene Kipp](#); [camelot1@atlanticbb.net](#); [katie@cameronenergycompany.com](#); [accounts@cameronenergycompany.com](#)  
**Cc:** [Ayers, Brian](#)  
**Subject:** Auth 1515631 123-49091, 123-49094, 123-49092, 123-49093, 123-49095, 123-49096, 123-49097  
**Date:** Friday, March 7, 2025 1:47:00 PM  
**Attachments:** [Auth 1515631 123-49091.pdf](#)  
[Auth 1515632 123-49094 Well Permit.pdf](#)  
[Auth 1515637 123-49092.pdf](#)  
[Auth 1515642 123-49093.pdf](#)  
[Auth 1515648 123-49095 Well Permit.pdf](#)  
[Auth 1515652 123-49096.pdf](#)  
[Auth 1515665 123-49097.pdf](#)  
[123-49094 AWM approved 02.25.25.pdf](#)  
[123-49095 AWM approved 02.25.25.pdf](#)  
[123-49096 AWM approved 02.25.25.pdf](#)  
[123-49097 AWM approved 02.25.25.pdf](#)  
[123-49091 AWM approved 02.25.25.pdf](#)  
[123-49092 AWM approved 02.25.25.pdf](#)  
[123-49093 AWM approved 02.25.25.pdf](#)  
[Well Permit Cover Letter \(conventional\) 1-12-23.pdf](#)

---

**Operator,**

The Department of Environmental Protection has completed the review of the applications corresponding to the attached permits.

The department hereby approves the permits to drill and operate the wells pursuant to applicable laws and regulations for this activity and to specific conditions of the individual permits.

The cover letter for these permits is also attached.

This information can also be viewed on our website, at the Oil and Gas Mapping tool:

<https://www.depgis.state.pa.us/PaOilAndGasMapping/>

Thanks,  
Kate

Kate Hogue I Clerical Supervisor II  
Department of Environmental Protection I Bureau of Oil and Gas Management  
230 Chestnut Street I Meadville PA 16335  
Phone: 814.332.6868  
[www.dep.pa.gov](http://www.dep.pa.gov)