5500-FM-OG0001A Rev. 11/2007

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

WELL PERMIT

DEP USE ONLY	
Permittee's eFACTS ID: **74858**	Auth ID: **1534641**
Watershed Name: **MUDLICK RUN**	Quality: **HQ**

Permittee: **MSL OIL AND GAS CORPORATION**	OGO.#: **OGO-42580**	Permit Number: **37-083-57863-00-00**	Date Issued: **08/14/2025**
Address: **PO BOX 151**		Farm Name & Well Number: **DUTTER LOT 226 38**	Well Serial #:
		Municipality: **Wetmore Twp**	County: **McKean**
BRADFORD, PA 16701-0151		7½ ' Quadrangle Name: **Kane**	Map Section #: **1**
Phone: **(814) 362-6891**	Project #	Latitude: **41-43-25.8500**	Longitude: **-78-52-11.6900**
Surf Elev at Site: **1971 feet**	Anticipated Maximum TVD: **2200 feet** / Well Type: **OL**	Offset distances referenced to NE corner of map section.	**South 9529 feet West 9986 feet**

This permit covering the well operator and well location shown above is evidence of permission granted to conduct activities in accordance with the Oil and Gas Act and the Oil and Gas Conservation Law, if the well is subject to that act and any rules and regulations promulgated thereunder, subject to the conditions contained herein and in accordance with the application submitted for this permit. This permit does not convey any property rights.

This permit and the permittee's authority to conduct the activities authorized by this permit are conditioned upon operator's compliance with applicable law and regulations.

Notification must be given to the district oil and gas inspector, the surface landowner and political subdivision of the date well drilling will begin at least 24 hours prior to commencement of drilling activities.

The permittee hereby authorizes and consents to allow, without delay, employees or agents of the Department to have access to and to inspect all areas upon presentation of appropriate credentials, without advance notice or a search warrant. This includes any property, facility, operation or activity governed by the Oil and Gas Act, the Oil and Gas Conservation Law, the Coal and Gas Resource Coordination Act and other statutes applicable to oil and gas activities administered by the Department. The authorization and consent shall include consent to the Department to collect samples of wastewaters or gases, to take photographs, to perform measurements, surveys, and other tests, to inspect any monitoring equipment, to inspect the methods of operation and disposal, and to inspect and copy documents required by the Department to be maintained. The authorization and consent includes consent to the Department to examine books, papers, and records pertinent to any matter under investigation pursuant to the Oil and Gas Act or pertinent to a determination of whether the operator is in compliance with the above referenced statutes. This condition in no way limits any other powers granted to the Department under the Oil and Gas Act and other statutes, rules and regulations applicable to these activities as administered by the Department.

This permit does not relieve the operator from the obligation to comply with the Clean Streams Law and all statutes, rules and regulations administered by the Department.

Special Permit Conditions:

1) This permit is conditioned upon the well operator obtaining all appropriate approvals, including local, municipal, and zoning approvals, and any revision or modification of those approvals.

2) Contact the Inspector at least 24 hours prior to commencing any frac/stimulation procedures.

This permit expires **08/14/2026** unless drilling is commenced on or before that date and prosecuted with due diligence.

Thomas Donohue 8/14/25
Subsurface Permits Environmental Program Manager

CHAD EDWARD MCNELLIE	PO BOX 669 KNOX, PA 16232	814-758-4562
Oil & Gas Inspector	Address	Phone Number

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

PERMIT APPLICATION TO DRILL AND OPERATE A CONVENTIONAL WELL

DEP USE ONLY

Notes: NC AWM; CK #31122 $1350 3 APPS; PNDI - 11/22/24	OGO # 42580	Objection Date - Do not issue before: 7/21/2025	API #'s37- 083-57863
	Client Id 74858	Date Approved:	and - ; - ; - ; - ; -
	Bond # 6031	SGP 8/11/25	Watershed Name: MUDLICK RUN; Designation: ☒ HQ ☐ EV
	C: 07/22/25 BS G: BEH 8/6/2025; INV:	Special Cond. ZONING; FRAC/STIM 24	
	APS #1141817 Auth Id 1534641	Site Id 881774	PF Id 885454 SF Id 1451898

Please read instructions before you begin filling in this form.

WELL INFORMATION

Well Operator: M.S.L. OIL & GAS CORPORATION	DEP ID#: 42580	Well API #: 37- - - -	Well Farm Name: DUTTER LOT 226	Well #: 38
Address: P.O. BOX 151		LAT 41°43· 25.85- LONG - 78°52· 11.69- NAD 83	Project Number	Serial #
City: BRADFORD	State: PA	Zip: 16701	Municipality Name/ City, Borough, Township: WETMORE Township	County: McKEAN
Phone: 814-362-6891	Fax: 814-362-9912	Email: office@msloilandgas.com	USGS 7.5 min. quadrangle map: KANE, PA	Section: 1

☐ Check if this is a new address

24/7 Emergency Phone contact number: 814-362-6891

911 address of well site (if available):

Freshwater Impoundment Name/ Identification: N/A	Centralized Impoundment Name/ Identification: N/A	Well Pad Name/Identification: N/A	Borrow Area Name/Identification: DUTTER LOT 226 PIT

Surface Elev: 1971'	Deepest Formation to be penetrated: COOPER	Anticipated TVD: 2200'
Target Formation(s) proposed for production: COOPER		Anticipated Target Top/Bottom TVD: 1920' 1960'

Number of wellbore laterals proposed under this application 0

Total feet of wellbore to be drilled under this application 2200 Ft.

If applying for a permit to rework an existing well not registered or permitted, check this box ☐ and **enter date drilled,** if known:_____ (see instructions)

PNDI Attached: ☒ Any threatened or endangered "hit" must include a copy of the clearance letter from the applicable agency(ies).

Application submitted as: Coal well: ☐ Attach Coal Module; CBM well ☐ Attach Coal Module; Non coal well ☒ Attach justification.

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Northwest Regional Office

PERMIT TYPE (Check applicable.)
Application is to:
- ☒ Drill a new
- ☐ Re-permit expired permit
- ☐ Deepen well
- ☐ Redrill wellbore
- ☐ Alter well
- ☐ Other (specify)

TYPE OF WELL (Check applicable.)
- ☐ Gas
- ☒ Oil
- ☐ Comb. (gas & oil/condensate)
- ☐ Injection, recovery
- ☐ Injection, disposal
- ☐ Coalbed Methane
- ☐ Gas Storage
- ☐ Other (specify)

Configuration
- ☒ Vertical
- ☐ Horizontal
- ☐ Deviated
- ☐ Multiple laterals

APPLICATION FEE (Check applicable.)
- ☒ Conventional
- ☐ $200 (Home Use Well)

Total Application Fee $ 450

Bond Agreement Id: 6031

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).	☐	☒
a. If "Yes" to #1, is the well at least 330 feet from outside lease or unit boundary?	☐	☐
b. Does the location fall within an area covered by a spacing order?	☐	☐
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?	☐	☐

Tech date 9/3/25
7/22/25 BS

3. Will the well penetrate or be within 2,000 feet of an active **gas storage reservoir** boundary?	☐	☒
a. If Yes, print the names of: Storage Field: Operator:		
4. Is the proposed well location within the permitted area of a **landfill**?	☐	☒
5. Will the well be drilled within 200 feet from any existing building or an existing water supply?	☐	☒
a. If "Yes," is written consent from the owner attached?	☐	☐
b. If written consent is not attached, is a variance request (form 8000-FM-OOGM0058) attached?	☐	☐
6. 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 5500-PM-OG0076? If yes, attach a competed copy of the form and clearance letters from applicable agencies.	☒	☐
7. Will any portion of the well site be in a Special Protection High Quality ☒ (HQ) or Exceptional Value ☐ (EV) watershed?	☒	☐
Provide name of special protection stream MUDLICK RUN.		
7.1 Will the well be drilled using enhanced drilling or completion technologies into a formation that typically produces gas or petroleum?	☐	☒
8. 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. Has not been issued	☐	☒
8.1 Is the disturbed area of the well site between 1 to 5 acres and in a Special Protection Watershed	☐	☒

9. Is waste, including drill cuttings, from the drilling of this well is to be disposed of on this well site? Yes ☒ No ☐

10. 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. Yes ☐ No ☒
    a. If yes, is a waiver request attached that will protect the Waters of the Commonwealth? Yes ☐ No ☐

11. Is the well to be located within a H_2S area pursuant to §78.77a? Yes ☐ No ☒

12. Attach a current Ownership & Control form 8000-FM-OOGM0118.

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: WILLIAM OTTO Title: OPERATIONS MANAGER	BEH 8/7/2025 Date 7/16/2025

Application Preparer/Contact: WILLIAM OTTO Phone: 814-362-6891

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DEPARTMENT OF ENVIRONMENTAL PROTECTION

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DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS MANAGEMENT

WELL LOCATION PLAT

PAGE 1 Surface Location

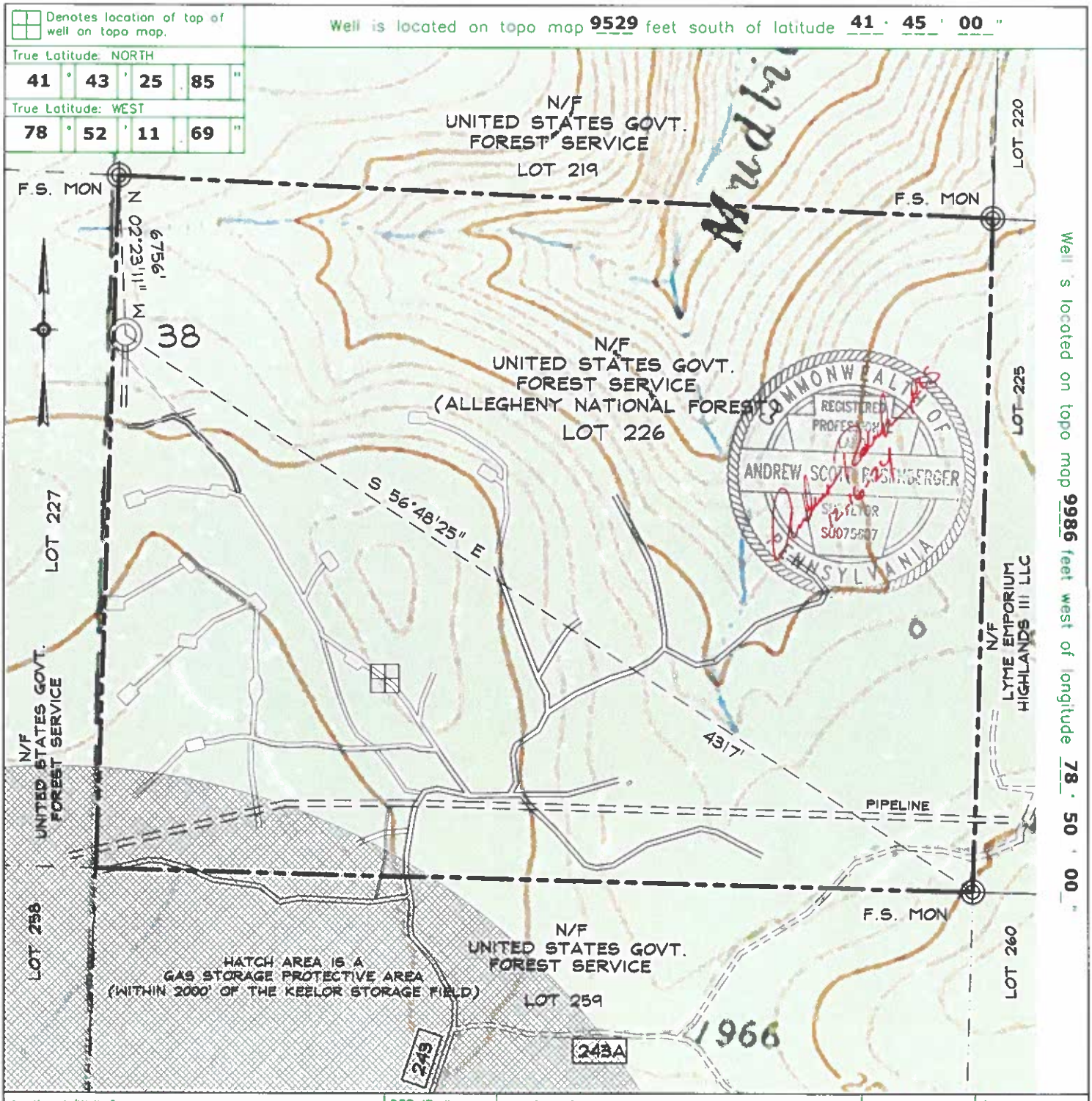
Auth ID #: 1534641	8/6/2025
Permit #: 083-57863	G: BEH
Project #:	C:

Denotes location of top of well on topo map.

Well is located on topo map **9529** feet south of latitude **41** ° **45** ' **00** "

True Latitude: NORTH
41 ° 43 ' 25 . 85 "

True Latitude: WEST
78 ° 52 ' 11 . 69 "



Well is located on topo map **9986** feet west of longitude **78** ° **50** ' **00** "

Applicant/Well Operator Name:	DEP ID #	Well (Farm) Name:	Well #:	Serial #:
M.S.L. OIL & GAS CORP.	**42580**	**DUTTER LOT 226**	**38**	

Address:	County:	Municipality:	Well Type:
P.O. BOX 151, BRADFORD, PA 16701	**MCKEAN**	**WETMORE**	**OIL**

911 address of well site:	USGS 7½' Quadrangle Map Name:	Map Section:	Surface Elevation:
N/A	**KANE, PA**	**1**	**1971** ft.

Surveyor or Engineer:	Phone #:	Dwg #:	Date:	Scale:	Tract Acreage:
ANDREW S. ROSENBERGER	**(814) 368-4139**	**06318.38**	**12/16/24**	**1"=600'**	**249± AC**

Lat. & Long Metadata Method:	Accuracy:	Datum:	Elevation Metadata Method:	Accuracy:	Datum:	Survey Date:
SURVEY GRADE GPS	**+/- 10** ft.	**NAD 83**	**SURVEY GRADE GPS**	**+/-10** ft.	**NAVD 88**	**12/24**

WELL LOCATION PLAT

Page 2 Notifications

DEP Statewide toll-free phone number for reporting cases of water contamination which may be associated with development of oil and gas resources is **1-866-255-5158**.

Applicant / Well Operator Name	DEP ID#	Well (Farm) Name	Well #	Serial #
M.S.L. OIL & GAS CORP.	42580	DUTTER LOT 226	38	

Surface Landowner / Lessor:	Angle & Course of Deviation (Drilling):	Anticipated True Vertical Depth Feet (TVD):	Anticipated Total Measured Depth Feet (TMD):
UNITED STATES GOVERNMENT/FOREST SERVICE	NONE	2200'	2200'

Target Formation(s):	Deepest Formation to be penetrated	Number of laterals: 0	Total footage to be drilled all laterals: 0
COOPER	COOPER		

Surface Owner/Water Purveyor w/Water Supply within 1000'/3000'	Latitude Longitude of Water Supply
N/A	

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Northwest Regional Office

Municipality: where the well will be drilled, adjacent to the well, or within 3000 feet	Municipality: where the well will be drilled, adjacent to the well, or within 3000 feet
LAFAYETTE TOWNSHIP	SHEFFIELD TOWNSHIP
WETMORE TOWNSHIP	
KANE BOROUGH	
HAMILTON TOWNSHIP	**Coal related parties**
HAMLIN TOWNSHIP	
SERGEANT TOWNSHIP	
JONES TOWNSHIP	
HIGHLAND TOWNSHIP	
HOWE TOWNSHIP	

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Record of Notification / Written Consent

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

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

Farm Name - Well #	
DUTTER LOT 226 38	
Applicant Name	DEP ID#
M.S.L. OIL & GAS CORPORATION	42580
DEP USE ONLY	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. **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 <1000'	Municipalities	Notification (Note the means and attach proof) Certified Mail Dates: Sent	Certified Mail Dates: Return Receipt	Address Affidavit	Written Consent
Print Name: U.S. GOVERNMENT/FOREST SERV. Signature	Address: 4 FARM COLONY DRIVE WARREN, PA 16365	X				12-20-24	1-3-25		
Print Name: LAFAYETTE TOWNSHIP Signature	Address: 7534 ROUTE 59 LEWIS RUN, PA 16738				X	12-20-24	12-31-24		
Print Name: WETMORE TOWNSHIP Signature	Address: 318 SPRING STREET KANE, PA 16735				X	12-20-24	12-23-24		
Print Name: KANE BOROUGH Signature	Address: 112 BAYARD STREET KANE, PA 16735				X	12-20-24	12-23-24		
Print Name: HAMILTON TOWNSHIP Signature	Address: P.O. BOX 23 LUDLOW, PA 16333				X	12-20-24	12-24-24		

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**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐

8000-PM-OOGM0001a 4/2012
Record of Notification / Written Consent

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Record of Notification

Farm Name - Well #	
DUTTER LOT 226 38	
Applicant Name	DEP ID#
M.S.L. OIL & GAS CORPORATION	42580
DEP USE ONLY	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.
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 <1000'	Municipalities	Notification (Note the means and attach proof.) Certified Mail Dates: Sent	Certified Mail Dates: Return Receipt	Address Affidavit	Written Consent
Print Name: HAMLIN TOWNSHIP Signature	Address: P.O. BOX 235 HAZEL HURST, PA 16733				X	12-20-24	12-24-24		
Print Name: SERGEANT TOWNSHIP Signature	Address: 14200 WILCOX ROAD MT. JEWETT, PA 16740				X	12-20-24	12-24-24		
Print Name JONES TOWNSHIP Signature	Address: P.O. BOX 25 WILCOX, PA 15870				X	12-20-24	12-23-24		
Print Name: HIGHLAND TOWNSHIP Signature	Address: P.O. BOX 505 JAMES CITY, PA 16734				X	12-20-24	1-6-25		
Print Name: HOWE TOWNSHIP Signature	Address: 7947 ROUTE 666 SHEFFIELD, PA 16347				X	12-20-24	12-27-24		

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**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐

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Record of Notification / Written Consent

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OFFICE OF OIL AND GAS MANAGEMENT

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

Farm Name - Well #	
DUTTER LOT 226 38	
Applicant Name	DEP ID#
M.S.L. OIL & GAS CORPORATION	42580
DEP USE ONLY	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. **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 <1000'	Municipalities	Notification Note the means and attach proof. Certified Mail Dates Sent	Return Receipt	Address Affidavit	Written Consent
Print Name: SHEFFIELD TOWNSHIP Signature	Address: P.O. BOX 784 SHEFFIELD, PA 16347				X	12-20-24	12-24-24		
Print Name: Signature	Address:								
Print Name Signature	Address:								
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**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐
Print and Sign Name:	**Address:**	**Date:**	☐	☐	☐

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:

Lafayette Township
7534 Route 59
Lewis Run, PA 16738

9590 9402 8267 3094 9219 13

2. Article Number *(Transfer from service label)*
7018 0680 0001 1304 0441

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by *(Printed Name)* Kimberly Cole C. Date of Delivery 12/9/24

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

RECEIVED JAN 09 2025

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ sured Mail
☐ sured Mail Restricted Delivery
ver $500)
☐ 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

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:

U.S. Government/Forest Service
4 Farm Colony Drive
Warren, PA 16365

9590 9402 8267 3094 9219 44

2. Article Number *(Transfer from service label)*
7018 0680 0001 1304 0427

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* C. Date of Delivery 01-3-25

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

RECEIVED JAN 09 2025

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ sured Mail
☐ sured Mail Restricted Delivery
ver $500)
☐ 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

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:

Kane Borough
112 Bayard St.
Kane, PA 16735

9590 9402 8267 3094 9219 06

2. Article Number *(Transfer from service label)*
7018 0680 0001 1304 0458

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* Laura McDonald C. Date of Delivery 12/23/24

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

RECEIVED DEC 27 2024

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ sured Mail
☐ sured Mail Restricted Delivery
r $500)
☐ 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

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: RECEIVED DEC 27 2024

Wetmore Township
318 Spring Street
Kane, PA 16735

9590 9402 8267 3094 9219 51

2. Article Number *(Transfer from service label)*
7018 0680 0001 1304 0410

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* Jodi Brinkley C. Date of Delivery 1223-24

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

318 Spring St
Kane

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ ured Mail
☐ ured Mail Restricted Delivery
r $500)
☐ 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

USPS TRACKING #

9590 9402 8267 3094 9219 13

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

William Otto, Operations Manager
M.S.L. Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701

USPS TRACKING #

9590 9402 8267 3094 9219 44

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

William Otto, Operations Manager
M.S.L. Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701

USPS TRACKING #

9590 9402 8267 3094 9219 06

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

William Otto, Operations Manager
M.S.L. Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701

USPS TRACKING #

9590 9402 8267 3094 9219 51

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

William Otto, Operations Manager
M.S.L. Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701

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:

RECEIVED DEC 27 2024

Hamlin Township
P.O. Box 235
Hazel Hurst, PA 16733

9590 9402 8267 3094 9218 69

2. Article Number *(Transfer from service label)*
7018 0680 0001 1304 0496

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* | C. Date of Delivery
12-24-24

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

HAZELHURST, PA 16733 DEC 24 2024 USPS

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

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:

RECEIVED DEC 27 2024

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

9590 9402 8267 3094 9218 52

2. Article Number *(Transfer from service label)*
7018 0680 0001 1304 0502

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☒ Agent ☐ Addressee

B. Received by *(Printed Name)* Becky Davidson | C. Date of Delivery
12/24/24

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

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

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:

Jones Township
P. O. Box 25
Wilcox, PA 15870

9590 9402 8267 3094 9218 90

2. Article Number *(Transfer from service label)*
7018 0680 0001 1304 0465

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* LAURIE STORRER | C. Date of Delivery
12/23/24

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

RECEIVED DEC 27 2024

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

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:

Sergeant Township
1420 Wilcox Rd
Mt. Jewett PA 16740

9590 9402 8267 3094 9219 20

2. Article Number *(Transfer from service label)*
7018 0680 0001 1304 0403

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☒ Addressee

B. Received by *(Printed Name)* | C. Date of Delivery
12-24-24

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

RECEIVED DEC 27 2024

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

083-57863

USPS TRACKING #

9590 9402 8267 3094 9218 69

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

* Sender: Please print your name, address, and ZIP+4® in this box*

William Otto, Operations Manager
M.S.L. Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701

USPS TRACKING #

9590 9402 8267 3094 9218 52

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-

United States
Postal Service

* Sender: Please print your name, address, and ZIP+4® in this box*

William Otto, Operations Manager
M.S.L. Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701

USPS TRACKING #

9590 9402 8267 3094 9218 40

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

* Sender: Please print your name, address, and ZIP+4® in this box*

William Otto, Operations Manager
M.S.L. Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701

USPS TRACKING #

9590 9402 8267 3094 9219 20

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

* Sender: Please print your name, address, and ZIP+4® in this box*

William Otto, Operations Manager
M.S.L. Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701

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:

Howe Township
7947 Route 666
Sheffield, PA 16347

9590 9402 8267 3094 9218 83

2. Article Number *(Transfer from service label)*
7018 0680 0001 1304 0472

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Beverly Pollock ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* Beverly Pollock C. Date of Delivery 12-27-24

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

USPS RECEIVED DEC 31 2024 DEC 27 2024 PA 16347

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over $500)
☐ 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 8267 3094 9218 76

2. Article Number *(Transfer from service label)*
7018 0680 0001 1304 0489

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* C. Date of Delivery 1-6-25

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

RECEIVED JAN 13 2025

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over $500)
☐ 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: RECEIVED DEC 27 2024

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

9590 9402 8267 3094 9219 37

2. Article Number *(Transfer from service label)*
7018 0680 0001 1304 0434

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by *(Printed Name)* Cara Schrader C. Date of Delivery 12/24/24

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over $500)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

USPS TRACKING #

9590 9402 8267 3094 9218 83

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

William Otto, Operations Manager
M.S.L. Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701

USPS TRACKING #

9590 9402 8267 3094 9218 76

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

William Otto, Operations Manager
M.S.L. Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701

USPS TRACKING #

9590 9402 8267 3094 9219 37

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

William Otto, Operations Manager
M.S.L. Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701

8000-PM-OOGM0076 Rev. 2/2016

pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

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

DEP USE ONLY	
APS No.	Site No. 083-57863
Permit No.	Auth. ID No.

COORDINATION OF A WELL LOCATION WITH PUBLIC RESOURCES

Well Operator	DEP ID No.	Well Farm Name and No.
M.S.L. OIL & GAS CORP.	42580	DUTTER LOT 226 38

Address	Project No. (if previously assigned)
P.O. BOX 151	

City	State	Zip Code	County	Municipality
Bradford	PA	16701	McKEAN	WETMORE

Phone No.	Fax No.	Latitude	Longitude
8143626891	8143629912	N 41 ° 43 ′ 25.85 ″	W 78 ° 52 ′ 11.69 ″

1.	Will the well be located in or within 200 ft. of a publicly owned park, forest, gameland, designated wildlife area, or Natural National Landmark?	☒ Yes ☐ No
2.	Will the well be located within the corridor of a state or national scenic river?	☐ Yes ☒ No
3.	If answering "Yes" to questions 1 or 2, name the public resource(s). UNITED STATES GOVERNMENT/FOREST SERVICE	
	List the name, address, and phone number of the person responsible for management of the public resource. FOREST SUPERVISOR, 4 FARM COLONY DRIVE, WARREN, PA 16365	
	Must the administrator of the public resource approve or otherwise authorize the proposed well, well site, access road, or gathering pipeline?	☐ Yes ☒ No
	Has the approval or authorization been received?	☐ Yes ☐ 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?	☐ Yes ☒ No
	If "Yes", provide PNDI Search Number _____ or attach a copy of the PNDI Search Results.	
	If a potential conflict with a species of special concern was identified, give the name of the responsible agency.	
5.	Will the well be located within 200 ft. of any historical or archaeological sites listed as national or state historic places?	☐ Yes ☒ No
6.	If the proposed well is an unconventional well, will the well be located within 1000 ft. of water wells, surface water intakes, reservoirs, or other water supply extraction points used by a water purveyor?	☐ Yes ☒ No
7.	If the answer to questions 1, 2, 4, 5, or 6 is "YES", describe in detail the coordination with applicable resource agencies, the potential impacts to any public resource identified above, if any, and the additional measures proposed to avoid, minimize, or otherwise mitigation the impacts to public resources. AN EROSION AND SEDIMENTATION CONTROL PLAN IS BEING PREPARED FOR THE PROJECT.	

1. PROJECT INFORMATION

Project Name: **MSL DUTTER LEASE**
Date of Review: **11/22/2024 03:28:01 PM**
Project Category: **Mining, Oil or Gas (including roads and pipelines), New Well**
Project Area: **61.38 acres**
County(s): **McKean**
Township/Municipality(s): **HAMILTON TOWNSHIP; WETMORE TOWNSHIP**
ZIP Code:
Quadrangle Name(s): **KANE**
Watersheds HUC 8: **Middle Allegheny-Tionesta; Upper Allegheny**
Watersheds HUC 12: **South Branch; Twomile Run**
Decimal Degrees: **41.720373, -78.868258**
Degrees Minutes Seconds: **41° 43' 13.3411" N, 78° 52' 5.7273" W**

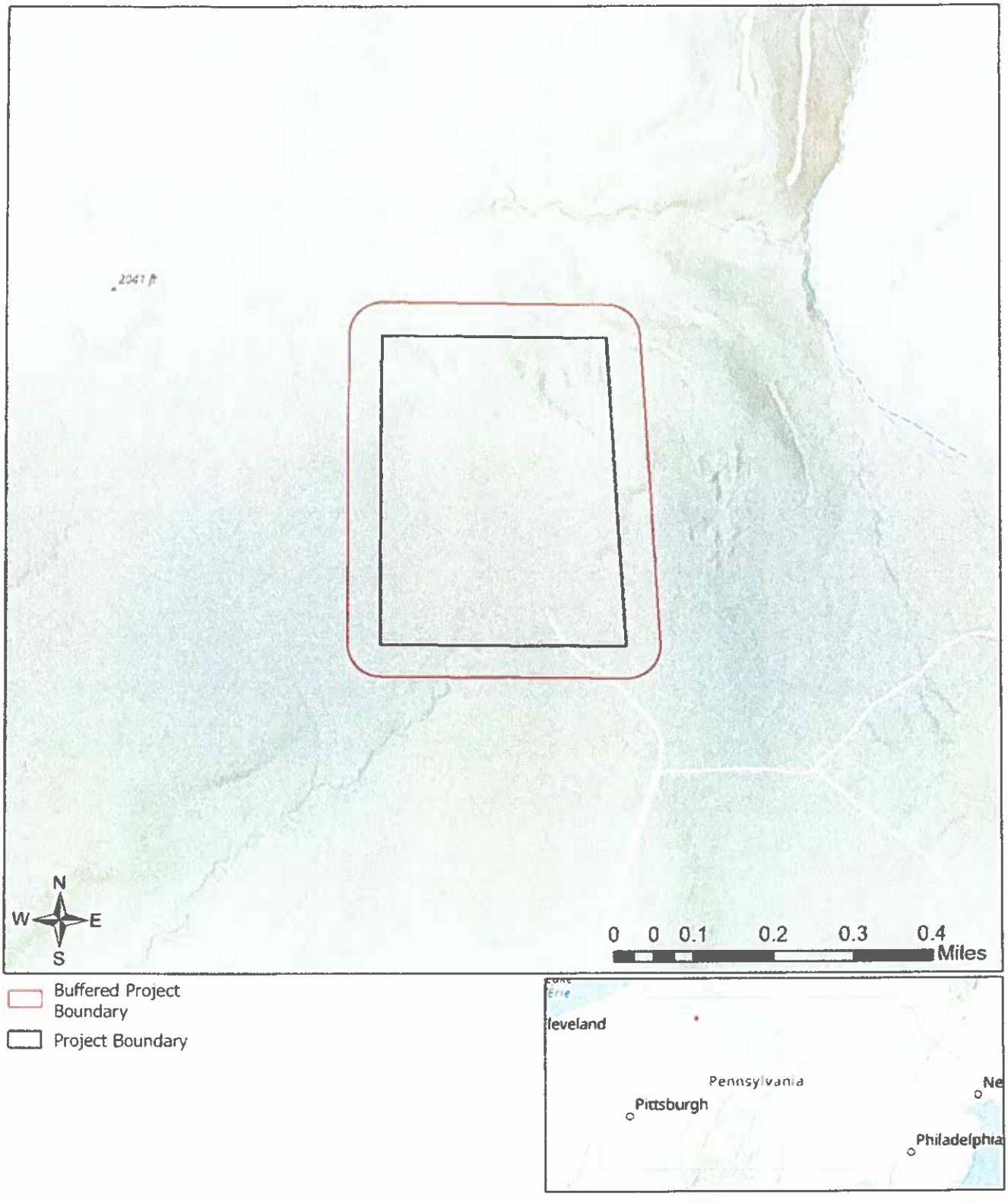
2. SEARCH RESULTS

Agency	Results	Response
PA Game Commission	No Known Impact	No Further Review Required
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	No Known Impact	No Further Review Required

As summarized above, Pennsylvania Natural Diversity Inventory (PNDI) records indicate no known impacts to threatened and endangered species and/or special concern species and resources within the project area. Therefore, based on the information you provided, no further coordination is required with the jurisdictional agencies. This response does not reflect potential agency concerns regarding impacts to other ecological resources, such as wetlands.

MSL DUTTER LEASE

MSL DUTTER LEASE



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

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 jursidictional agencies **strongly advise against** conducting surveys for the species listed on the receipt prior to consultation with the agencies.

PA Game Commission

RESPONSE:

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

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:

No impacts to **federally** listed or proposed species are anticipated. Therefore, no further consultation/coordination under the Endangered Species Act (87 Stat. 884, as amended; 16 U.S.C. 1531 et seq. is required. Because no take of federally listed species is anticipated, none is authorized. This response does not reflect potential Fish and Wildlife Service concerns under the Fish and Wildlife Coordination Act or other authorities.

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). 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

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
NO Faxes Please

PA Fish and Boat Commission
Division of Environmental Services
595 E. Rolling Ridge Dr., Bellefonte, PA 16823
Email: RA-FBPACENOTIFY@pa.gov

PA Game Commission
Bureau of Wildlife Management
Division of Environmental Review
2001 Elmerton Avenue, Harrisburg, PA 17110-9797
Email: RA-PGC_PNDI@pa.gov
NO Faxes Please

7. PROJECT CONTACT INFORMATION

Name:	William Otto, Operations Manager
Company/Business Name	MSL Oil & Gas Corp.
Address:	P.O. Box 151
City, State, Zip:	Bradford, PA 16701
Phone:(_____)	O: 814-362-6891 F: 814-362-9912
Email:	Email: office@msloilandgas.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.

Bill Otto — applicant/project proponent signature

11-26-24 — date

MAP 11

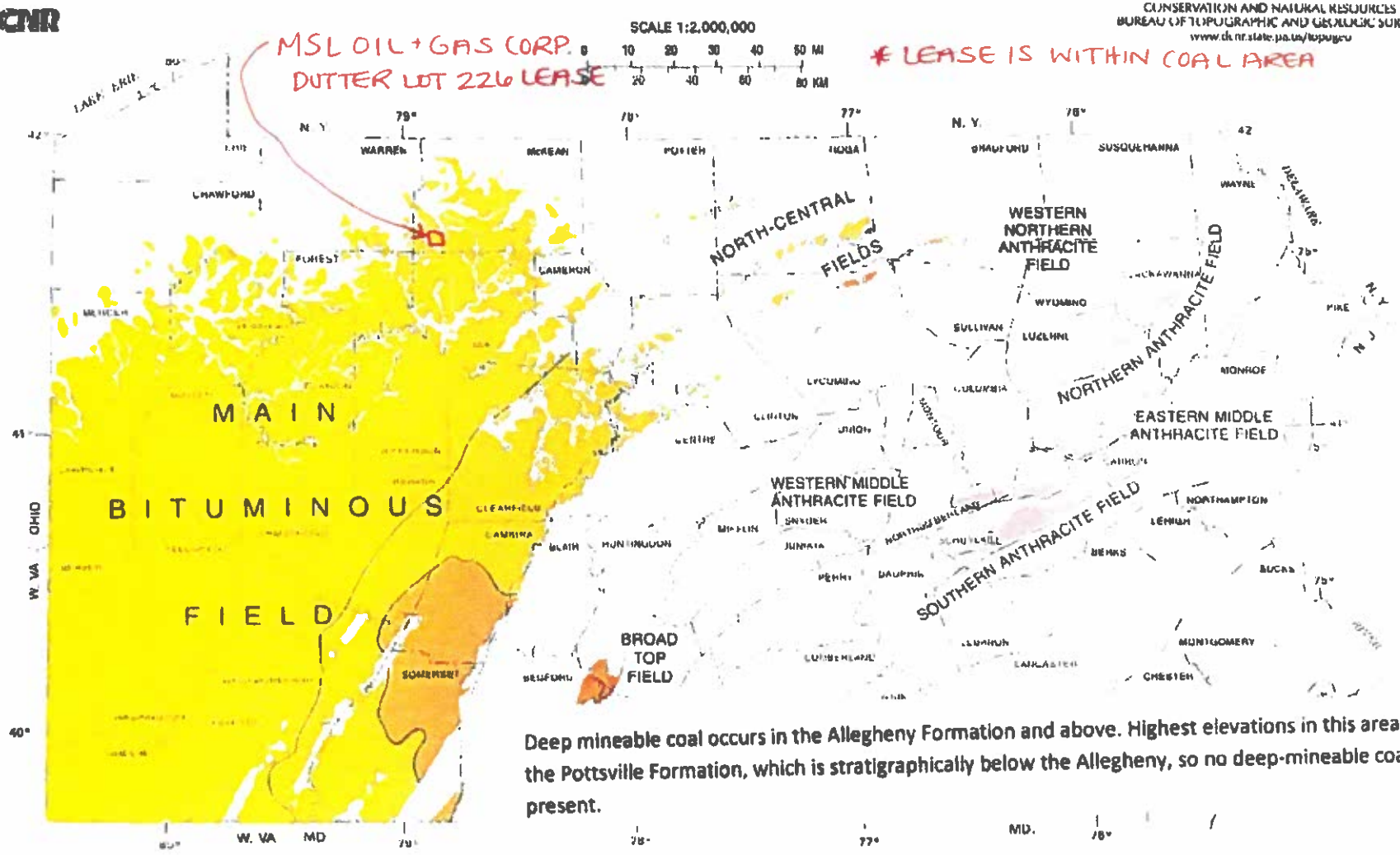
DCNR

DISTRIBUTION OF PENNSYLVANIA COALS

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF
CONSERVATION AND NATURAL RESOURCES
BUREAU OF TOPOGRAPHIC AND GEOLOGIC SURVEY
www.dcnr.state.pa.us/topogeo

MSL OIL + GAS CORP.
DUTTER LOT 226 LEASE

* LEASE IS WITHIN COAL AREA



Deep mineable coal occurs in the Allegheny Formation and above. Highest elevations in this area are of the Pottsville Formation, which is stratigraphically below the Allegheny, so no deep-mineable coal is present.

EXPLANATION

BITUMINOUS FIELDS

- High-volatile bituminous coal
- Medium-volatile bituminous coal
- Low-volatile bituminous coal

ANTHRACITE FIELDS

- Semi-anthracite
- Anthracite

Prepared by Bureau of Topographic and Geologic Survey
Third Edition, Revised, 2000 Third Printing, 2008

2009-MP-DCNR0055
Printed on Recycled Paper

ArcGIS ▾ Coal Fields in Pennsylvania - High-Volatile Bituminous MSL OIL + GAS CORP. DUTTER LOT 226 LEASE Open in Map Vie

Details | Basemap | Print | Measure | Coal Mine Rd, Hamilton Twp

MSL Oil & Gas Corp.
P.O. Box 151
Bradford, PA 16701
Phone: (814) 362-6891
office@msloilandgas.com

July 17, 2025

Dept. of Environmental Protection
Bureau of Oil & Gas Management
230 Chestnut Street
Meadville, PA 16335-3481

RE: Dutter Well Lot 226

To Whom It May Concern:

In October 2014, well #23 on Lot 226 was drilled. This well is approximately 600' north of wells #36, #37 & #38 on Lot 226. While drilling well, there was no encounter or any indication of coal. Also, at that time a stone pit was excavated south and east of the wells being permitted and no signs of coal were present. A copy of the Drillers' Log accompanies this letter.

Sincerely,

William Otto
Operations Manager

DRILLER'S REPORT

Farm Name: Dutter Lot 22

Well #: 23

Joints	Depth	Formations and Comments
1	46	Dirt Shale
2	76	Shale
3	106	
4	136	
5	166	Shale
6	196	
7	226	10 gpm H2O
8	256	
9	286	
10	316	Shale
11	346	
12	376	Shale
13	406	SHWStone
14	436	
15	466	
16	496	
17	526	Shale
18	556	
19	586	Shale
20	616	Redrock
21	646	
22	676	Redrock
23	706	
24	736	
25	766	Redrock
26	796	
27	826	
28	856	
29	892	tb Hammer
30	922	Shale
31	952	
32	982	
33	1012	Shale
34	1042	
35	1072	Shale
36	1102	
37	1132	
38	1162	
39	1192	

Farm Name: Dutter Lot 226		Well #: 23	083-57863
40	1224	+2CV Shale	
41	1254		
42	1284	Shale	
43	1314		
44	1344	shale	
45	1374		
46	1404	shale	
47	1434		
48	1464		
49	1494	shale	
50	1524		
51	1556	+2CV	
52	1586	SHWD	
53	1616	shale	
54	1646		
55	1676	SHWD GAS	
56	1706		
57	1736	shale	
58	1766		
59	1796		
60	1826	shale	
61	1858	+2 CV	
62	1888		
63	1918		
64	1948	shale SHWD, GAS	
65	1978		
66	2008		
67	2038	shale	
68	2068	SAND GAS	
69	2098		
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From: MSL Oil and Gas
To: Hanes, Barbara
Subject: [External] FW: Dutter Lot 226 Drilling Permit Applications
Date: Thursday, August 7, 2025 9:40:49 AM

If you want to please date them 7-16-25. That is the date we mailed the application. I'm sorry we missed this. You have our permission to write in 7-16-25.

Kelly Dart
PO Box 151
Bradford, PA 16701
office@msloilandgas.com

From: MSL Oil and Gas
Sent: Thursday, August 7, 2025 9:38 AM
To: Hanes, Barbara <bhanes@pa.gov>
Subject: RE: Dutter Lot 226 Drilling Permit Applications

Hello Barbara,

Could you please attach the three applications.

Kelly Dart
PO Box 151
Bradford, PA 16701
office@msloilandgas.com

From: Hanes, Barbara <bhanes@pa.gov>
Sent: Thursday, August 7, 2025 9:35 AM
To: MSL Oil and Gas <office@msloilandgas.com>
Subject: Dutter Lot 226 Drilling Permit Applications

Good Morning,

Review of drilling permit applications for the Dutter Lot 226, Wells 36, 37, and 38, are near completion.
All three of the applications are missing the Date on Page 2 of the application; please date the

applications and return to me via email so the review may continue.

Please let me know if you have any questions.

Thank You,

Barbara E. Hanes, P.G. | Licensed Professional Geologist
Department of Environmental Protection | District Oil and Gas Operations
Northwest District Office
230 Chestnut Street | Meadville, PA 16335
Phone: 814.332.6870 | Fax: 814.332.6120
bhanes@pa.gov
www.dep.pa.gov

5500-PM-OG0071 Rev. 11/2010

pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

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

DEP USE ONLY	
Auth # 1534796	APS # 1141817
Site # 88174	Facility # 885454
FIX Client # 74858	Sub-fac # 1451898

Received 7/22/25 BS

Request for Approval of Alternative Waste Management Practices

Please read instructions on back before completing this form.

Well Operator	DEP ID	Well Permit or Registration Number	
MSL Oil & Gas, Corp	42580	083-57863	
Address		Well Farm Name	
P.O. Box 151		Dutter Lot 226	
City / State / Zip Code		Well #	Serial #
Bradford / PA / 16701		38	
Phone	Fax	County	Municipality
814-362-6891	n/a	McKean	Wetmore 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 pollutional 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.

Tech date 9/3/25
7/22/25 BS

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.

MSL Oil & Gas, Corp. is requesting DEP approval for the "Alternative Waste disposal into an unlined pit".

Drill cuttings and top-hole water will be dispersed directly into an unlined pit. Pit will be constructed with earth walls above the surface on three sides to maintain a 20" free bore space at all times. Drilling operations are located in the area of Two Mile Creek watershed.

Soil types in this area are Cookport Loam & Hartleton. MSL has found ground water from 10' to 15' from the surface during winter and spring time operations.

Attached is a map with approximate pit locations and water way.

Ph and conductivity will be tested and reported according to regulations. Cuttings below the surface casing will be sampled, tested and handled accordingly.

See Plat for location of well and where pits will occur.

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 methodolog. y (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	Date
	William Otto Operations Manager	7-22-25

DEP USE ONLY		
☐ Approved ☒ Denied DEP Representative: Brian Ayers	Conditions: ☐ YES, see below or attached. ☐ NO	Date 08.13.25
Conditions: A site evaluation determined that this site is unsuited for Alternate Waste Management Practices.		

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

pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

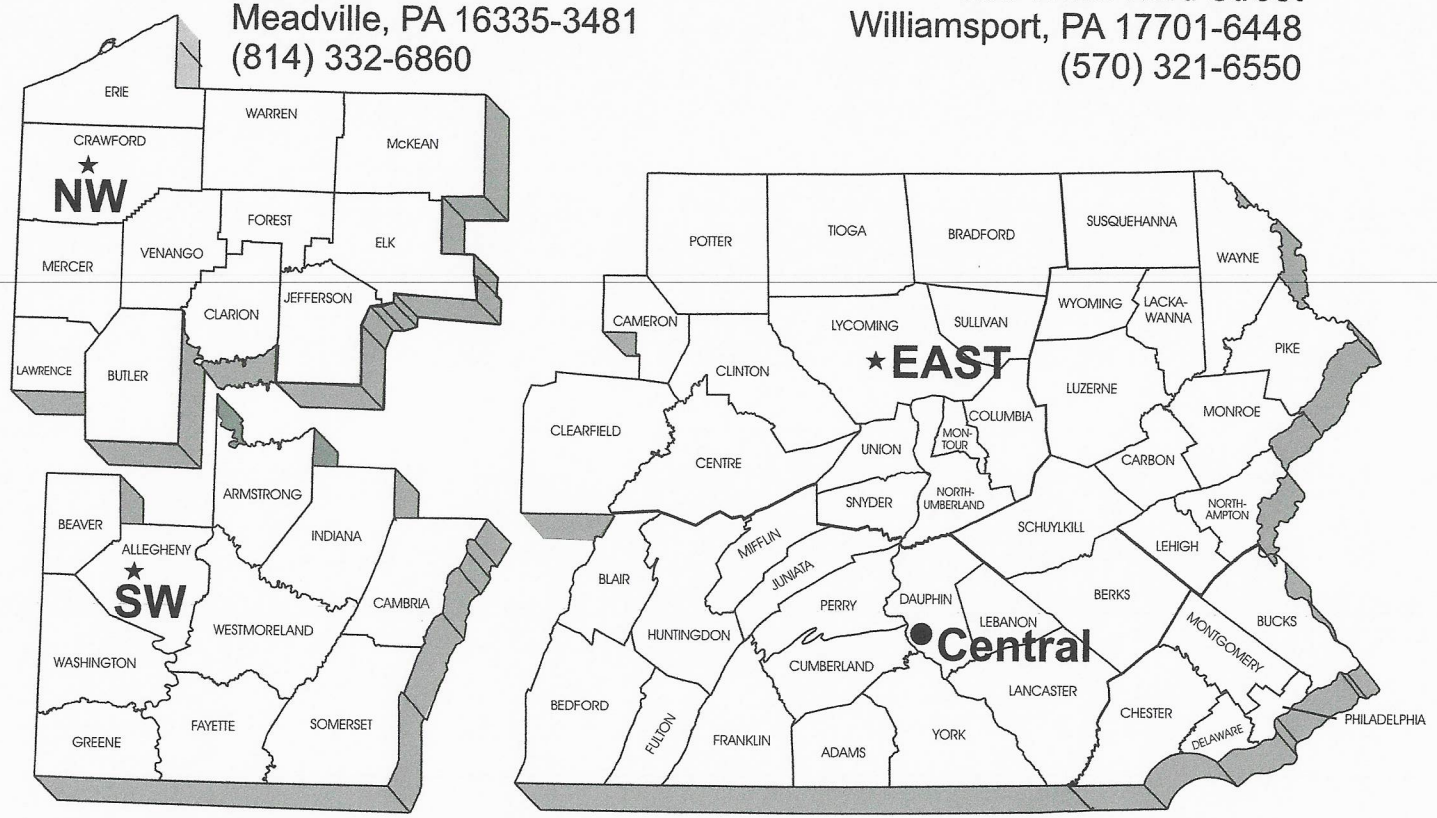
Oil and Gas Regions

★ Northwest Region

230 Chestnut Street
Meadville, PA 16335-3481
(814) 332-6860

★ Eastern Region

208 West Third Street
Williamsport, PA 17701-6448
(570) 321-6550



★ Southwest Region

400 Waterfront Drive
Pittsburgh, PA 15222-4745
(412) 442-4024

● Central Office

Bureau of Oil and Gas Management
PO Box 8765
Harrisburg, PA 17105-8765
(717) 772-2199

JN824

pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS MANAGEMENT

WELL LOCATION PLAT

PAGE 1 Surface Location

Permit #083-57863
Project #:

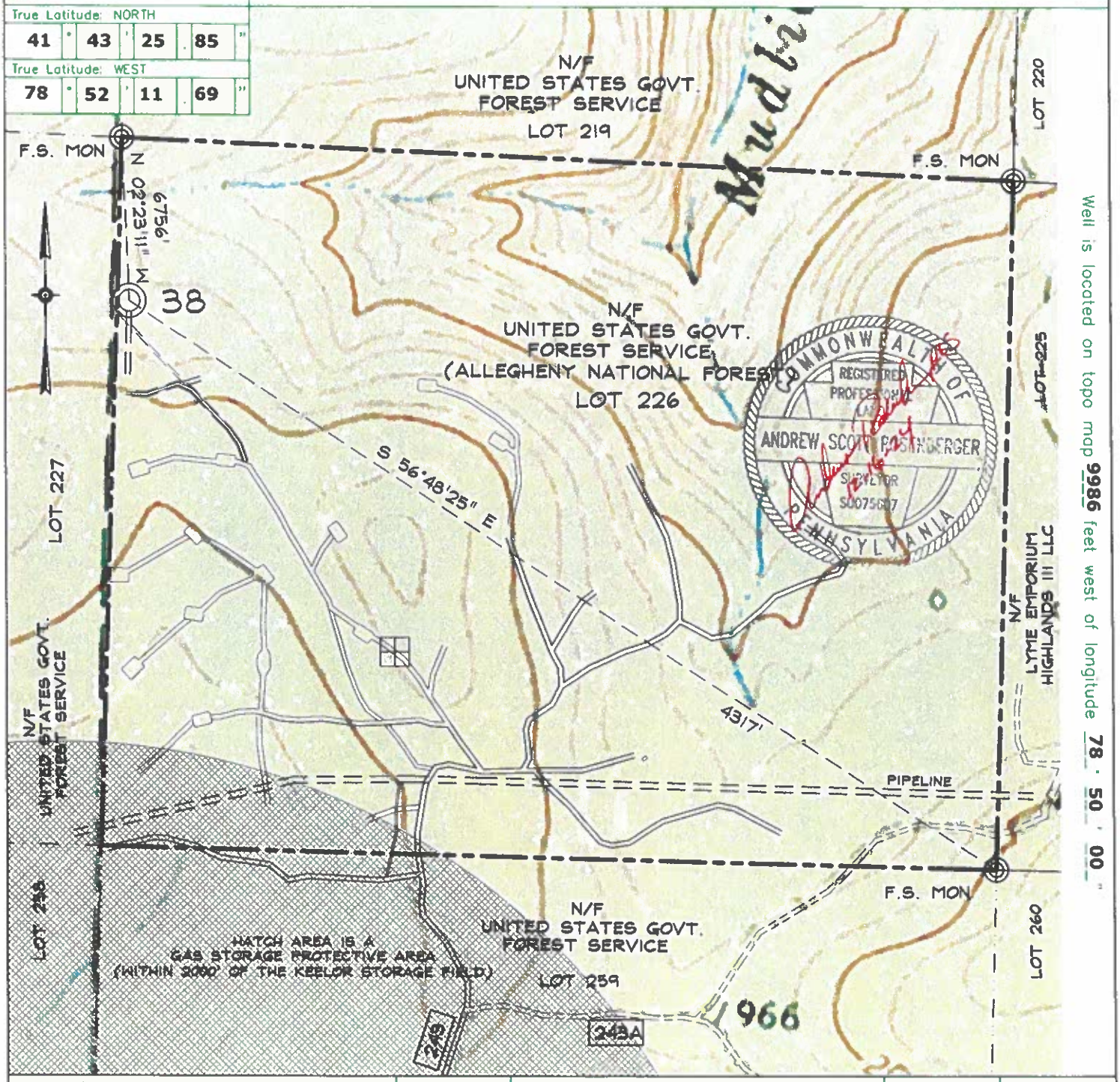
Denotes location of top of well on topo map

Well is located on topo map **9529** feet south of latitude **41** ° **45** ' **00** "

Well is located on topo map **9866** feet west of longitude **78** ° **50** ' **00** "

True Latitude: NORTH
41 ° **43** ' **25** . **85** "

True Latitude: WEST
78 ° **52** ' **11** . **69** "



Applicant/Well Operator Name: **M.S.L. OIL & GAS CORP.**	DEP ID #: **42580**	Well (Farm) Name: **DUTTER LOT 226**	Well #: **38**	Serial #:
Address: **P.O. BOX 151, BRADFORD, PA 16701**		County: **MCKEAN**	Municipality: **WETMORE**	Well Type: **OIL**
911 address of well site: **N/A**		USGS 7½' Quadrangle Map Name: **KANE, PA**	Map Section: **1**	Surface Elevation: **1971** ft.
Surveyor or Engineer: **ANDREW S. ROSENBERGER**	Phone #: **(814) 368-4139**	Dwg #: **06318.38**	Date: **12/16/24**	Scale: **1"=600'**	Tract Acreage: **249± AC**
Lat. & Long Metadata Method: **SURVEY GRADE GPS**	Accuracy: **+/- 10** ft.	Datum: **NAD 83**	Elevation Metadata Method: **SURVEY GRADE GPS**	Accuracy: **+/-10** ft.	Datum: **NAVD 88**	Survey Date: **12/24**

WELL LOCATION PLAT

Page 2 Notifications

DEP Statewide toll-free phone number for reporting cases of water contamination which may be associated with development of oil and gas resources is **1-866-255-5158**.

Applicant / Well Operator Name	DEP ID#	Well (Farm) Name	Well #	Serial #
M.S.L. OIL & GAS CORP.	42580	DUTTER LOT 226	38	

Surface Landowner / Lessor	Angle & Course of Deviation (Drilling)	Anticipated True Vertical Depth Feet (TVD)	Anticipated Total Measured Depth Feet (TMD)
UNITED STATES GOVERNMENT/FOREST SERVICE	NONE	2200'	2200'

Target Formation(s)	Deepest Formation to be penetrated	Number of laterals: 0	Total footage to be drilled all laterals: 0
COOPER	COOPER		

Surface Owner/Water Purveyor w/Water Supply within 1000'/3000'	Latitude Longitude of Water Supply
N/A	

RECEIVED
JUL 21 2025
Environmental Protection
Northwest Regional Office

Municipality: where the well will be drilled, adjacent to the well, or within 3000 feet	Municipality: where the well will be drilled, adjacent to the well, or within 3000 feet
LAFAYETTE TOWNSHIP	SHEFFIELD TOWNSHIP
WETMORE TOWNSHIP	
KANE BOROUGH	
HAMILTON TOWNSHIP	**Coal related parties**
HAMLIN TOWNSHIP	
SERGEANT TOWNSHIP	
JONES TOWNSHIP	
HIGHLAND TOWNSHIP	
HOWE TOWNSHIP	

From:	Hogue, Kate
To:	MSL Oil and Gas
Cc:	Ayers, Brian
Subject:	Auth 1534641 083-57863, 083-57864, 083-57865
Date:	Thursday, August 14, 2025 1:02:00 PM
Attachments:	Auth 1534641 083-57863 CDOW.pdf Auth 1534643 083-57864 Well Permit.pdf Auth 1534652 083-57865.pdf 083-57863 AWM denied 08.13.25.pdf 083-57864 AWM approved 08.13.25.pdf 083-57865 AWM approved 08.13.25.pdf Well Permit Cover Letter (conventional) 1-12-23.pdf

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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