From:	Hogue, Kate
To:	Pennhills Info; tmorris3@pennhillsresources.com
Cc:	Ayers, Brian
Subject:	Auth 1553093 083-57910, 083-57911, 083-57908, 083-57909
Date:	Thursday, February 19, 2026 2:15:00 PM
Attachments:	Auth 1553093 083-57910.pdf Auth 1553168 083-57911.pdf Auth 1553088 083-57908.pdf Auth 1553091 083-57909.pdf 083-57910 AWM approved 01.07.26.pdf 083-57911 AWM denied 01.07.26.pdf 083-57908 AWM approved 01.07.26.pdf 083-57909 AWM approved 01.07.26.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

5500-FM-OG0001A Rev. 11/2007

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

DEP USE ONLY	
Permittee's eFACTS ID: **306870**	Auth ID: **1553168**
Watershed Name	Quality

WELL PERMIT

Permittee	OGO.#	Permit Number	Date Issued
PENNHILLS RESOURCES LLC	**OGO-68600**	**37-083-57911-00-00**	**02/19/2026**

Address	Farm Name & Well Number	Well Serial #
PO BOX 426	**PHR WT 3131 69**	
	Municipality: **Wetmore Twp** / County: **McKean**	
MT JEWETT, PA 16740	7½ ' Quadrangle Name: **Kane**	Map Section #: **6**

Phone	Project #	Latitude	Longitude
(814) 975-3009		**41-41-17.2284**	**-78-47-13.5384**

Surf Elev at Site	Anticipated Maximum TVD	Well Type	Offset distances referenced to NE corner of map section.
2062 feet	**2772 feet**	**OG**	**South 7365 feet West 10132 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 **02/19/2027** unless drilling is commenced on or before that date and prosecuted with due diligence.

Thomas Donohue 2/19/26
Subsurface Permits Environmental Program Manager

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

8000-PM-OOGM0001a Rev. 5/2012

pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

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# 16005 - $600 PNDI - 9/19/25	OGO # 68600	Objection Date - Do not issue before: 12/22/2025	API #'s37-083-57911 ; and - ; - ; - ; - ; -
	Client Id 306870	Date Approved: SGP 2/18/26	Watershed Name: Designation: ☐ HQ ☐ EV
	Bond # 16332		
	bgr 12/23/2025 G 2/17/26 ACM INV:	Special Cond. 24 hr/zoning	
	APS # 1152854 Auth Id 1553168	Site Id 885285	PF Id 889114 SF Id 1464946

Please read instructions before you begin filling in this form.

WELL INFORMATION

Well Operator: PENNHILLS RESOURCES, LLC	DEP ID#: 306870	Well API #: 37-083-57911	Well Farm Name: PHR WT. 3131		Well #: 69
Address: PO BOX 426		LAT 41°41· 17.00" LONG - 78°47· 13.00"	NAD 83	Project Number	Serial #
City: MT. JEWETT	State: PA	Zip: 16740	Municipality Name/ City, Borough, Township: WETMORE Township	County: MCKEAN	
Phone: 814-975-3009	Fax: 814-778-6874	Email:		USGS 7.5 min. quadrangle map: KANE, PA	Section: 6

☐ Check if this is a new address

24/7 Emergency Phone contact number: 814-598-0237

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: COMMERCIAL PIT

Surface Elev: 2062	Deepest Formation to be penetrated: HASKELL	Anticipated TVD: 2772
Target Formation(s) proposed for production: HASKELL , , ,		Anticipated Target Top/Bottom TVD: 2395 2600

Number of wellbore laterals proposed under this application 0

Total feet of wellbore to be drilled under this application 2772 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.

RECEIVED
DEC 22 2025
Environmental Protection
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 $ 600.00

Bond Agreement Id

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 Due Date 01/22/2026
bgr 12/23/2025

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 _____.	☐	☒
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.	☐	☒
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 Stuart J. Morris	*(Print or Type)*	Name of Signer: STUART MORRIS Title: CEO	Date 12/19/2025

Phone: 814-975-3009

Application Preparer/Contact: MICHELLE ESCHRICH

8000-PM-OOGM0002 4/2012

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

WELL LOCATION PLAT

PAGE 1 Surface Location

Auth ID #:	
Permit	083-57911
Project #:	

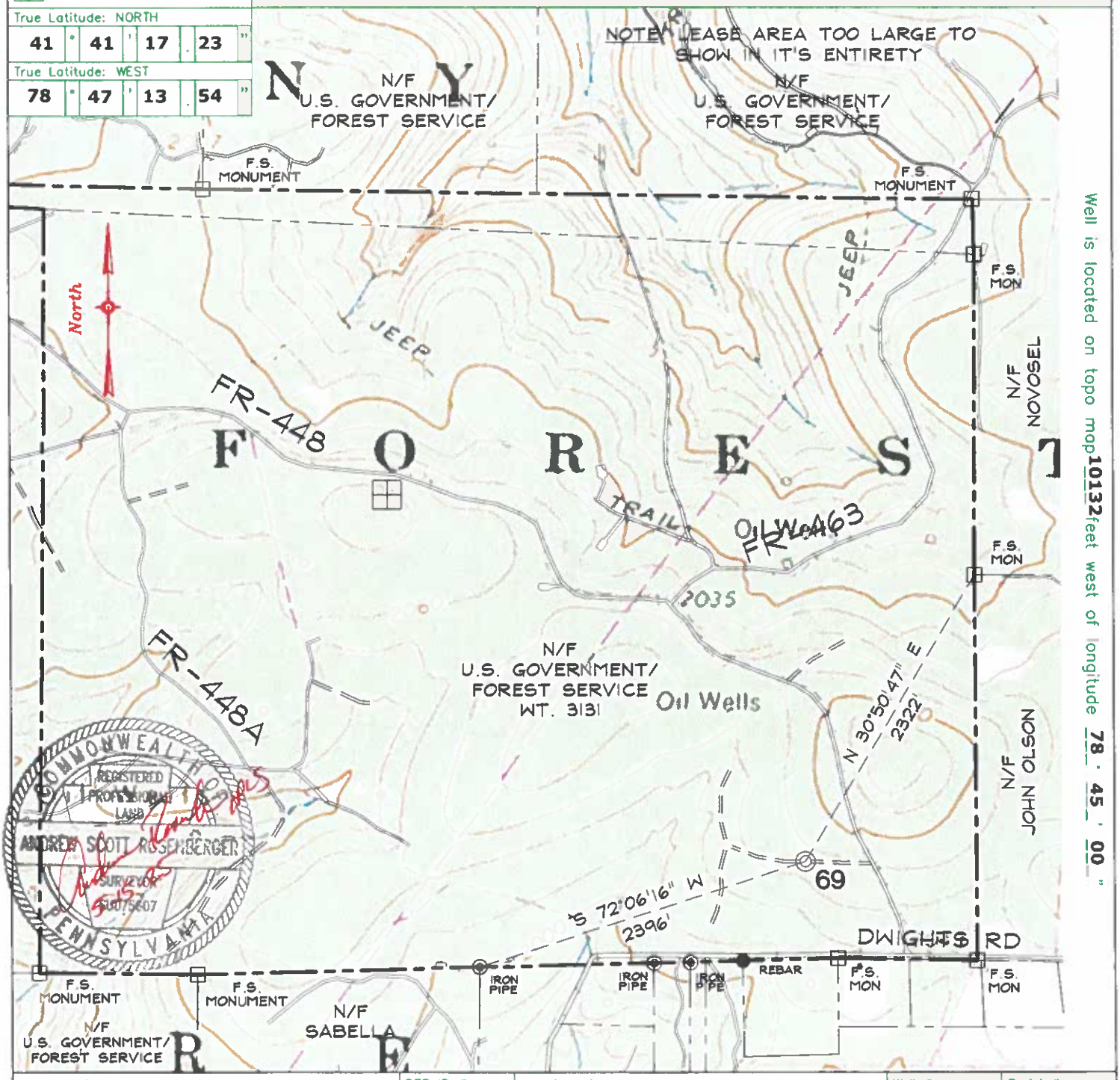
ACM 1/12/26

Denotes location of top of well on topo map.

Well is located on topo map **7365** feet south of latitude **41** · **42** · **30** "

True Latitude: NORTH
41 ° **41** ' **17** . **23** "

True Latitude: WEST
78 ° **47** ' **13** . **54** "



Well is located on topo map **10132** feet west of longitude **78** · **45** · **00** "

Applicant/Well Operator Name:	DEP ID #	Well (Farm) Name:	Well #:	Serial #:
PENNHILLS RESOURCES, LLC	**306870**	**PHR WT. 3131**	**69**	

Address:	County:	Municipality:	Well Type:
P.O. BOX 426, MT. JEWETT, PA 16740	**MCKEAN**	**WETMORE**	**COMBINATION**

911 address of well site	USGS 7½' Quadrangle Map Name:	Map Section:	Surface Elevation:
N/A	**KANE, PA**	**6**	**2062** ft.

Surveyor or Engineer:	Phone #:	Dwg #:	Date:	Scale:	Tract Acreage:
ANDREW S. ROSENBERGER	**(814) 368-4139**	**06416.69**	**5/15/25**	**1"=1000'**	**813 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**	**5/25**

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 #
PENNHILLS RESOURCES, LLC.	306870	PHR WT. 3131	69	

Surface Landowner / Lessor:	Angle & Course of Deviation (Drilling):	Anticipated True Vertical Depth Feet (TVD):	Anticipated Total Measured Depth Feet (TMD):
U.S. GOVERNMENT / FOREST SERVICE	NONE	2772'	2772'

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

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

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
WETMORE TOWNSHIP	JONES TOWNSHIP
KANE BOROUGH	
SERGEANT TOWNSHIP	
HAMLIN TOWNSHIP	**Coal related parties**
LAFAYETTE TOWNSHIP	
HAMILTON TOWNSHIP	
SHEFFIELD TOWNSHIP	
HOWE TOWNSHIP	
HIGHLAND TOWNSHIP	

8000-PM-OOGM0001a Rev. 5/2012
Record of Notification / Written Consent

pennsylvania

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 #	
PHR WT. 3131 WELL # 69	
Applicant Name	DEP ID#
PENNHILLS RESOURCES, LLC	306870
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: Certified Mail Dates Sent	Notification: Certified Mail Dates Return Receipt	Address Affidavit	Written Consent
Print Name: ALLEGHENY NATIONAL FOREST Signature	Address: 4 FARM COLONY DRIVE WARREN, PA 16365	X				5/24/25	5/27/25		
Print Name: WETMORE TOWNSHIP Signature	Address: 318 SPRING STREET KANE, PA 16735				X	5/24/25	5/28/25		
Print Name: HAMILTON TOWNSHIP Signature	Address: PO BOX 23 LUDLOW, PA 16333				X	5/24/25	5/28/25		
Print Name: HAMLIN TOWNSHIP Signature	Address: PO BOX 235 HAZEL HURST, PA 16733				X	5/24/25	5/27/25		
Print Name: HIGHLAND TOWNSHIP Signature	Address: PO BOX 505 JAMES CITY, PA 16734				X	5/24/25	5/27/25		

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

			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 Rev. 5/2012
Record of Notification / Written Consent

pennsylvania

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 #	
PHR WT. 3131 - WELL # 69	
Applicant Name	DEP ID#
PENNHILLS RESOURCES, LLC	306870
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: HOWE TOWNSHIP Signature	Address: 7947 ROUTE 666 SHEFFIELD, PA 16347				X	5/24/25	5/28/25		
Print Name: JONES TOWNSHIP Signature	Address: PO BOX 25 WILCOX, PA 15870				X	5/24/25	5/29/25		
Print Name: KANE BOROUGH Signature	Address: 112 BAYARD STREET KANE, PA 16735				X	5/24/25	5/28/25		
Print Name: LAFAYETTE TOWNSHIP Signature	Address: 7534 ROUTE 59 LEWIS RUN, PA 16738				X	5/24/25	5/27/25		
Print Name: SERGEANT TOWNSHIP Signature	Address: 14225 WILCOX ROAD MT. JEWETT, PA 16740				X	5/24/25	5/27/25		

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

			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

pennsylvania

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 #	
PHR WT. 3131 WELL # 69	
Applicant Name	DEP ID#
PENNHILLS RESOURCES, LLC	306870
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: PO BOX 784 SHEFFIELD, PA 16347				X	5/24/25	5/27/25		
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:**	☐	☐	☐

9589 0710 5270 2924 9754 85

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For delivery information, visit our website at www.usps.com
Warren PA 16365

Certified Mail Fee	$4.85
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	$4.10
☐ Return Receipt (electronic)	$0.00
☐ Certified Mail Restricted Delivery	$0.00
☐ Adult Signature Required	$0.00
☐ Adult Signature Restricted Delivery	$
Postage	$2.31
Total Postage and Fees	$11.26

0701 33
MAY 21 2025
Postmark Here
05/24/2025

Sent To
Street and
City, Sta

ALLEGHENY NATIONAL FOREST
4 FARM COLONY DRIVE
WARREN, PA 16365

PS Form

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 9139 4225 0178 14

2. Article Number (Transfer from service label)
9589 0710 5270 2924 9754 85

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X L. Bortelle ☒ Agent ☐ Addressee

B. Received by (Printed Name) Lydia Bortelle
C. Date of Delivery 5-27-25

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
☐ Restricted Delivery

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

9589 0710 5270 2924 9755 08

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com
Hazel Hurst PA 16733

Certified Mail Fee	$4.85
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	$4.10
☐ Return Receipt (electronic)	$0.00
☐ Certified Mail Restricted Delivery	$0.00
☐ Adult Signature Required	$0.00
☐ Adult Signature Restricted Delivery	$
Postage	$2.31
Total Postage and Fees	$11.26

0701 33
MAY 24 2025
Postmark Here
05/24/2025

Sent To
Street and
City, State

HAMLIN TOWNSHIP
PO BOX 235
HAZEL HURST PA 16733

PS Form 3800, January 2023 See Reverse for Instructions

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:

HAMLIN TOWNSHIP
PO BOX 235
HAZEL HURST PA 16733

9590 9402 9139 4225 0178 38

2. Article Number (Transfer from service label)
9589 0710 5270 2924 9755 08

COMPLETE THIS SECTION ON DELIVERY

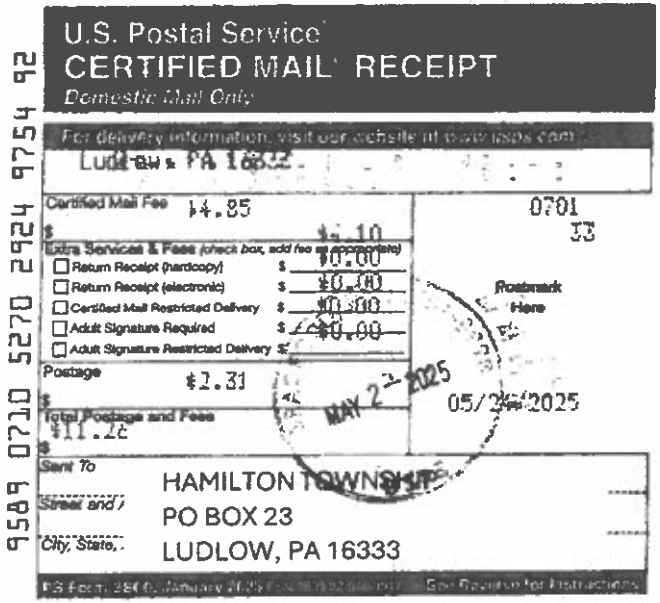
A. Signature
X ☒ Agent ☐ Addressee

B. Received by (Printed Name) MAY 2025
C. Date of Delivery 5/27/25

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
☐ Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt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For delivery information, visit our website at www.usps.com
Certified Mail Fee $4.85
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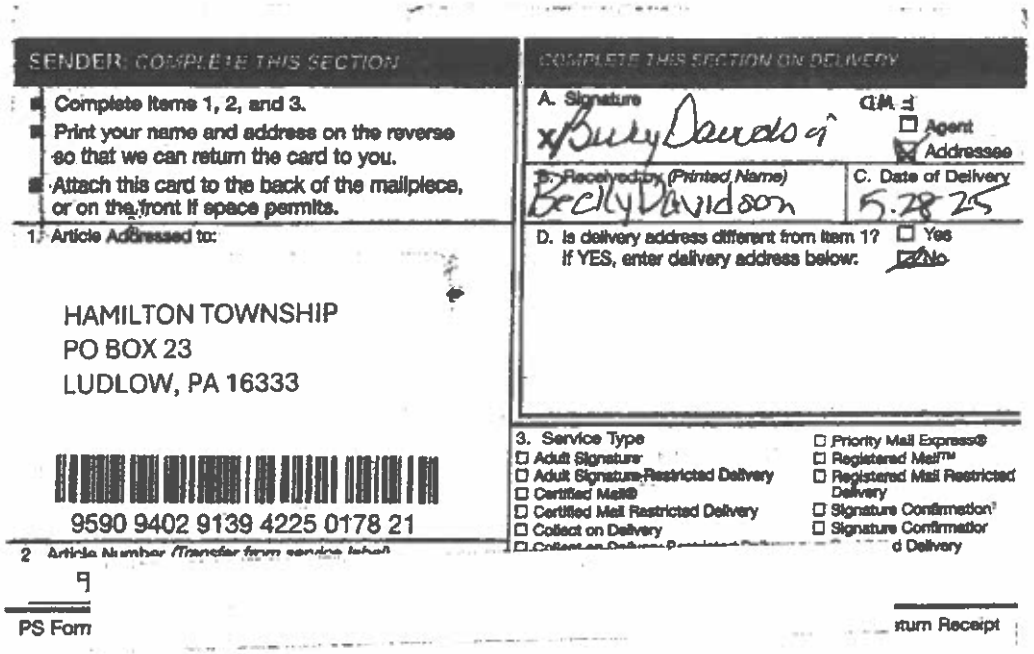
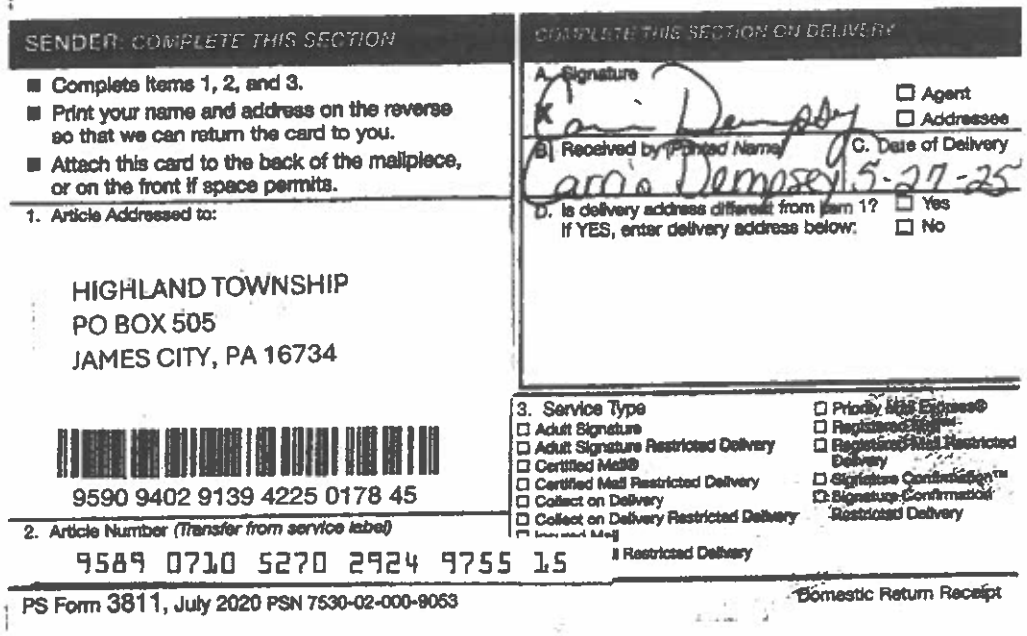
Return Receipt (hardcopy) $0.00
Return Receipt (electronic) $0.00
Certified Mail Restricted Delivery $0.00
Adult Signature Required $0.00
Adult Signature Restricted Delivery $
Postage $2.31
Total Postage and Fees $11.26
0701
Postmark Here
MAY 2 2025
05/24/2025
Sent To
HAMILTON TOWNSHIP
Street and
PO BOX 23
City, State,
LUDLOW, PA 16333
9589 0710 5270 2924 9754 92


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
PO BOX 23
LUDLOW, PA 16333
9590 9402 9139 4225 0178 21
2 Article Number (Transfer from service label)
9
PS Form
COMPLETE THIS SECTION ON DELIVERY
A. Signature
Agent
Addressee
B. Received by (Printed Name)
C. Date of Delivery
5.28.25
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
Priority Mail Express®
Registered Mail™
Registered Mail Restricted Delivery
Signature Confirmation™
Signature Confirmation Restricted Delivery


U.S. Postal Service
CERTIFIED MAIL RECEIPT
Domestic Mail Only
For delivery information, visit our website at www.usps.com
Certified Mail Fee $4.85
Extra Services & Fees (check box, add fee as appropriate)
Return Receipt (hardcopy) $0.00
Return Receipt (electronic) $0.00
Certified Mail Restricted Delivery $0.00
Adult Signature Required $0.00
Adult Signature Restricted Delivery $
Postage $2.31
Total Postage and Fees $11.26
0701
MAY 24 2025
Postmark
05/24/2025
Sent To
HIGHLAND TOWNSHIP
Street and
PO BOX 505
City, State,
JAMES CITY, PA 16734
9589 0710 5270 2924 9755 15


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
PO BOX 505
JAMES CITY, PA 16734
9590 9402 9139 4225 0178 45
2. Article Number (Transfer from service label)
9589 0710 5270 2924 9755 15
PS Form 3811, July 2020 PSN 7530-02-000-9053
Domestic Return Receipt
COMPLETE THIS SECTION ON DELIVERY
A. Signature
Agent
Addressee
B. Received by (Printed Name)
C. Date of Delivery
5-27-25
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
Registered Mail Restricted Delivery
Signature Confirmation™
Signature Confirmation Restricted Delivery

9589 0710 5270 2924 9755 22

U.S. Postal Service
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Domestic Mail Only

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

Sheffield PA 16347

Certified Mail Fee	$4.85
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	$0.00
☐ Return Receipt (electronic)	$0.00
☐ Certified Mail Restricted Delivery	$0.00
☐ Adult Signature Required	$0.00
☐ Adult Signature Restricted Delivery	$
Postage	$2.31
Total Postage and Fees	$11.26

0701 33

MAY 24 2025 Postmark Here

05/24/2025

Sent To: HOWE TOWNSHIP
Street and A: 7947 ROUTE 666
City, State, Z: SHEFFIELD, PA 16347

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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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 9139 4225 0178 52

2. Article Number (Transfer from service label)
9589 0710 5270 2924 9755 22

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Beverly Pollock ☑ Agent ☐ Addressee

B. Received by (Printed Name) Beverly Pollock
C. Date of Delivery 5-28-2025

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

USPS 7947 RT 666 MAY 28 2025

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
☐ Restricted Delivery

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

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9589 0710 5270 2924 9755 39

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

Certified Mail Fee	$4.85
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	$0.00
☐ Return Receipt (electronic)	$0.00
☐ Certified Mail Restricted Delivery	$0.00
☐ Adult Signature Required	$
☐ Adult Signature Restricted Delivery	$
Postage	$2.31
Total Postage and Fees	

0701 33

MAY 24 2025 Postmark Here

05/24/2025

Sent To: JONES TOWNSHIP
Street and A: PO BOX 25
City, State, Z: WILCOX, PA 15870

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

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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
PO BOX 25
WILCOX, PA 15870

9590 9402 9139 4225 0178 69

2. Article Number (Transfer from service label)
9589 0710 5270 2924 9755 39

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [illegible] ☐ Agent ☐ Addressee

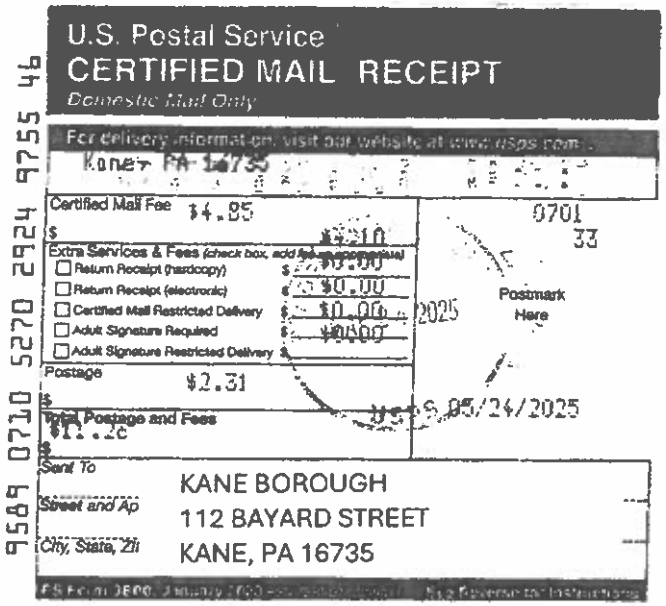
B. Received by (Printed Name)
C. Date of Delivery 5-28-25

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

MAY

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
☐ 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 STREET
KANE, PA 16735

9590 9402 9139 4225 0178 76

2. Article Number (Transfer from service label)
9589 0710 5270 2924 9755 46

COMPLETE THIS SECTION ON DELIVERY

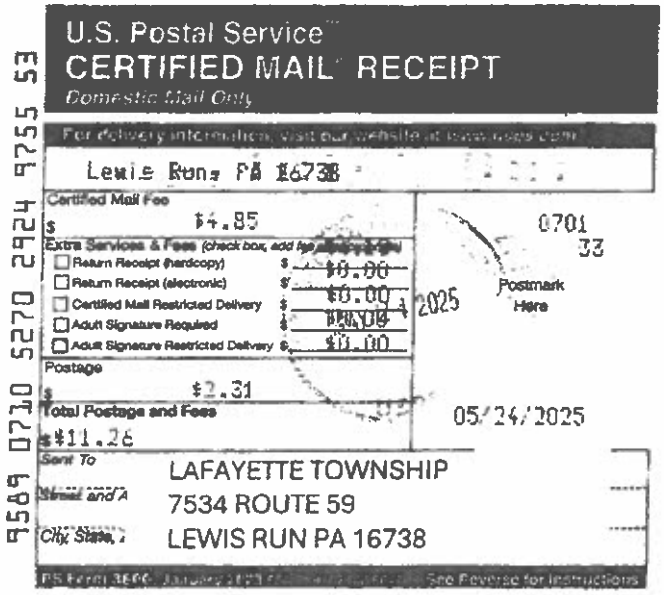
A. Signature
X
☐ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
5/28/25

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

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:

LAFAYETTE TOWNSHIP
7534 ROUTE 59
LEWIS RUN PA 16738

9590 9402 9139 4225 0178 83

2. Article Number (Transfer from service label)
9589 0710 5270 2924 9755 53

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X
☑ Agent
☐ Addressee

B. Received by (Printed Name)
C. Date of Delivery
5/28/25

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

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

Mount Jewett PA 16740

Certified Mail Fee $4.85 — 0701 33

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $4.10
- ☐ Return Receipt (electronic) $0.00
- ☐ Certified Mail Restricted Delivery $0.00
- ☐ Adult Signature Required $0.00
- ☐ Adult Signature Restricted Delivery $

Postage $2.31

Total Postage and Fees $11.26

Postmark Here — MAY 24 2025 — 05/24/2025

Sent To: SERGEANT TOWNSHIP
Street and: 14225 WILCOX ROAD
City, State: MT. JEWETT, PA 16740

PS Form 3800, January 2023 — See Reverse for Instructions

9589 0710 5270 2924 9755 60

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
14225 WILCOX ROAD
MT. JEWETT, PA 16740

9590 9402 9139 4225 0178 90

2. Article Number (Transfer from service label)
9589 0710 5270 2924 9755 60

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X K. Carlson — ☐ Agent ☐ Addressee

B. Received by (Printed Name) K. Carlson — C. Date of Delivery 5/27/25

D. Is delivery address different from item 1? ☐ Yes
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

Restricted Delivery

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

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

Sheffield PA 16347

Certified Mail Fee $4.85 — 0701 33

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $4.10
- ☐ Return Receipt (electronic) $0.00
- ☐ Certified Mail Restricted Delivery $0.00
- ☐ Adult Signature Required $0.00
- ☐ Adult Signature Restricted Delivery $

Postage $2.31

Total Postage and Fees $11.26

Postmark Here — MAY 24 2025 — 05/24/2025

Sent To: SHEFFIELD TOWNSHIP
Street and: PO BOX 784
City, State: SHEFFIELD, PA 16347

PS Form 3800, January 2023 — See Reverse for Instructions

9589 0710 5270 2924 9755 77

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
PO BOX 784
SHEFFIELD, PA 16347

9590 9402 9139 4225 0179 06

2. Article Number (Transfer from service label)
9589 0710 5270 2924 9755 77

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Cara Schrader — ☑ Agent ☐ Addressee

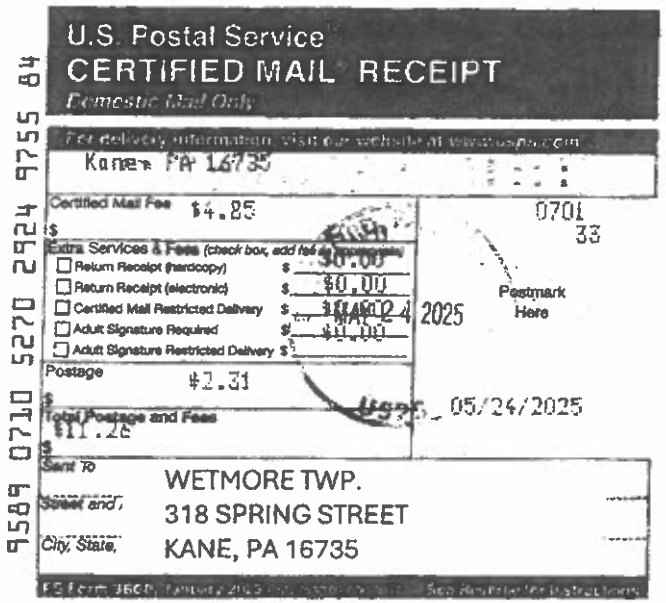
B. Received by (Printed Name) Cara Schrader — C. Date of Delivery 5.27.25

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

Restricted Delivery

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



U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

Kane, PA 16735

Certified Mail Fee $4.85

Extra Services & Fees (check box, add fee as appropriate)
- ☐ Return Receipt (hardcopy) $0.00
- ☐ Return Receipt (electronic) $0.00
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $1.00
- ☐ Adult Signature Restricted Delivery $

Postage $2.31

Total Postage and Fees $11.26

MAY 24 2025

0701 33

Postmark Here

05/24/2025

Sent To: WETMORE TWP.
Street and: 318 SPRING STREET
City, State: KANE, PA 16735

PS Form 3800, January 2023 — See Reverse for Instructions

9589 0710 5270 2924 9755 84

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:

WETMORE TWP.
318 SPRING STREET
KANE, PA 16735

9590 9402 9139 4225 0179 13

2. Article Number (Transfer from service label)
9589 0710 5270 2924 9755 84

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Jodi Brumbley ☐ Agent ☐ Addressee

B. Received by (Printed Name) Jodi Brumbley C. Date of Delivery 5-28-25

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

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.
Permit No.	Auth. ID No.

COORDINATION OF A WELL LOCATION WITH PUBLIC RESOURCES

Well Operator	DEP ID No.	Well Farm Name and No.
PENNHILLS RESOURCES, LLC	306870	PHR WT. 3131 69
Address: PO BOX 426		Project No. (if previously assigned)
City: MT. JEWETT	State: PA Zip Code: 16740	County: MCKEAN Municipality: WETMORE
Phone No.: 8149753009	Fax No.: 8147786874	Latitude: N 41 ° 41 ′ 17.23 ″ Longitude: W 78 ° 47 ′ 13.54 ″

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). ALLEGHENY NATIONAL FOREST	
	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 Phone: (814) 728-6100	
	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 842738 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. PA GAME COMMISSION	
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. THE PA GAME COMMISSION HAS REPLIED WITH NO IMPACT ANTICIPATED (SEE RESPONSE LETTER FROM PGC). PENNHILLS HAS ALSO BEEN IN CONTACT WITH THE ANF PRIOR TO, AND WILL CONTINUE TO BE IN CONTACT THROUGHOUT THE PROCESS. AN EROSION AND SEDIMENTATION CONTROL PLAN IS BEING PREPARED FOR THE PROJECT AS WELL.	

1. PROJECT INFORMATION

Project Name: **PHR Kane Area wells**
Date of Review: **9/19/2025 09:51:49 AM**
Project Category: **Energy Storage, Production, and Transfer, Energy Production (generation), Oil or Gas - new wells, expansion of well field**
Project Area: **750.98 acres**
County(s): **McKean**
Township/Municipality(s): **Wetmore Township**
ZIP Code:
Quadrangle Name(s): **KANE**
Watersheds HUC 8: **Upper Allegheny**
Watersheds HUC 12: **South Branch**
Decimal Degrees: **41.690659, -78.797769**
Degrees Minutes Seconds: **41° 41' 26.3732" N, 78° 47' 51.9692" W**

2. SEARCH RESULTS

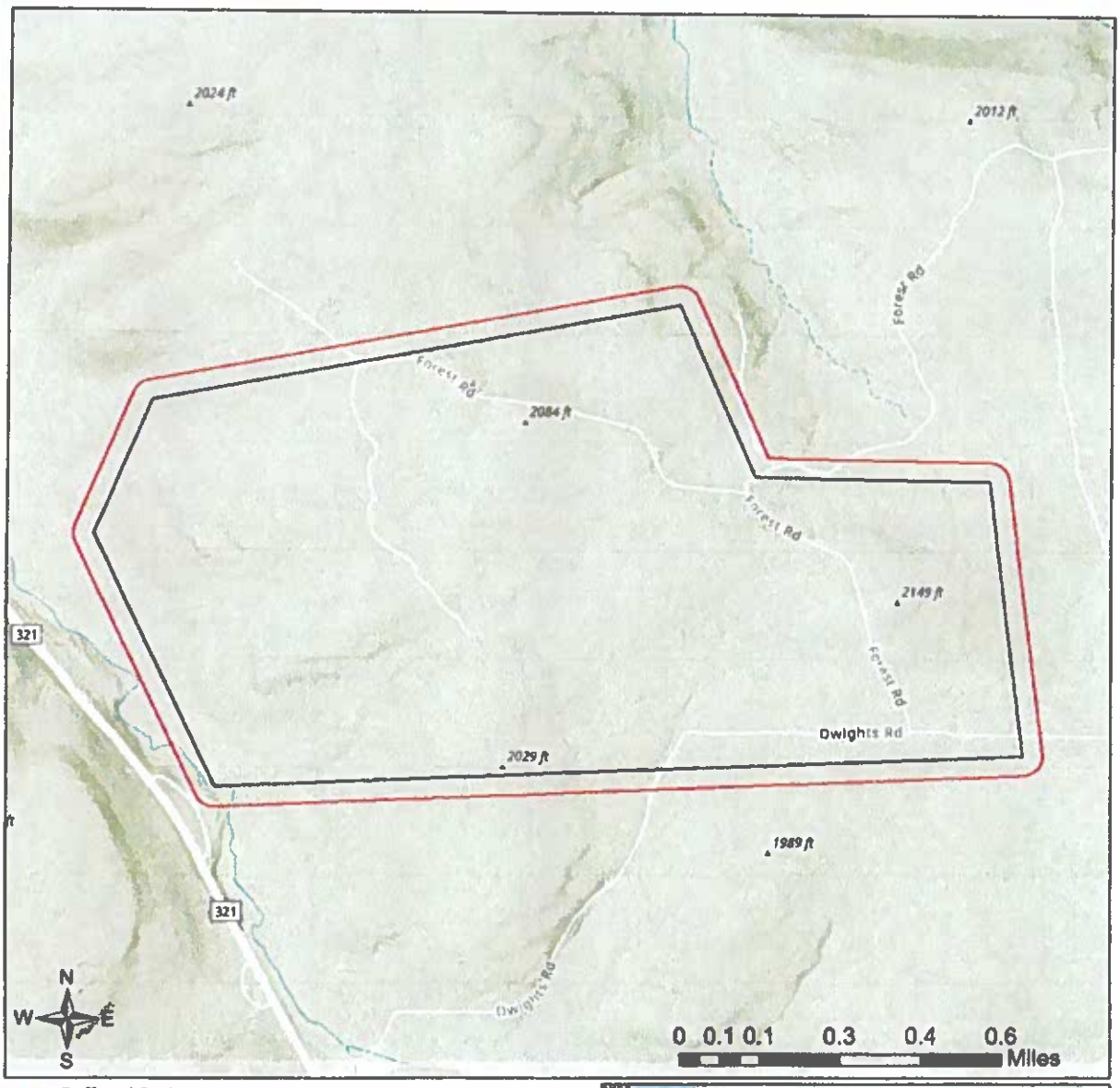
Agency	Results	Response
PA Game Commission	**Potential Impact**	**FURTHER REVIEW IS REQUIRED, See Agency Response**
PA Department of Conservation and Natural Resources	No Known Impact	No Further Review Required
PA Fish and Boat Commission	No Known Impact	No Further Review Required
U.S. Fish and Wildlife Service	No Known Impact	No Further Review Required

As summarized above, Pennsylvania Natural Diversity Inventory (PNDI) records indicate 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.

PHR Kane Area wells

Source: Esri, Maxar, Earthstar Geographics, and the GIS User Community
Sources: Esri, TomTom, Garmin, FAO, NOAA, USGS, © OpenStreetMap contributors, and the GIS User Community

PHR Kane Area wells



Sources: Esri, TomTom, Garmin, FAO, NOAA, USGS, © OpenStreetMap contributors, and the GIS User Community
Sources: Esri, Maxar, Airbus DS, USGS, NGA, NASA, CGIAR, N Robinson, NCEAS, NLS, OS, NMA, Geodatastyrelsen, Rijkswaterstaat, GSA,

RESPONSE TO QUESTION(S) ASKED

Q1: Will the action include disturbance to trees such as tree cutting (or other means of knocking down, or bringing down trees, tree topping. or tree trimming), pesticide/herbicide application or prescribed fire?
Your answer is: No

Q2: Does the action area contain any caves (or associated sinkholes, fissures, or other karst features), mines, rocky outcroppings, culverts, or tunnels that could provide habitat for hibernating bats?
Your answer is: No

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:

Further review of this project is necessary to resolve the potential impact(s). Please send project information to this agency for review (see WHAT TO SEND).

PGC Species: (Note: The Pennsylvania Conservation Explorer tool is a primary screening tool, and a desktop review may reveal more or fewer species than what is listed below.)

Scientific Name	Common Name	Current Status
Sensitive Species**		Endangered

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.

* Special Concern Species or Resource - Plant or animal species classified as rare, tentatively undetermined or candidate as well as other taxa of conservation concern, significant natural communities, special concern populations (plants or animals) and unique geologic features.
** Sensitive Species - Species identified by the jurisdictional agency as collectible, having economic value, or being susceptible to decline as a result of visitation.

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 submit their project using IPaC, following the USFWS Project Submission Instructions. USFWS will not accept or review project materials uploaded via the Conservation Explorer.

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). 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: STUART J. MORRIS
Company/Business Name: PENNHILLS RESOURCES, LLC
Address: PO BOX 426
City, State, Zip: MT. JEWETT, PA 16740
Phone: (814) 975-3009
Email: S.MORRS@PENNHILLSRESOURCES.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.

Stuart J. Morris
applicant/project proponent signature

9/19/2025
date

PENNSYLVANIA GAME COMMISSION
BUREAU OF WILDLIFE MANAGEMENT
2001 ELMERTON AVENUE HARRISBURG, PA 17110-9797 | (717) 787-5529

November 18, 2025 **PGC ID Number: 202507240101**

Michelle Eschrich
Pennhills Resources
PO Box 426
Mt Jewett, Pennsylvania 16740
michelle.eschrich@pennhillsresources.com

PNDI Receipt File: *project_receipt_phr_kane_area_wells_842738_FINAL_2.pdf*
Re: PHR Kane Area Wells
Wetmore Township, McKean County, Pennsylvania

Dear Michelle Eschrich,

Thank you for submitting Pennsylvania Natural Diversity Inventory (PNDI) Environmental Review Receipt *project_receipt_phr_kane_area_wells_842738_FINAL_2.pdf* for review. The Pennsylvania Game Commission (PGC) screened this project for potential impacts to species and resources of concern under PGC responsibility, which includes birds and mammals only.

No Impact Anticipated – PNDI Species

PNDI records indicate species or resources of concern are located within the vicinity of the project. However, based on the information you submitted concerning the nature of the project, the immediate location, and our detailed resource information, the PGC has determined that no impact is likely. Therefore, no further coordination with the PGC will be necessary for this project at this time.

This response represents the most up-to-date summary of the PNDI data files and is valid for two (2) years from the date of this letter. An absence of recorded information does not necessarily imply actual conditions on site. Should project plans change or additional information on listed or proposed species become available, this determination may be reconsidered.

Should the proposed work continue beyond the period covered by this letter, please resubmit the project to this agency as an "Update" (including an updated PNDI receipt, project narrative and accurate map). If the proposed work has not changed and no additional information concerning listed species is found, the project will be cleared for PNDI requirements under this agency for two additional years.

This finding applies to impacts to birds and mammals only. To complete your review of state and federally-listed threatened and endangered species and species of special concern, please be sure that the U.S. Fish and Wildlife Service, the PA Department of Conservation and Natural Resources, and/or the PA Fish and Boat Commission have been contacted regarding this project as directed by the online PNDI ER Tool found at www.naturalheritage.state.pa.us.

Please be sure to include the above-referenced PGC ID Number on any future correspondence with the PGC regarding this project.

Sincerely,

Amber Nolder

Amber Nolder
Wildlife Biologist
Bureau of Wildlife Management
Phone: 717-787-4250, Extension 73410
Fax: 717-787-6957
E-mail: anolder@pa.gov

A PNHP Partner

Pennsylvania Natural Heritage Program

ADN/adn

cc: H:\OIL&GAS_PNDI_Reviews\Northwest Region

RE: – Non-workable Coal Seam

To Whom It May Concern:

According to the Pennsylvania Mine Map Atlas (http://www.paminemaps.psu.edu), the area where we are working (Wts. 3131 and 3132 – Wetmore Township, McKean County) is considered to be a Non-workable Coal Seam. The well is located where the Pottsville Group is at the surface, and the Pottsville Group is stratigraphically below known coal seams.

If you have any questions, please call us at (814) 975-3009.

Regards,

Michelle Eschrich

SOURCE

Based on 1960 state map compilation sheet.

EXPLANATION

IPa
Allegheny Gp.

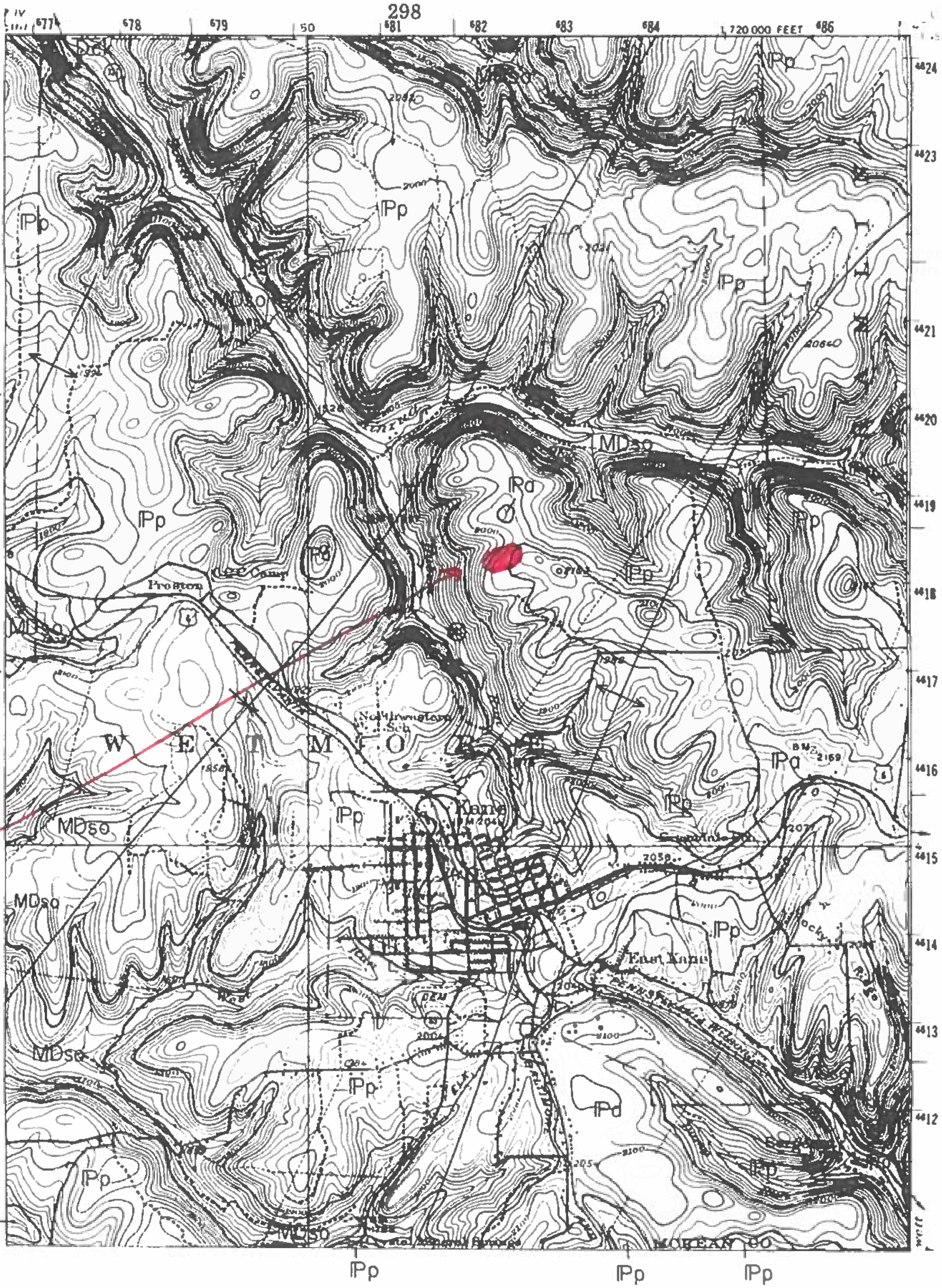
IPp
Pottsville Gp.

MDso
Shenango Fm. through Oswayo Fm., undiv.

Dck
Catskill Fm.

NOTE: Reliability of contacts is poor.

Wt. 3132 #s 8, 9 + 10 area



SCALE 1:62500

1 0 1 MILE

1 0 1 KILOMETER

Compiled by W. E. EDMUNDS, 1977

KANE 15′ (NE)

From: Michelle Eschrich
To: McGill, Andrea
Subject: [External] RE: PHR WT 3131 #69 and WT 3132 #"s 8,9,10
Date: Tuesday, February 10, 2026 1:55:20 PM

Hi Andrea,

I missed your email previously. In response to your question, tree take occurred previously per a Timber Agreement with the surface owner.

Please let me know if you need anything else.

Thank you,

Michelle Eschrich
Human Resources
Pennhills Resources, LLC
Phone: 814-975-3009 Mobile: 814-335-6148
Mailing: PO Box 426, Mt. Jewett, PA 16740
Physical: 3055 Route 219, Kane, PA 16735
Web: www.pennhillsresources.com
Email: m.eschrich@pennhillsresources.com

From: McGill, Andrea <anmcgill@pa.gov>
Sent: Thursday, January 22, 2026 11:57 AM
To: Michelle Eschrich <M.Eschrich@pennhillsresources.com>
Subject: PHR WT 3131 #69 and WT 3132 #'s 8,9,10

> You don't often get email from anmcgill@pa.gov. Learn why this is important

Good morning Michelle,

I am reviewing the above drilling applications and the PNDI has a question answered that there will be no tree removal (pg. 4 Question #1). However, the site looks heavily wooded. Can you please confirm there will be no tree removal. If there will be tree removal, please run an updated PNDI with the answer changed to indicate that tree removal is intended and submit

the update PNDI receipt.

Thank you,
Andrea

Andrea C. McGill, P.G. | Licensed Professional Geologist
She/her/hers
Department of Environmental Protection | District Oil and Gas Operations
Northwest District Office
230 Chestnut Street | Meadville, PA 16335
Phone: 814.332.6145 | Fax: 814.332.6121
www.dep.pa.gov

8000-FM-OOGM0071 2/2017
Form

pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

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

DEP USE	
Auth No. 1553188	APS No. 1152854
Site No. 885285	Facility No. 889114
FIX Client No.	Sub-fac No. 1464946

REQUEST FOR APPROVAL OF ALTERNATIVE WASTE MANAGEMENT PRACTICES (Conventional Operations Only)

PROJECT IDENTIFICATION

Well Operator	DEP ID/OGO No.	U.S. Well No. (API No.)	
PENNHILLS RESOURCES, LLC	306870	083-57911	
Address		Well Farm Name	
PO BOX 426		PHR WT. 3131	
City / State / Zip Code		Well No.	Serial No.
MT. JEWETT / PA / 16740		69	
Telephone No.	Fax No.	County	Municipality
(814) 975-3009	(814) 778-6874	MCKEAN	WETMORE TWP.

***Note:** All submittals must include the following information:*

1) United States Geological Survey (USGS) 7.5-minute quadrangle map showing the location of the proposed alternative waste management practices
2) Full size set of plan design drawings showing proposed facility dimensions and location relative to existing facilities
3) A brief detailed project narrative describing the proposed project

INTENDED ALTERNATIVE PRACTICE

Check the appropriate box and complete the applicable section of the form.

☐ For temporary containment of pollutional substances 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.

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.

1. 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 _____

2. Check the box below if you are requesting approval of an alternative practice for temporary containment.

☒ Approval of another alternative practice is requested. Describe the type of waste and the temporary containment method. Include information that will demonstrate that the proposed alternative practices will provide equivalent or superior protection to the practices indentified in 25 Pa. Code section 78.56.

RECEIVED
DEC 22 2025
Environmental Protection
Northwest Regional Office

Tech Due Date 01/22/2026
bgr 12/23/2025

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 sections 78.61, 78.62, or 78.63.

PLEASE SEE ATTACHED FOR DESCRIPTION

SIGNATURE OF APPLICANT

Signature of Applicant / Well Operator	Print or Type Signer's Name and Title	Date
Stuart J. Morris	STUART J. MORRIS, CEO	12/19/25

DEP USE ONLY

☐ Approved ☒ Denied	Conditions: ☐ YES, see below or attached. ☐ NO	Date
DEP Representative: Brian Ayers		01.07.26

Conditions:
A site evaluation determined that this site was not suited for the requested Alternate Waste Management Practice. This request may be resubmitted if the operator can demonstrate that groundwater will not compromise the drill pit.

8000-FM-OOGM0002 4/2012

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

WELL LOCATION PLAT

PAGE 1 Surface Location

Auth ID #:	G:
Permit #:	C:
Project #:	

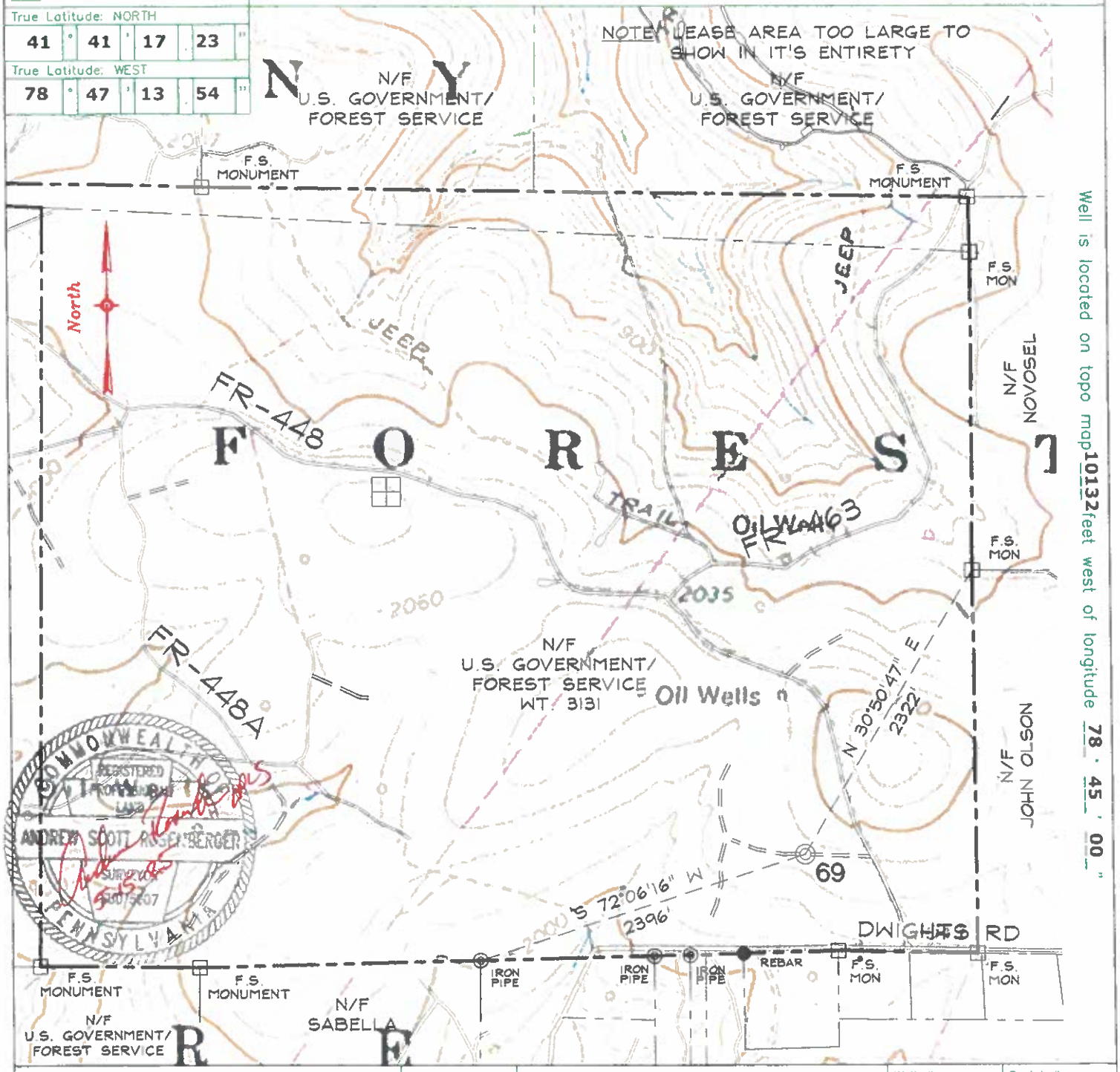
Denotes location of top of well on topo map.

Well is located on topo map **7365** feet south of latitude **41** ° **42** ' **30** "

Well is located on topo map **10132** feet west of longitude **78** ° **45** ' **00** "

True Latitude: NORTH: **41** ° **41** ' **17** . **23** "

True Latitude: WEST: **78** ° **47** ' **13** . **54** "



Applicant/Well Operator Name:	DEP ID #:	Well (Farm) Name:	Well #:	Serial #:
PENNHILLS RESOURCES, LLC	**306870**	**PHR WT. 3131**	**69**	

Address:	County:	Municipality:	Well Type:
P.O. BOX 426, MT. JEWETT, PA 16740	**MCKEAN**	**WETMORE**	**COMBINATION**

911 address of well site:	USGS 7½' Quadrangle Map Name:	Map Section:	Surface Elevation:
N/A	**KANE, PA**	**6**	**2062** ft.

Surveyor or Engineer:	Phone #:	Dwg #:	Date:	Scale:	Tract Acreage:
ANDREW S. ROSENBERGER	**(814) 368-4139**	**06416.69**	**5/15/25**	**1"=1000'**	**813 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**	**5/25**

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 #
PENNHILLS RESOURCES, LLC.	306870	PHR WT. 3131	69	

Surface Landowner / Lessor:	Angle & Course of Deviation (Drilling):	Anticipated True Vertical Depth Feet (TVD):	Anticipated Total Measured Depth Feet (TMD):
U.S. GOVERNMENT / FOREST SERVICE	NONE	2772'	2772'

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

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

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
WETMORE TOWNSHIP	JONES TOWNSHIP
KANE BOROUGH	
SERGEANT TOWNSHIP	
HAMLIN TOWNSHIP	**Coal related parties**
LAFAYETTE TOWNSHIP	
HAMILTON TOWNSHIP	
SHEFFIELD TOWNSHIP	
HOWE TOWNSHIP	
HIGHLAND TOWNSHIP	

AWM1 (for "dusting" not land application)

Pennhills Resources, LLC 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.

Kane 2025 WT. 3131 – WELL #69

ATTACHMENT FOR ALTERNATIVE WASTE MANAGEMENT PRACTICES (CONVENTIONAL OPERATIONS ONLY)

B. ALTERNATIVE WASTE DISPOSAL PRACTICES

Pennhills Resources, LLC is requesting the 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 approximately 1,000' from a stream, an unnamed tributary to Hubert Run. The pit is located more than 4,000' from any wetlands and more than 1,500' from an existing building or water supply. Hubert Run, tributary to South Branch Kinzua Creek lies +/-4,000' south of any clearing limits. There aren't any wetlands or buildings within 1,000' of the project.

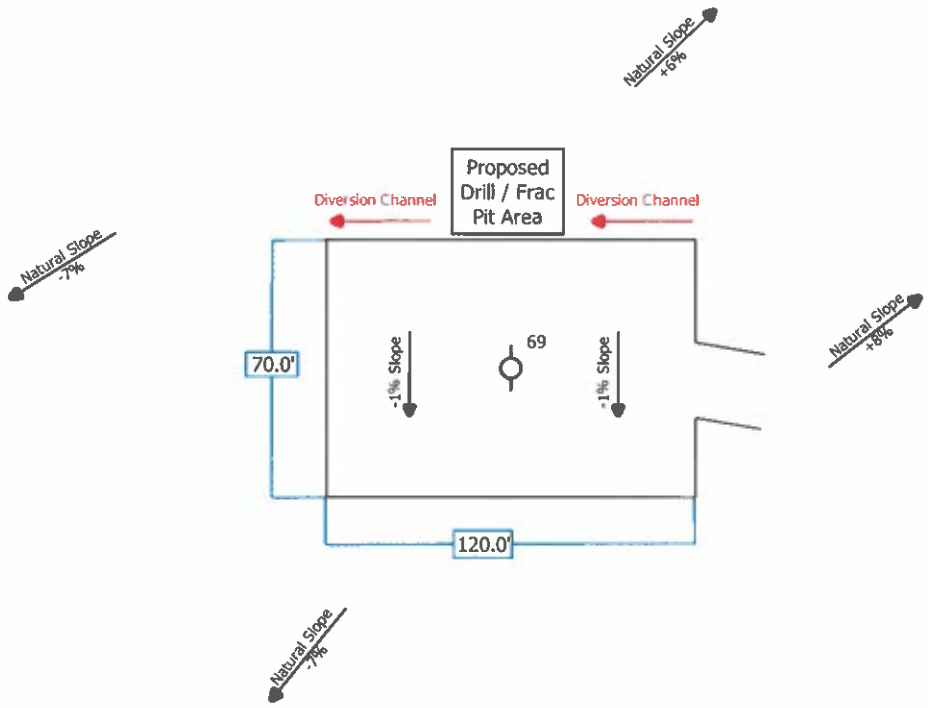
The attached site plans depict the proposed well and pit locations (depending on soils, drainage, and other conditions observed during construction) and any stream, wetland or building that may be within 250' of the well. According to the Web Soils Survey of McKean County, the soil at the well location is Wharton silt loam (WaB).

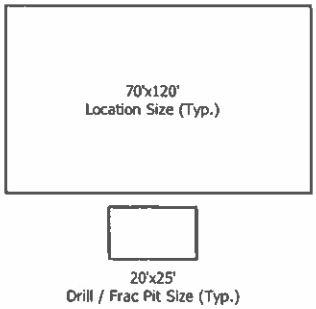
Historical records indicate fresh water will be encountered at a depth of 80-335'

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, seeded and mulched.

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

Mailing: PO Box 426, Mt. Jewett Pennsylvania 16740 | OFFICE: 814-975-3009| FAX: (814) 778-6874
Physical: 3055 Rt. 219, Kane, PA 16735 | www.pennhillsresources.com | info@pennhillsresources.com





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.

Not to Scale

Pennhills Resources, LLC WT 3131 - Well 69 Kane 2025		
County: McKean	Twp: Wetmore	State: PA
Date: 07/15/2025	Scale: Not to Scale	Dwn By: TPR

PENNHILLS RESOURCES