

**From:** [Hogue, Kate](#)  
**To:** [INFO@PENNHILLSRESOURCES.COM](mailto:INFO@PENNHILLSRESOURCES.COM)  
**Cc:** [Avers, Brian](#)  
**Subject:** 083-57921, 083-57922, 083-57923  
**Date:** Thursday, April 16, 2026 3:07:00 PM  
**Attachments:** [Auth 1561136 083-57921.pdf](#)  
[Auth 1561154 083-57922.pdf](#)  
[Auth 1561172 083-57923.pdf](#)  
[083-57921 AWM approved 03.20.26.pdf](#)  
[083-57922 AWM denied 03.20.26.pdf](#)  
[083-57923 AWM denied 03.20.26.pdf](#)  
[Well Permit Cover Letter \(conventional\) 1-12-23.pdf](#)

---

**Operator,**

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

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

The cover letter for these permits is also attached.

This information can also be viewed on our website, at the Oil and Gas Mapping tool: <https://www.depgis.state.pa.us/PaOilAndGasMapping/>

THANKS,  
Kate

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



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

**WELL PERMIT**

DEP USE ONLY	
Permittee's eFACTS ID <b>306870</b>	Auth ID <b>1561172</b>
Watershed Name <b>North Branch Willow Creek</b>	Quality <b>HQ</b>

Permittee <b>PENNHILLS RESOURCES LLC</b>		OGO.# <b>OGO-68600</b>	Permit Number <b>37-083-57923-00-00</b>	Date Issued <b>04/16/2026</b>
Address <b>PO BOX 426</b>		Farm Name & Well Number <b>WT 4339 48</b>		Well Serial #
		Municipality <b>Foster Twp</b>	County <b>McKean</b>	
<b>MT JEWETT, PA 16740</b>		7½' Quadrangle Name <b>Stickney</b>	Map Section # <b>3</b>	
Phone <b>(814) 975-3009</b>	Project #	Latitude <b>41-58-38.4888</b>	Longitude <b>-78-46-19.9704</b>	
Surf Elev at Site <b>2224 feet</b>	Anticipated Maximum TVD <b>1866 feet</b>	Well Type <b>OG</b>	Offset distances referenced to NE corner of map section. <b>South 8250 feet      West 6040 feet</b>	

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. The operator shall provide notice to the appropriate Department Water Quality Specialist (WQS) & WQS Supervisor at least 3 business days prior to excavating a pit at the location of this well.
2. 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.
3. Contact the Inspector at least 24 hours prior to commencing any frac/stimulation procedures.
4. To avoid potential impacts to Swainson's Thrush, all construction and tree clearing activities related to Proposed Wells 46, 47, and 48, and associated access roads, are to be conducted between August 16 and May 14, outside of the nesting season.

This permit expires **04/16/2027** unless drilling is commenced on or before that date and prosecuted with due diligence.

Thomas Donohue      4/16/26  
Subsurface Permits Environmental Program Manager

WESTLEY MARTIN

PO BOX 669  
KNOX, PA 16232

814-720-5746

Oil & Gas Inspector

Address

Phone Number



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

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

Notes <b>Check # 16365</b> <b>\$1,500 (3 apps)</b>  NC  AWM  PNDI 10/29/25		DEP USE ONLY	
OGO # 68600	Client Id 306870	Objection Date - Do not issue before: 3/4/2026	API #s37- <b>083-57923</b>
Bond # 16332	C: bgr 03/04/26 G: ACM 4/14/26	Date Approved: <b>SGP 4/14/26</b>	and - - - - - Watershed Name: To-North Branch Designation: <input checked="" type="checkbox"/> HQ <input type="checkbox"/> EV Willow Creek
INV: APS # 1157704	Auth Id 1561172	Special Cond. 24 hr/ zoning/WQS notice/PGC-Swainson's thrush	Site Id 886593
		PF Id 890491	SF Id 1470951

Please read instructions before you begin filling in this form.

WELL INFORMATION							
Well Operator PENNHILLS RESOURCES, LLC	DEP ID# 306870	Well API # 37- - -	Well Farm Name WT. 4339	Well # 48			
Address PO BOX 426		LAT 41°58' 38.00" 49	NAD 83	Project Number	Serial #		
LONG - 78°46' 19.00" 97							
City MT. JEWETT	State PA	Zip 16740	Municipality Name/ City, Borough, Township FOSTER Township	County MCKEAN			
Phone 814-975-3009	Fax 814-778-6874	Email m.eschrich@pennhillsresources.com	USGS 7.5 min. quadrangle map STICKNEY, PA-NY	Section 3			

<input type="checkbox"/> 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 2224 ✓	Deepest Formation to be penetrated: BRADFORD 2ND	Anticipated TVD 1866 ✓	PERMIT TYPE Check applicable.	TYPE OF WELL Check applicable.	APPLICATION FEE Check applicable.
------------------------	---	---------------------------	----------------------------------	-----------------------------------	--------------------------------------

Target Formation(s) proposed for production TIONA	Anticipated Target Top/Bottom TVD 1400 1750	Application is to: <input checked="" type="checkbox"/> Drill a new <input type="checkbox"/> Re-permit expired permit <input type="checkbox"/> Deepen well <input type="checkbox"/> Redrill wellbore <input type="checkbox"/> Alter well <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Gas <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Comb. (gas & oil/condensate) <input type="checkbox"/> Injection, recovery <input type="checkbox"/> Injection, disposal <input type="checkbox"/> Coalbed Methane <input type="checkbox"/> Gas Storage <input type="checkbox"/> Other (specify)	<input checked="" type="checkbox"/> Conventional <input type="checkbox"/> \$200 (Home Use Well)  Total Application Fee \$ 500.00
--	--	--	--	---

Number of wellbore laterals proposed under this application 0

Total feet of wellbore to be drilled under this application 1866 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: <input type="checkbox"/> Attach Coal Module CBM well <input type="checkbox"/> Attach Coal Module Non coal well <input checked="" type="checkbox"/> Attach justification.	<div style="border: 1px solid blue; padding: 5px; text-align: center;"> <p>RECEIVED</p> <p>MAR 04 2026</p> <p>Environmental Protection Northwest Regional Office</p> </div>	Configuration <input checked="" type="checkbox"/> Vertical <input type="checkbox"/> Horizontal <input type="checkbox"/> Deviated <input type="checkbox"/> Multiple laterals
---	---	---

COORDINATION WITH REGULATIONS AND OTHER PERMITS		Yes	No
1. Will the well be subject to the Oil and Gas Conservation Law? If "No," go to 2).		<input type="checkbox"/>	<input checked="" type="checkbox"/>
a. If "Yes" to #1, is the well at least 330 feet from outside lease or unit boundary?		<input type="checkbox"/>	<input type="checkbox"/>
b. Does the location fall within an area covered by a spacing order?		<input type="checkbox"/>	<input type="checkbox"/>
c. If the well will be multilateral, identify the wellbores on the sketch on page 3 of the plat that will be completed as conservation and non-conservation.			
2. Will the edge of the disturbed area of any portion of the well site of a conventional well be within 100 feet from the edge of any solid blue lined stream, spring or body of water identified on the most current 7½' topographic quadrangle map or wetland greater than one acre in size or in a wetland?		<input type="checkbox"/>	<input checked="" type="checkbox"/>
If yes, is a waiver request (form 5500-FM-OG0057) and site-specific E&S control plan attached?		<input type="checkbox"/>	<input type="checkbox"/>

3. Will the well penetrate or be within 2,000 feet of an active gas storage reservoir boundary?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a. If Yes, print the names of:          Storage Field:                                  Operator:		
4. Is the proposed well location within the permitted area of a landfill?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Will the well be drilled within 200 feet from any existing building or an existing water supply?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
a. If "Yes," is written consent from the owner attached? <input type="checkbox"/> <input type="checkbox"/>		
b. If written consent is not attached, is a variance request (form 8000-FM-OOGM0058) attached? <input type="checkbox"/> <input type="checkbox"/>		
6. 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 completed copy of the form and clearance letters from applicable agencies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
✓		
7. Will any portion of the well site be in a Special Protection High Quality <input checked="" type="checkbox"/> (HQ) or Exceptional Value <input type="checkbox"/> (EV) watershed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Provide name of special protection stream <u>NORTH BRANCH WILLOW CREEK</u> .          ✓		
7.1 Will the well be drilled using enhanced drilling or completion technologies into a formation that typically produces gas or petroleum?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8.1 Is the disturbed area of the well site between 1 to 5 acres and in a Special Protection Watershed	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Is waste, including drill cuttings, from the drilling of this well is to be disposed of on this well site? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
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 <input type="checkbox"/> No <input checked="" type="checkbox"/>		
a. If yes, is a waiver request attached that will protect the Waters of the Commonwealth? Yes <input type="checkbox"/> No <input type="checkbox"/>		
11. Is the well to be located within a H <sub>2</sub> S area pursuant to §78.77a? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
12. Attach a current Ownership & Control form 8000-FM-OOGM0118.		

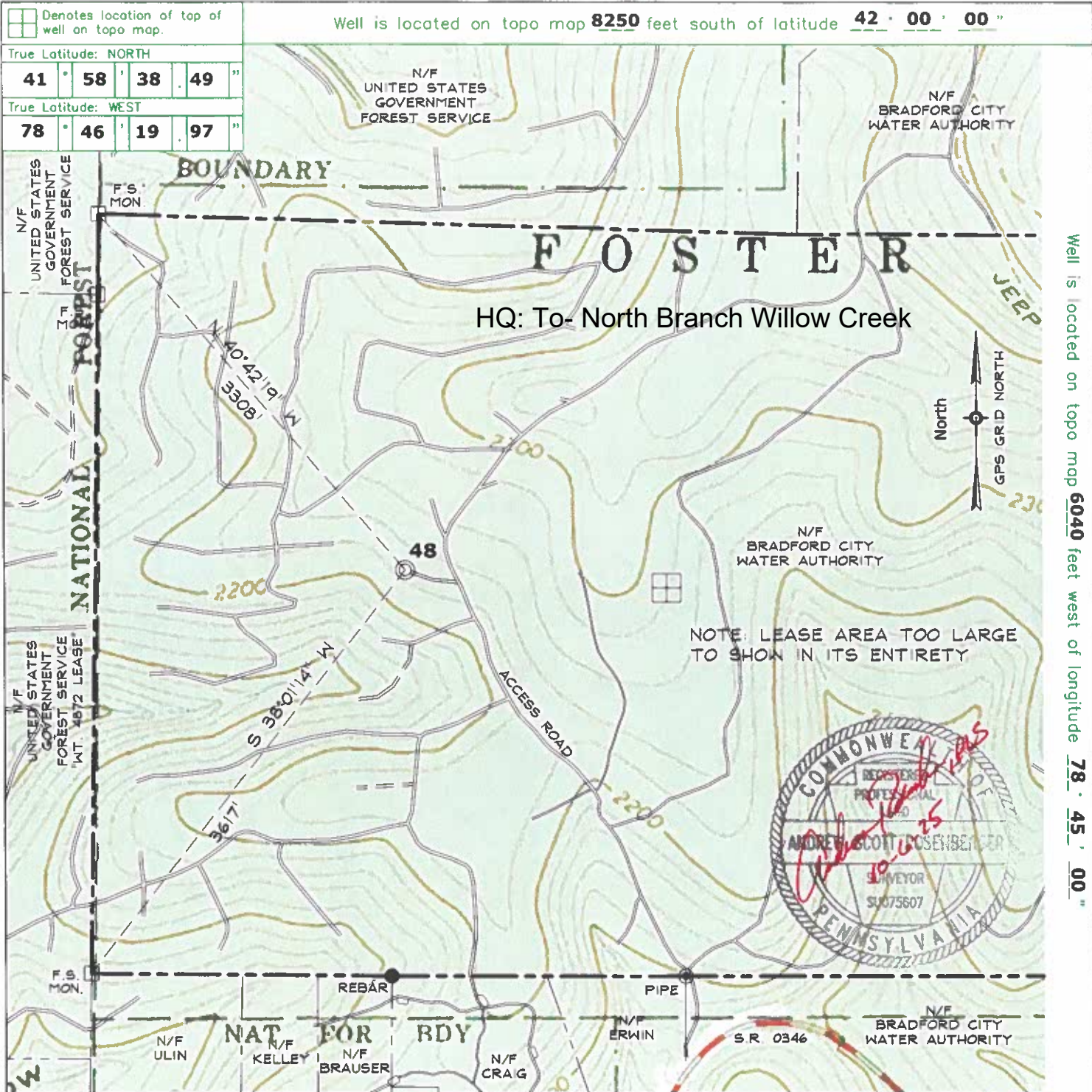
<b>Signature of Applicant</b>	The person signing this form attests that they have the authority to submit this application on behalf of the applicant, and that the information including all related submissions, is true and accurate to the best of their knowledge.		
Signature of Person Authorized to Submit Application	(Print or Type)	Name of Signer: STUART MORRIS	Date
		Title: CEO	3/3/2026
Application Preparer/Contact: MICHELLE ESCHRICH		Phone: 814-975-3009	



**WELL LOCATION PLAT**

PAGE 1 Surface Location

Auth ID #:	
Permit #	083-57923
Project #:	ACM 4/10/26



Applicant/Well Operator Name: <b>PENNHILLS RESOURCES, LLC</b>		DEP ID # <b>306870</b>	Well (Farm) Name: <b>WT 4339</b>	Well #: <b>48</b>	Serial #:
Address: <b>P.O. BOX 426, MT. JEWETT, PA 16740</b>		County: <b>McKEAN</b>	Municipality: <b>FOSTER</b>	Well Type: <b>COMBINATION</b>	
911 address of well site: <b>N/A</b>		USGS 7½' Quadrangle Map Name: <b>STICKNEY, PA-NY</b>	Map Section: <b>3</b>	Surface Elevation: <b>2224</b> ft.	
Surveyor or Engineer: <b>ANDREW S. ROSENBERGER</b>	Phone #: <b>(814) 368-4139</b>	Dwg #: <b>06487.48</b>	Date: <b>10/6/25</b>	Scale: <b>1"=1000'</b>	Tract Acreage: <b>1200± AC.</b>
Lat. & Long Metadata Method: <b>SURVEY GRADE GPS</b>	Accuracy: <b>+/- 10</b> ft.	Datum: <b>NAD 83</b>	Elevation Metadata Method: <b>SURVEY GRADE GPS</b>	Accuracy: <b>+/-10</b> ft.	Datum: <b>NAVD 88</b>
				Survey Date: <b>10/25</b>	





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

Farm Name - Well # WT. 4339 - WELL # 48	
Applicant Name PENNHILLS RESOURCES, LLC	DEP ID# 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. <b>Notification: Signature below name indicates the party's acknowledgement of receipt of the well location plat and serves as proof of notification</b>	Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies <1000'	Municipalities	Notification Note the means and attach proof.				
					Certified Mail Dates		Address Affidavit	Written Consent	
					Sent	Return Receipt			
Print Name: BRADFORD CITY WATER AUTHORITY Signature	Address: 28 KENNEDY STREET BRADFORD, PA 16701	X				10/23/25	10/27/25		
Print Name: FOSTER TOWNSHIP Signature	Address: 1185 EAST MAIN STREET BRADFORD, PA 16701			X		10/23/25	10/27/25		
Print Name: BRADFORD TOWNSHIP Signature	Address: 136 HEMLOCK STREET BRADFORD, PA 16701			X		10/23/25	10/27/25		
Print Name: CITY OF BRADFOD Signature	Address: 24 KENNEDY STREET BRADFORD, PA 16701			X		10/23/25	10/27/25		
Print Name: CORYDON TOWNSHIP Signature	Address: 2474 WEST WASHINGTON STREET BRADFORD, PA 16701			X		10/23/25	11/12/25		

**Record of Written Consent**

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

Print and Sign Name:	Address:	Date:	Surface Owner	Water Well within 200 feet	Building within 200 feet
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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

Farm Name - Well # WT. 4339 - WELL # 48	
Applicant Name PENNHILLS RESOURCES, LLC	DEP ID# 306870
<b>DEP USE ONLY</b>	APS #

List the following: surface landowner; surface landowners and water purveyors with water supplies within 1000 feet; municipality where the well will be drilled; adjacent municipality; gas storage operator if within 2000 feet. Mark the boxes, "X," which show the parties' interests. Use additional forms if you need more space. You are required to notify each of these parties. <b>Notification: Signature below name indicates the party's acknowledgment of receipt of the well location plat and serves as proof of notification</b>		Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies <1000'	Municipalities	Notification Note the means and attach proof.			
						Certified Mail Dates		Address Affidavit	Written Consent
						Sent	Return Receipt		
Print Name: KEATING TOWNSHIP Signature	Address: 7160 ROUTE 46 SMETHPORT, PA 16749				X	10/23/25	10/27/25		
Print Name: OTTO TOWNSHIP Signature	Address: 695 MAIN STREET DUKE CENTER, PA 16729				X	10/23/25	10/27/25		
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

Print and Sign Name:	Address:	Date:	Surface Owner	Water Well within 200 feet	Building within 200 feet
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9589 0710 5270 3128 6142 24

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

Bradford, PA 16701  
**OFFICIAL USE**

Certified Mail Fee	\$5.30	0701
Extra Services & Fees (check box, add fee amount)	\$4.40	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$1.07	
Total Postage and Fees	\$10.77	

Postmark Here  
OCT 23 2025  
10/23/2025

Sent To  
Street and #  
**BRADFORD CITY WATER AUTHORITY**  
**28 KENNEDY STREET**  
City, State  
**BRADFORD, PA 16701**

PS Form 3800, January 2023 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY													
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature <b>X</b> <i>[Signature]</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>10/23/25</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>													
<p>1. Article Addressed to:</p> <p><b>BRADFORD CITY WATER AUTHORITY</b> <b>28 KENNEDY STREET</b> <b>BRADFORD, PA 16701</b></p>		<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Restricted Delivery</td> </tr> </table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Restricted Delivery
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®														
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™														
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery														
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™														
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery														
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Restricted Delivery														
<p>2. Article Number (Transfer from service label)</p> <p><b>9589 0710 5270 3128 6142 24</b></p>															

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

9589 0710 5270 3128 6142 62

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

Bradford, PA 16701  
**OFFICIAL USE**

Certified Mail Fee	\$5.30	0701
Extra Services & Fees (check box, add fee amount)	\$4.40	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00	
<input type="checkbox"/> Return Receipt (electronic)	\$0.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00	
<input type="checkbox"/> Adult Signature Required	\$0.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00	
Postage	\$2.44	
Total Postage and Fees	\$12.14	

Postmark Here  
OCT 23 2025  
10/23/2025

Sent To  
Street and #  
**FOSTER TOWNSHIP**  
**1185 EAST MAIN STREET**  
City, State  
**BRADFORD, PA 16701**

PS Form 3800, January 2023 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY													
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature <b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>[Signature]</i> C. Date of Delivery <i>10-23-25</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>													
<p>1. Article Addressed to:</p> <p><b>FOSTER TOWNSHIP</b> <b>1185 EAST MAIN STREET</b> <b>BRADFORD, PA 16701</b></p>		<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Restricted Delivery</td> </tr> </table>		<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Restricted Delivery
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®														
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™														
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery														
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™														
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery														
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Restricted Delivery														
<p>2. Article Number (Transfer from service label)</p> <p><b>9589 0710 5270 3128 6142 62</b></p>															

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

9589 0710 5270 3128 6142 48

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Origin: Bradford, PA 16701

Destination: Bradford, PA 16701

Certified Mail Fee \$15.30

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

<input type="checkbox"/> Return Receipt (hardcopy)	\$	3.00
<input type="checkbox"/> Return Receipt (electronic)	\$	18.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	10.00
<input type="checkbox"/> Adult Signature Required	\$	10.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage \$

Total Postage and Fees \$

Sent To  
 Street and  
 City, State

BRADFORD TOWNSHIP  
 136 HEMLOCK STREET  
 BRADFORD, PA 16701

PS Form 3809, 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:

BRADFORD TOWNSHIP  
 136 HEMLOCK STREET  
 BRADFORD, PA 16701

9590 9402 9525 5069 6776 01

2. Article Number (Transfer from service label)  
 9589 0710 5270 3128 6142 48

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
 X Mary Bernard  Agent  Addressee

B. Received by (Printed Name)  
Mary Bernard

C. Date of Delivery  
10/27/25

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Insured Mail™
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Restricted Delivery

Domestic Return Receipt

9589 0710 5270 3128 6142 31

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Origin: Bradford, PA 16701

Destination: Bradford, PA 16701

Certified Mail Fee \$15.30

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

<input type="checkbox"/> Return Receipt (hardcopy)	\$	3.00
<input type="checkbox"/> Return Receipt (electronic)	\$	18.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	10.00
<input type="checkbox"/> Adult Signature Required	\$	10.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	

Postage \$1.07

Total Postage and Fees \$10.77

Sent To  
 Street and  
 City, State

CITY OF BRADFORD  
 24 KENNEDY STREET  
 BRADFORD, PA 16701

PS Form 3809, 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:

CITY OF BRADFORD  
 24 KENNEDY STREET  
 BRADFORD, PA 16701

9590 9402 9525 5069 6775 95

2. Article Number (Transfer from service label)  
 9589 0710 5270 3128 6142 31

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
 X [Signature]  Agent  Addressee

B. Received by (Printed Name)  
[Signature]

C. Date of Delivery  
10/27/25

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Insured Mail™
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> Restricted Delivery

Domestic Return Receipt

9589 0710 5270 3128 6142 55

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**Bradford, PA 16701**

**OFFICIAL USE**

Certified Mail Fee \$5.30

PA 16701-9901 0701

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

<input type="checkbox"/> Return Receipt (hardcopy)	\$ 14.00
<input type="checkbox"/> Return Receipt (electronic)	\$ 30.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 80.00
<input type="checkbox"/> Adult Signature Required	\$ 60.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$2.44

Total Postage and Fees \$7.74

Sent To  
 Street and/or PO Box No. CORYDON TOWNSHIP  
 2474 WEST WASHINGTON  
 City, State, ZIP+4® BRADFORD, PA 16701

PS Form 3800, January 2023 PSN 7530-02-000-9053 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:

CORYDON TOWNSHIP  
 2474 WEST WASHINGTON  
 BRADFORD, PA 16701

2. Article Number (Transfer from service label)  
 9589 0710 5270 3128 6142 55

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 \* Lisa S. [Signature]  Agent  Addressee

B. Received by (Printed Name)  
 Lisa S.

C. Date of Delivery  
 11/2/25

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

3. Service Type (over \$500)  
 Restricted Delivery

**Domestic Return Receipt**

9589 0710 5270 3128 6142 79

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

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**Smethport, PA 16749**

**OFFICIAL USE**

Certified Mail Fee \$5.30

PA 16701-9901 0701

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

<input type="checkbox"/> Return Receipt (hardcopy)	\$ 14.00
<input type="checkbox"/> Return Receipt (electronic)	\$ 30.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 80.00
<input type="checkbox"/> Adult Signature Required	\$ 60.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$1.07

Total Postage and Fees \$6.37

Sent To  
 Street and/or PO Box No. KEATING TOWNSHIP  
 7160 ROUTE 46  
 City, State, ZIP+4® SMETHPORT, PA 16749

PS Form 3800, January 2023 PSN 7530-02-000-9053 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:

KEATING TOWNSHIP  
 7160 ROUTE 46  
 SMETHPORT, PA 16749

2. Article Number (Transfer from service label)  
 9589 0710 5270 3128 6142 79

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 \* Taylor [Signature]  Agent  Addressee

B. Received by (Printed Name)  
 Taylor [Signature]

C. Date of Delivery  
 11/2/25

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

3. Service Type (over \$500)  
 Restricted Delivery

**Domestic Return Receipt**

9589 0710 5270 3128 6142 86

# U.S. Postal Service CERTIFIED MAIL RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

Duke Center, PA 16729

## OFFICIAL USE

Certified Mail Fee	\$15.30
Extra Services & Fees (check box, add fee as appropriate)	\$4.40
<input type="checkbox"/> Return Receipt (hardcopy)	\$10.00
<input type="checkbox"/> Return Receipt (electronic)	\$10.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$10.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$1.07
Total Postage and Fees	\$10.77

0701  
DUKE CENTER PA 16729  
Postmark  
OCT 23 2025

Sent To  
**OTTO TOWNSHIP**  
Street and  
**695 MAIN STREET**  
City, State  
**DUKE CENTER, PA 16729**

PS Form 3809, January 2023 PSN 7530-02-000-9053 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:

**OTTO TOWNSHIP  
695 MAIN STREET  
DUKE CENTER, PA 16729**



9590 9402 9525 5069 6776 49

2. Article Number (Transfer from service label)  
**9589 0710 5270 3128 6142 86**

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

### COMPLETE THIS SECTION ON DELIVERY

A. Signature  Agent  Addressee  
*[Signature]*

B. Received by (Printed Name) C. Date of Delivery  
**DUKE CENTER PA 16729** **10/23/25**

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

**OCT 27 2025**

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

Domestic Return Receipt

## 1. PROJECT INFORMATION

Project Name: **Mallory Area**

Date of Review: **10/29/2025 08:05:52 AM**

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

Project Area: **2,230.76 acres**

County(s): **McKean**

Township/Municipality(s): **Bradford Township; Corydon Township; Foster Township**

ZIP Code:

Quadrangle Name(s): **STICKNEY**

Watersheds HUC 8: **Upper Allegheny**

Watersheds HUC 12: **Quaker Run-Allegheny River; West Branch Tunungwant Creek; Willow Creek-Allegheny River**

Decimal Degrees: **41.977468, -78.787861**

Degrees Minutes Seconds: **41° 58' 38.8834" N, 78° 47' 16.2989" W**

## 2. SEARCH RESULTS

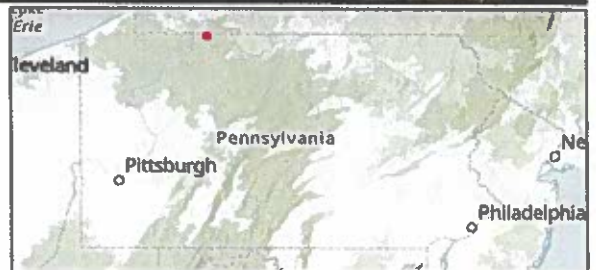
Agency	Results	Response
PA Game Commission	<b>Potential Impact</b>	<b>FURTHER REVIEW IS REQUIRED, See Agency Response</b>
PA Department of Conservation and Natural Resources	No Known Impact	No Further Review Required
PA Fish and Boat Commission	No Known Impact	No Further Review Required
U.S. Fish and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

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

### Mallory Area

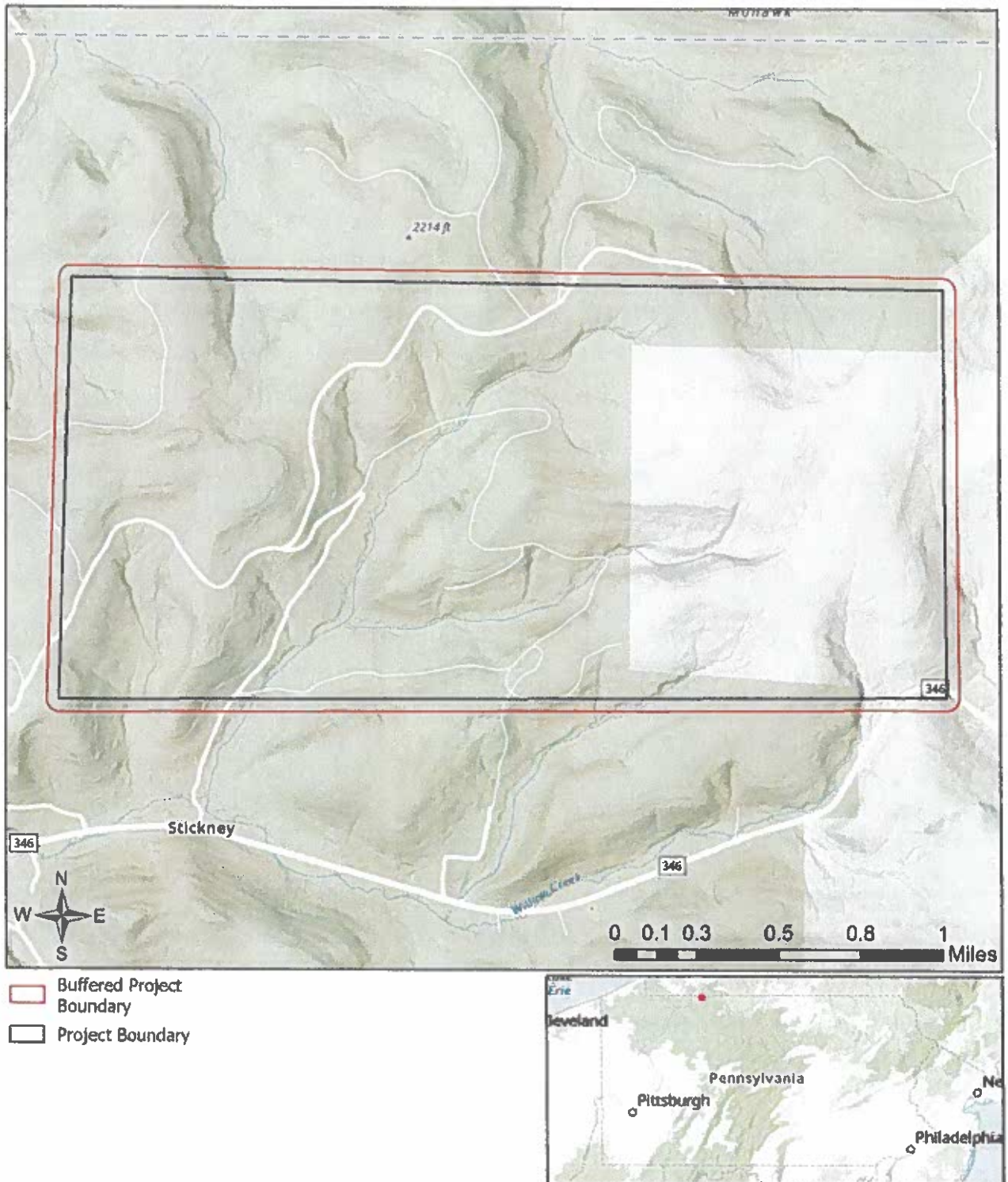


-  Buffered Project Boundary
-  Project Boundary



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

### Mallory Area



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, Geodatastyroelsen, 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:** Yes

**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:** Unknown

### 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
Catharus ustulatus	Swainson's Thrush	Special Concern Species*

#### 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:

Information Request: Your project is within the range of the federally listed northern long-eared bat. Enter project information into IPaC (<http://ecos.fws.gov/ipac/>). Follow the step-by-step process to review this project's potential effect on federally listed species. For step-by-step instructions, please see our Project Review Page (<https://www.fws.gov/office/pennsylvania-ecological-services/project-revi...>)

\* 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](http://www.naturalheritage.state.pa.us)). Also note that the PNDI Environmental Review Tool only contains information about species occurrences that have actually been reported to the PNHP.

### 6. AGENCY CONTACT INFORMATION

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

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

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

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

### 7. PROJECT CONTACT INFORMATION

Name: \_\_\_\_\_ 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

10/29/2025  
date



# PENNSYLVANIA GAME COMMISSION

## BUREAU OF WILDLIFE MANAGEMENT

2001 ELMERTON AVENUE HARRISBURG, PA 17110-9797 | (717) 787-5529

December 11, 2025

PGC ID Number: 202510290101

Michelle Eschrich  
Penhills Resources  
PO Box 426  
Mt. Jewett, Pennsylvania 16740  
[michelle.eschrich@penhillsresources.com](mailto:michelle.eschrich@penhillsresources.com)

Re: Mallory Area  
PNDI Receipt File: *project\_receipt\_mallory\_area\_850879\_FINAL\_1.pdf*  
Bradford, Corydon, and Foster Townships; McKean County, Pennsylvania

Dear Michelle Eschrich,

Thank you for submitting Pennsylvania Natural Diversity Inventory (PNDI) Environmental Review Receipt *project\_receipt\_mallory\_area\_850879\_FINAL\_1.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.

### Potential Impact Anticipated

PNDI records indicate species or resources of concern are located in the vicinity of the project. The PGC has received and thoroughly reviewed the information that you provided to this office, as well as PNDI data, and has determined that potential impacts to the following threatened, endangered, or species of special concern may be associated with your project. Therefore, additional measures are necessary to avoid potential impacts to the species listed below:

Common Name	Scientific Name	PA Status
Swainson's Thrush	<i>Catharus ustulatus</i>	SPECIAL CONCERN

### Next Steps

To avoid potential impacts to Swainson's Thrush, all construction and tree clearing activities related to Proposed Wells 46, 47, and 48, and associated access roads, are to be conducted between August 16 and May 14, outside of the nesting season. Figure 1 (attached below) shows the location of the proposed wells subject to the seasonal restriction.

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](http://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  
Wildlife Biologist  
Bureau of Wildlife Management  
Phone: 717-787-4250, Extension 73410  
Fax: 717-787-6957  
E-mail: [anolder@pa.gov](mailto:anolder@pa.gov)

A PNHP Partner

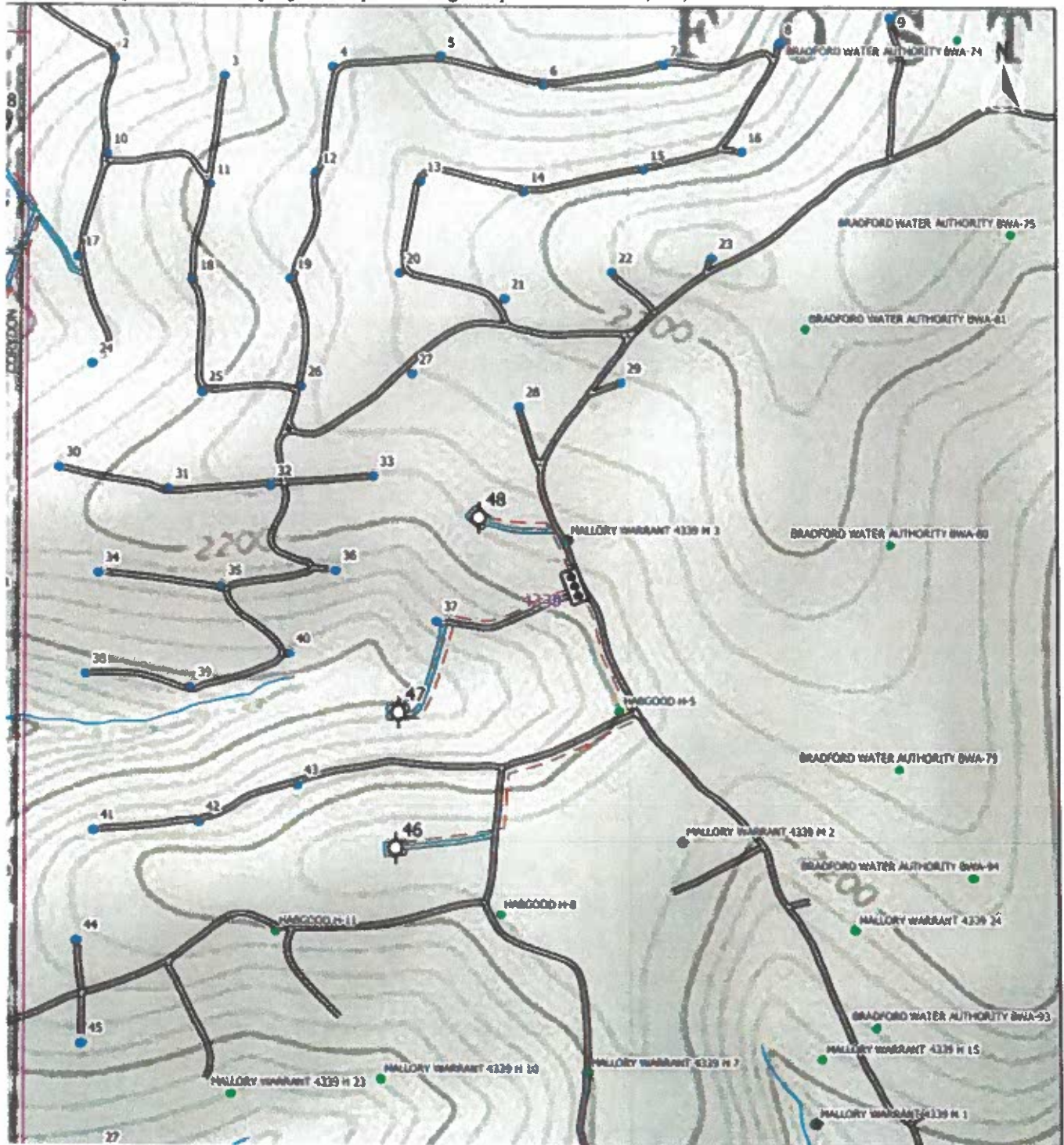


Pennsylvania Natural Heritage Program

ADN/adn

H:\OIL&GAS\_PNDI\_Reviews\Northwest Region

Figure 1: A portion of the project map showing Proposed Wells 46, 47, and 48.





**RE: Wt. 4339 Wells – 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 (Wt. 4339, Foster Twp., McKean County.) is considered to be a Non-workable Coal Seam. The well is located where the Pottsville is at the surface, and the Pottsville is stratigraphically below known coal seams.

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

Regards,

A handwritten signature in black ink, appearing to read "Michelle Eschrich", is written in a cursive style.

Michelle Eschrich

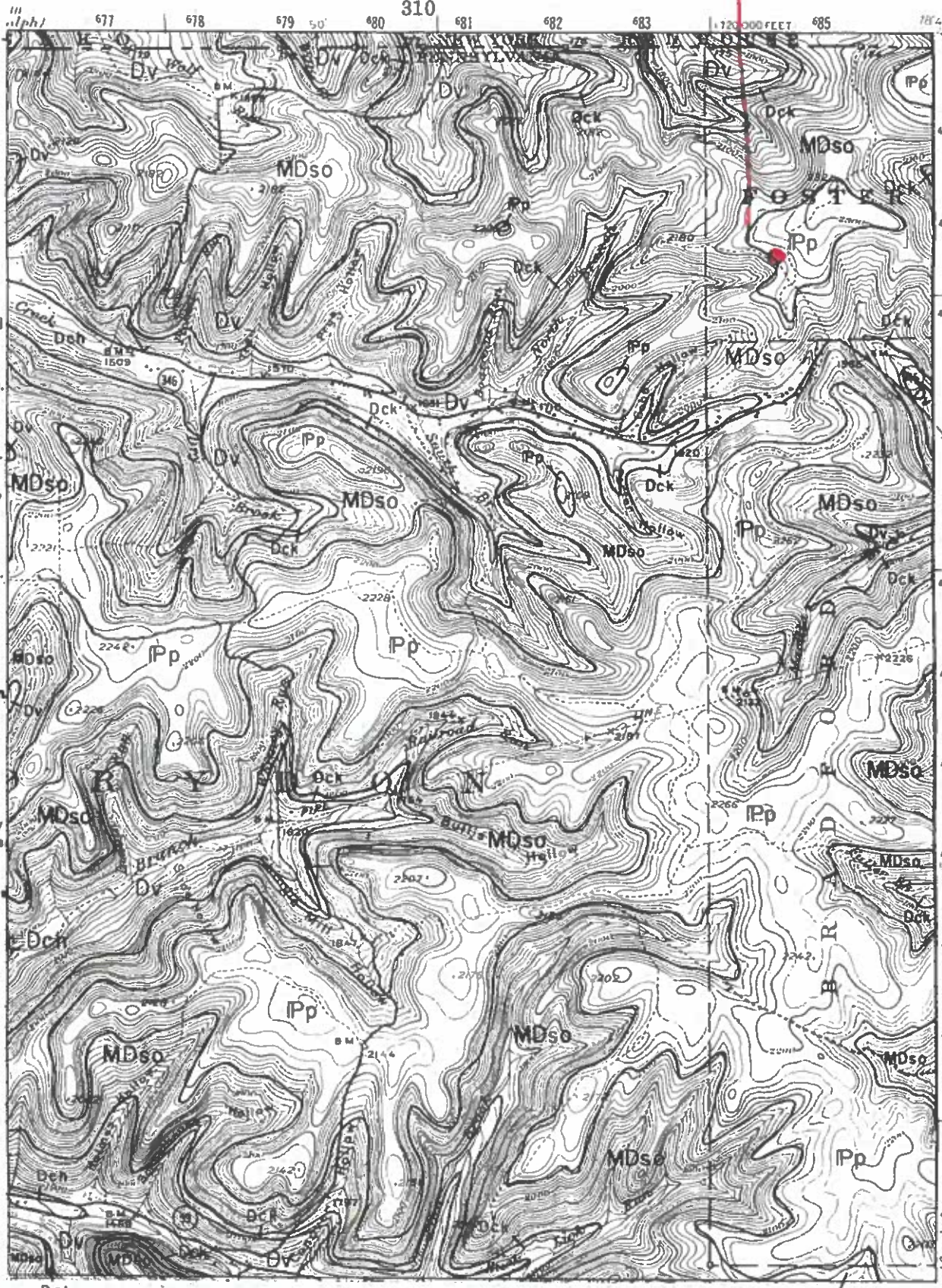
Wt. 4339 #48

5268 ft  
Sea level

SOURCE  
(1) 1960 state map completion sheet.  
(2) M 62.

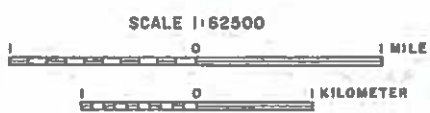
EXPLANATION  
Pp  
Pottsville Gp.  
MDso  
Shenango Fm. through Oswayo Fm., undiv.  
Dck  
Catskill Fm.  
Dv  
Venango Fm.  
Dch  
Chodakoin Fm.

NOTE: Reliability of contacts is poor to fair.  
Dck/Dv facies change is approximately located and is not based on detailed studies.



Dck REFERENCE MDso

Lytle, W. S., and Goth, J.H. (1968), *Oil and gas geology of the Kinzua quadrangle, Warren and McKean Counties, Pennsylvania*, Pennsylvania Geological Survey, 4th ser., Mineral Resource Report 62, 99 p.



Compiled by W. E. EDMUNDS, 1977

KINZUA 15' (NE)

660 000 FEET  
4649  
4648  
4647  
4646  
4645  
4644  
4643  
4642  
4641  
4639  
BRADFORD IJUNC. U.S. 218) 6 MI.  
SALAMANCA 34 MI.



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 PENNHILLS RESOURCES, LLC	DEP ID No. 306870	Well Farm Name and No. WT. 4339	48
Address PO BOX 426		Project No. (if previously assigned)	
City MT. JEWETT	State PA	Zip Code 16740	County MCKEAN Municipality FOSTER TWP
Phone No. 8149753009	Fax No. 8147786874	Latitude N 41° 58' 38.49"	Longitude W 78° 46' 19.97"
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?		<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>ACM</i> corrected per A. Rosenberger email	
2. Will the well be located within the corridor of a state or national scenic river?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3. If answering "Yes" to questions 1 or 2, name the public resource(s). <del>BRADFORD CITY WATER AUTHORITY</del>			
List the name, address, and phone number of the person responsible for management of the public resource. <del>28 KENNEDY STREET, BRADFORD, PA 16701 (814) 362-3004</del>			
Must the administrator of the public resource approve or otherwise authorize the proposed well, well site, access road, or gathering pipeline?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Has the approval or authorization been received?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Has the search of the proposed well location against the Pennsylvania Natural Diversity Inventory (PNDI), or any other evaluation, identified a potential conflict with a species of special concern?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
If "Yes", provide PNDI Search Number <u>850879</u> 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 AND U.S. FISH AND WILDLIFE SERVICE			
5. Will the well be located within 200 ft. of any historical or archaeological sites listed as national or state historic places?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 mitigate the impacts to public resources.  THE PA GAME COMMISSION REQUIRES AVOIDANCE MEASURES. PENNHILLS WILL COMPLY WITH ALL AVOIDANCE MEASURES STIPULATED BY THE PA GAME COMMISSION. THE U.S. FISH & WILDLIFE SERVICE REQUIRES AVOIDANCE MEASURES. PENNHILLS WILL COMPLY WITH ALL AVOIDANCE MEASURES STIPULATED BY THE US FISH & WILDLIFE SERVICE. 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.			



March 3, 2026

Department of Environmental Protection  
Oil and Gas Management  
Northwest Regional Office  
230 Chestnut Street  
Meadville, PA 16335



***Re: Permit Application for Wt. 4339 – Wells # 46, 47, 48***

To Whom It May Concern:

Enclosed are the permit applications and supporting documentation to drill on Wt. 4339, Wells #46, 47, 48. Enclosed is a check in the amount of \$1,500.00 (check #16365).

Please contact me by email with any questions at [m.eschrich@pennhillsresources.com](mailto:m.eschrich@pennhillsresources.com)

Sincerely,

Michelle Eschrich  
Pennhills Resources, LLC

Enclosure(s)

**From:** [Andrew Rosenberger](#)  
**To:** [McGill, Andrea](#)  
**Cc:** [Stuart Morris](#)  
**Subject:** Re: [External] Re: FW: WT 4339 46, 47, 48  
**Date:** Tuesday, April 7, 2026 5:23:55 PM  
**Attachments:** [pennhills mallory ipac\\_20260407161707.pdf](#)

---

Andrea,

Attached to this email is the IPaC response for the Pennhills Mallory well project. The IPaC submission determined no effect.

In the past when a check box needed to be checked, or unchecked it was always acceptable to have a DEP representative do it in house to save time and effort, provided they were requested by the company submitting. Would you be willing to uncheck question #1 and change it to "no" to save this time and effort? I do not have the files in my office to do this or I would. In order for me to get it taken care of I would need to completely refill out the form, prior to submitting.

Please let me know if there is any other information I can provide to help get these permits moving forward.

Thank you,  
Andrew

On Mon, Apr 6, 2026 at 1:30 PM Andrew Rosenberger <[langsurveyingllc@gmail.com](mailto:langsurveyingllc@gmail.com)> wrote:

Andrea,

Thank you for the clarification, when I get the PNDI and the IPaC in my hands I will update accordingly and be back in touch with you.

Thank you,  
Andrew

On Mon, Apr 6, 2026 at 1:18 PM McGill, Andrea <[anmcgill@pa.gov](mailto:anmcgill@pa.gov)> wrote:

Hi Andrew,

The Coordination Form is required. It will still need to be part of the submission documents based on the potential impacts to T&E species. So, the section addressing the responses from USFWS and PGC are still applicable and necessary.

Question #1, however, should be answered "no", because the Water Authority being the surface landowner does not meet the requirement for that specific section being answered as a yes to being in or near a public resource.

An updated form should be submitted with # 1 changed to “no”. The section regarding the PGC and USFWS responses and any protective measures taken in regards to T&E species should be updated if necessary based on the IPaC.

Thanks,

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](http://www.dep.pa.gov)

*PRIVILEGED AND CONFIDENTIAL COMMUNICATION The information transmitted is intended only for the person or entity to whom it is addressed and may contain confidential and/or privileged material. Any use of this information other than by the intended recipient is prohibited. If you receive this message in error, please send a reply e-mail to the sender and delete the material from any and all computers.*

---

**From:** Andrew Rosenberger <[langsurveyingllc@gmail.com](mailto:langsurveyingllc@gmail.com)>

**Sent:** Monday, April 6, 2026 1:12 PM

**To:** Stuart Morris <[s.morris@pennhillsresources.com](mailto:s.morris@pennhillsresources.com)>

**Cc:** McGill, Andrea <[anmcgill@pa.gov](mailto:anmcgill@pa.gov)>

**Subject:** [External] Re: FW: WT 4339 46, 47, 48

**ATTENTION:** *This email message is from an external sender. Do not open attachments or click links from unknown senders. To report suspicious email, use the [Report Phishing button in Outlook](#).*

Stuart and Andrea,

I can have Heather work on getting the IPaC submission completed tomorrow, she is off on Mondays and she is the one that takes care of that in our office.

As far as the Public Resource Coordination form goes - I did not put these permit packages together but I am gathering this form was most likely not necessary? Can you confirm it was not Andrea? If it was not, please disregard them from the permits as they were most likely filled out in error. No need to update and resubmit them if they are not needed.

Thank you,

Andrew

On Mon, Apr 6, 2026 at 9:44 AM Stuart Morris <[s.morris@pennhillsresources.com](mailto:s.morris@pennhillsresources.com)> wrote:

Morning Andrew,

Any chance you'd be able to help navigate this for us? Michelle submitted these permits and this is that last bit that Andrea needs to issue the permits.

I spoke with Andrea this morning and she offered to help elaborate on what she's looking for if you need that.

Thanks,

Stu

**Stuart Morris**|Pennhills Resources, LLC

PO Box 426, Mt Jewett, PA 16740

3055 Rt 219, Kane, PA 16735

(o) 814.975.3009

(m) 814.598.0237

[www.pennhillsresources.com](http://www.pennhillsresources.com)

---

**From:** McGill, Andrea <[anmcgill@pa.gov](mailto:anmcgill@pa.gov)>  
**Sent:** Friday, April 3, 2026 2:16 PM  
**To:** Stuart Morris <[s.morris@pennhillsresources.com](mailto:s.morris@pennhillsresources.com)>  
**Subject:** WT 4339 46, 47, 48

You don't often get email from [anmcgill@pa.gov](mailto:anmcgill@pa.gov). [Learn why this is important](#)  
Good afternoon,

I am reviewing the above applications for conventional drilling permits.

The PNDI had a hit for a potential impact from the USFWS for the Northern Long Eared Bat requiring an IPaC submission. The Public Resource form indicates that PennHills will comply with the all avoidance measures stipulated by the USFWS, but documents including those avoidance measures were not included in the applications.

- The IPaC submission and results should be submitted to the Department for review as part of the jurisdictional agency response.

Number 1 on the Public Resource Coordination Form was also marked as “yes”, with the Bradford City Water Authority as the public resource. While a water supply would be a public resource, there appears to be no public water supply within 1000’ of the proposed location. The Bradford City Water Authority being the surface landowner does not meet the definition of a public resource and can be removed from this form (they are covered under the Interested Parties as the surface landowner.).

- Please change #1 to “no” and remove the water authority from the Public resource coordination form and submit the updated copy.

You can email all updated submittal items to me directly.

Please feel free to let me know if you have any questions.

Thanks,

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](http://www.dep.pa.gov)

*PRIVILEGED AND CONFIDENTIAL COMMUNICATION The information transmitted is intended only for the person or entity to whom it is addressed and may contain confidential and/or privileged material. Any use of this information other than by the intended recipient is prohibited. If you receive this message in error, please send a reply e-mail to the sender and delete the material from any and all computers.*

--

*Andrew S. Rosenberger*

*Owner of Lang Surveying LLC*

*Professional Land Surveyor in PA and NY*

*Lang Surveying LLC*

1059 Lafferty Lane

Bradford, PA 16701

814-368-4139



## United States Department of the Interior

FISH AND WILDLIFE SERVICE  
Pennsylvania Ecological Services Field Office  
110 Radnor Road Suite 101  
State College, PA 16801-7987  
Phone: (814) 234-4090 Fax: (814) 234-0748



In Reply Refer To:  
Project code: 2026-0073390  
Project Name: PHR Mallory Area

04/07/2026 20:45:18 UTC

Federal Nexus: no  
Federal Action Agency (if applicable):

**Subject:** Record of project representative's no effect determination for 'PHR Mallory Area'

Dear Andrew Rosenberger:

This letter records your determination using the Information for Planning and Consultation (IPaC) system provided to the U.S. Fish and Wildlife Service (Service) on April 07, 2026, for 'PHR Mallory Area' (here forward, Project). This project has been assigned Project Code 2026-0073390 and all future correspondence should clearly reference this number. **Please carefully review this letter.**

### Ensuring Accurate Determinations When Using IPaC

The Service developed the IPaC system and associated species' determination keys in accordance with the Endangered Species Act of 1973 (ESA; 87 Stat. 884, as amended; 16 U.S.C. 1531 et seq.) and based on a standing analysis. All information submitted by the Project proponent into IPaC must accurately represent the full scope and details of the Project.

Failure to accurately represent or implement the Project as detailed in IPaC or the **Northern Long-eared Bat and Tricolored Bat Range-wide Determination Key (Dkey)**, invalidates this letter. ***Answers to certain questions in the DKey commit the project proponent to implementation of conservation measures that must be followed for the ESA determination to remain valid.***

### Determination for the Northern Long-Eared Bat and/or Tricolored Bat

Based upon your IPaC submission and a standing analysis, your project has reached the following effect determinations:

Species	Listing Status	Determination
Northern Long-eared Bat ( <i>Myotis septentrionalis</i> )	Endangered	No effect

Tricolored Bat (*Perimyotis subflavus*)

Proposed  
Endangered

No effect

Federal agencies must consult with U.S. Fish and Wildlife Service under section 7(a)(2) of the Endangered Species Act (ESA) when an action *may affect* a listed species. Tricolored bat is proposed for listing as endangered under the ESA, but not yet listed. For actions that may affect a proposed species, agencies cannot consult, but they can *confer* under the authority of section 7(a)(4) of the ESA. Such conferences can follow the procedures for a consultation and be adopted as such if and when the proposed species is listed. Should the tricolored bat be listed, agencies must review projects that are not yet complete, or projects with ongoing effects within the tricolored bat range that previously received a NE or NLAA determination from the key to confirm that the determination is still accurate.

To make a no effect determination, the full scope of the proposed project implementation (action) should not have any effects (either positive or negative), to a federally listed species or designated critical habitat. Effects of the action are all consequences to listed species or critical habitat that are caused by the proposed action, including the consequences of other activities that are caused by the proposed action. A consequence is caused by the proposed action if it would not occur but for the proposed action and it is reasonably certain to occur. Effects of the action may occur later in time and may include consequences occurring outside the immediate area involved in the action. (See § 402.17).

Under Section 7 of the ESA, if a federal action agency makes a no effect determination, no consultation with the Service is required (ESA §7). If a proposed Federal action may affect a listed species or designated critical habitat, formal consultation is required except when the Service concurs, in writing, that a proposed action "is not likely to adversely affect" listed species or designated critical habitat [50 CFR §402.02, 50 CFR§402.13].

### **Other Species and Critical Habitat that May be Present in the Action Area**

The IPaC-assisted determination key for the northern long-eared bat and tricolored bat does not apply to the following ESA-protected species and/or critical habitat that also may occur in your Action area:

- Monarch Butterfly *Danaus plexippus* Proposed Threatened

You may coordinate with our Office to determine whether the Action may affect the animal species listed above and, if so, how they may be affected.

### **Next Steps**

If there are no updates on listed species, no further consultation/coordination for this project is required with respect to the species covered by this key. However, the Service recommends that project proponents re-evaluate the Project in IPaC if: 1) the scope, timing, duration, or location of the Project changes (includes any project changes or amendments); 2) new information reveals the Project may impact (positively or negatively) federally listed species or designated critical habitat; or 3) a new species is listed, or critical habitat designated. If any of the above conditions

occurs, additional coordination with the Service should take place to ensure compliance with the Act.

If you have any questions regarding this letter or need further assistance, please contact the Pennsylvania Ecological Services Field Office and reference Project Code 2026-0073390 associated with this Project.

**Action Description**

You provided to IPaC the following name and description for the subject Action.

**1. Name**

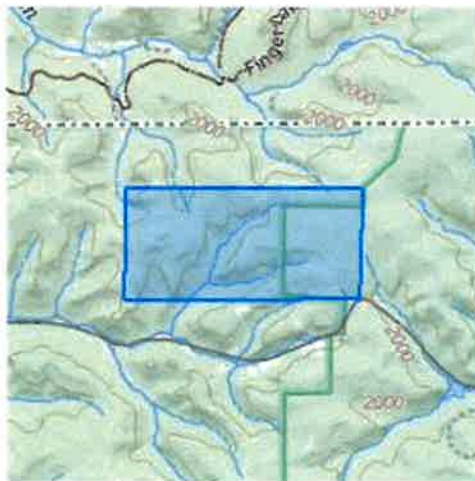
PHR Mallory Area

**2. Description**

The following description was provided for the project 'PHR Mallory Area':

Pennhills Resources, LLC is proposing to drill new oil/gas wells on the Mallory Area

The approximate location of the project can be viewed in Google Maps: <https://www.google.com/maps/@41.97793225,-78.78915963310799,14z>



## DETERMINATION KEY RESULT

Based on the information you provided, you have determined that the Proposed Action will have no effect on the species covered by this determination key. Therefore, no consultation with the U.S. Fish and Wildlife Service pursuant to Section 7(a)(2) of the Endangered Species Act of 1973 (87 Stat. 884, as amended 16 U.S.C. 1531 *et seq.*) is required for those species.

## QUALIFICATION INTERVIEW

1. Does the proposed project include, or is it reasonably certain to cause, intentional take of listed bats or any other listed species?

**Note:** Intentional take is defined as take that is the intended result of a project. Intentional take could refer to research, direct species management, surveys, and/or studies that include intentional handling/encountering, harassment, collection, or capturing of any individual of a federally listed threatened, endangered or proposed species?

*No*

2. Is the action area wholly within Zone 2 of the year-round active area for northern long-eared bat and/or tricolored bat?

**Automatically answered**

*No*

3. Does the action area intersect Zone 1 of the year-round active area for northern long-eared bat and/or tricolored bat?

**Automatically answered**

*No*

4. Does any component of the action involve leasing, construction or operation of wind turbines? Answer 'yes' if the activities considered are conducted with the intention of gathering survey information to inform the leasing, construction, or operation of wind turbines.

*No*

5. Does the proposed action involve solar energy facilities?

*No*

6. Is the proposed action authorized, permitted, licensed, funded, or being carried out by a Federal agency in whole or in part?

**Note for projects in Pennsylvania:** Projects requiring authorization under Section 404 of the Clean Water Act and/or Section 10 of the Rivers and Harbors Act would be considered as having a federal nexus. Since the U.S. Army Corps of Engineers (Corps) has issued the Pennsylvania State Programmatic General Permit (PASPGP), which may be verified by the PA Department of Environmental Protection or certain Conservation Districts, the need to receive a Corps authorization to perform the work under the PASPGP serves as a federal nexus. As such, if proposing to use the PASPGP, you would answer 'yes' to this question.

*No*

7. [Semantic] Is the action area located within 0.5 miles of a known bat hibernaculum or winter roost? Note: The map queried for this question contains proprietary information and cannot be displayed. If you need additional information, please contact your state wildlife agency.

**Automatically answered**

*No*

8. Does the action area contain any winter roosts or caves (or associated sinkholes, fissures, or other karst features), mines, rocky outcroppings, or tunnels that could provide habitat for hibernating bats?

*No*

9. Does the action area contain (1) talus or (2) anthropogenic or naturally formed rock shelters or crevices in rocky outcrops, rock faces or cliffs?

*No*

10. Will the action cause effects to a bridge?

**Note:** Covered bridges should be considered as bridges in this question.

*No*

11. Will the action result in effects to a culvert or tunnel at any time of year?

*No*

12. Are trees present within 1000 feet of the action area? **Note:** If there are trees within the action area that are of a sufficient size to be potential roosts for bats answer "Yes". If unsure, additional information defining suitable summer habitat for the northern long-eared bat and tricolored bat can be found in the USFWS' [Range-wide Indiana Bat and Northern long-eared bat Survey Guidelines](#).

*Yes*

13. Does the action include the intentional exclusion of bats from a building or building-like structure? **Note:** Exclusion is conducted to deny bats' entry or reentry into a building. To be effective and to avoid harming bats, it should be done according to established standards. If your action includes bat exclusion and you are unsure whether northern long-eared bats or tricolored bats are present, answer "Yes." Answer "No" if there are no signs of bat use in the building/structure. If unsure, contact your local Ecological Services Field Office to help assess whether northern long-eared bats or tricolored bats may be present. Contact a Nuisance Wildlife Control Operator (NWCO) for help in how to exclude bats from a structure safely without causing harm to the bats (to find a NWCO certified in bat standards, search the Internet using the search term "National Wildlife Control Operators Association bats"). Also see the White-Nose Syndrome Response Team's guide for bat control in structures.

*No*

14. Does the action involve removal, modification, or maintenance of a human-made building-like structure (barn, house, or other building) **known or suspected to contain roosting bats?**

*No*

15. Will the action cause construction of one or more new roads open to the public?

For federal actions, answer 'yes' when the construction or operation of these facilities is either (1) part of the federal action or (2) would not occur but for an action taken by a federal agency (federal permit, funding, etc.).

*No*

16. Will the action include or cause any construction or other activity that is reasonably certain to increase average night-time traffic permanently or temporarily on one or more existing roads? **Note:** For federal actions, answer 'yes' when the construction or operation of these facilities is either (1) part of the federal action or (2) would not occur but for an action taken by a federal agency (federal permit, funding, etc.).

*No*

17. Will the action include or cause any construction or other activity that is reasonably certain to increase the number of travel lanes on an existing thoroughfare?

For federal actions, answer 'yes' when the construction or operation of these facilities is either (1) part of the federal action or (2) would not occur but for an action taken by a federal agency (federal permit, funding, etc.).

*No*

18. Will the proposed Action involve the creation of a new water-borne contaminant source (e.g., leachate pond, pits containing chemicals that are not NSF/ANSI 60 compliant)?

**Note:** For information regarding NSF/ANSI 60 please visit <https://www.nsf.org/knowledge-library/nsf-ansi-standard-60-drinking-water-treatment-chemicals-health-effects>

*No*

19. Will the proposed action involve the creation of a new point source discharge from a facility other than a water treatment plant or storm water system?

*No*

20. Will the action include drilling or blasting?

*Yes*

21. Will the drilling or blasting produce noise or vibrations above existing background levels that will affect suitable summer habitat for northern long-eared bats and/or tricolored bats?

**Note:** Additional information defining suitable summer habitat for the northern long-eared bat and/or tricolored bat, can be found in the USFWS' [Range-wide Indiana Bat and Northern long-eared Bat Survey Guidelines](#).

*No*

22. Will the action involve military training (e.g., smoke operations, obscurant operations, exploding munitions, artillery fire, range use, helicopter or fixed wing aircraft use at night)?

*No*

23. Will the proposed action involve the use of herbicides or pesticides (e.g., fungicides, insecticides, or rodenticides)?

*No*

24. Will the action include or cause activities that are reasonably certain to cause chronic or intense nighttime noise (above current levels of ambient noise in the area) in suitable summer habitat for the northern long-eared bat or tricolored bat during the active season? Chronic noise is noise that is continuous or occurs repeatedly again and again for a long time. Sources of chronic or intense noise that could cause adverse effects to bats may include, but are not limited to: road traffic; trains; aircraft; industrial activities; gas compressor stations; loud music; crowds; oil and gas extraction; construction; and mining. **Note:** Additional information defining suitable summer habitat for the northern long-eared bat and tricolored bat can be found in the USFWS' [Range-wide Indiana Bat and Northern long-eared bat Survey Guidelines](#).

*No*

25. Does the action include, or is it reasonably certain to cause, the use of permanent or temporary artificial lighting within 1000 feet of suitable forested northern long-eared bat or tricolored bat roosting habitat? **Note:** Additional information defining suitable summer habitat for the northern long-eared bat and tricolored bat can be found in the USFWS' [Range-wide Indiana Bat and Northern long-eared bat Survey Guidelines](#).

*No*

26. Will the action include tree cutting or other means of knocking down or bringing down trees, tree topping, or tree trimming?

*No*

27. Will the proposed action result in the use of prescribed fire?

**Note:** If the prescribed fire action includes other activities than application of fire (e.g., tree cutting, fire line preparation) please consider impacts from those activities within the previous representative questions in the key. This set of questions only considers impacts from flame and smoke.

*No*

28. Does the action area intersect the northern long-eared bat species list area?

**Automatically answered**

*Yes*

29. [Semantic] Is the action area located within 0.5 miles of radius of an entrance/opening to any known NLEB hibernacula or winter roost? **Note:** The map queried for this question contains proprietary information and cannot be displayed. If you need additional information, please contact your State wildlife agency.

**Automatically answered**

*No*

30. [Semantic] Is the action area located within 0.25 miles of a culvert that is known to be occupied by northern long-eared or tricolored bats? **Note:** The map queried for this question contains proprietary information and cannot be displayed. If you need additional information, please contact your State wildlife agency.

**Automatically answered**

*No*

31. [Semantic] Is the action area located within 150 feet of a documented northern long-eared bat roost site?

**Note:** The map queried for this question contains proprietary information and cannot be displayed. If you need additional information, please contact your State wildlife agency. Have you contacted the appropriate agency to determine if your action is within 150 feet of any documented northern long-eared bat roosts?

**Note:** A document with links to Natural Heritage Inventory databases and other state-specific sources of information on the locations of northern long-eared bat roosts is available here. Location information for northern long-eared bat roosts is generally kept in state natural heritage inventory databases – the availability of this data varies by state. Many states provide online access to their data, either directly by providing maps or by providing the opportunity to make a data request. In some cases, to protect those resources, access to the information may be limited.

**Automatically answered**

*No*

32. Is suitable summer habitat for the northern long-eared bat present within 1000 feet of project activities? If unsure, answer "Yes." **Note:** Additional information defining suitable summer habitat for the northern long-eared bat and tricolored bat can be found in the USFWS' [Range-wide Indiana Bat and Northern long-eared bat Survey Guidelines](#)

*Yes*

33. Has a presence/probable absence summer bat survey targeting the northern long-eared bat following the Service's [Range-wide Indiana Bat and Northern Long-Eared Bat Survey Guidelines](#) been conducted within the project area?

*No*

34. Does the action area intersect the tricolored bat species list area?

**Automatically answered**

*Yes*

35. Is the action area located within 0.5-mile of radius of an entrance/opening to any known tricolored bat hibernacula or winter roost?

**Note:** The map queried for this question contains proprietary information and cannot be displayed. If you need additional information, please contact your state wildlife agency.

**Automatically answered**

*No*

36. [Semantic] Is the action area located within 0.25 miles of a culvert that is known to be occupied by northern long-eared or tricolored bats? **Note:** The map queried for this question contains proprietary information and cannot be displayed. If you need additional information, please contact your State wildlife agency.

**Automatically answered**

No

37. Is suitable summer habitat for the tricolored bat present within 1000 feet of project activities? (If unsure, answer ""Yes."" ) **Note:** If there are trees within the action area that may provide potential roosts for tricolored bats (e.g., clusters of leaves in live and dead deciduous trees, Spanish moss (*Tillandsia usneoides*), clusters of dead pine needles of large live pines) answer ""Yes."" For a complete definition of suitable summer habitat for the tricolored bat, please see the [Service's Range-wide Indiana Bat and Northern long-eared Bat Survey Guidelines](#).

Yes

38. Do you have any documents that you want to include with this submission?

No

# PROJECT QUESTIONNAIRE

## **IPAC USER CONTACT INFORMATION**

Agency: Private Entity

Name: Andrew Rosenberger

Address: 1059 Lafferty Lane

City: Bradford

State: PA

Zip: 16701

Email langsurveyingllc@gmail.com

Phone: 8143684139

--

*Andrew S. Rosenberger*

*Owner of Lang Surveying LLC*

*Professional Land Surveyor in PA and NY*

*Lang Surveying LLC*

1059 Lafferty Lane

Bradford, PA 16701

814-368-4139

--

*Andrew S. Rosenberger*

*Owner of Lang Surveying LLC*

*Professional Land Surveyor in PA and NY*

*Lang Surveying LLC*

1059 Lafferty Lane

Bradford, PA 16701

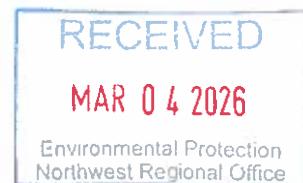
814-368-4139



DEP USE	
Auth No. <b>1561182</b>	APS No. <b>1157704</b>
Site No. <b>886593</b>	Facility No. <b>890491</b>
FIX Client No.	Sub-fac No. <b>1470951</b>

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

PROJECT IDENTIFICATION					
Well Operator <b>PENNHILLS RESOURCES, LLC</b>		DEP ID/OGO No. <b>306870</b>		U.S. Well No. (API No.) <b>083-57923</b>	
Address <b>PO BOX 426</b>			Well Farm Name <b>WT. 4339</b>		
City <b>MT. JEWETT</b>		State <b>PA</b>	Zip Code <b>16740</b>	Well No. <b>48</b>	Serial No.
Telephone No. <b>(814) 975-3009</b>		Fax No. <b>(814) 778-6874</b>		County <b>MCKEAN</b>	Municipality <b>FOSTER TWP.</b>
<p><b>Note: All submittals must include the following information:</b></p> <ol style="list-style-type: none"> <li>1) United States Geological Survey (USGS) 7.5-minute quadrangle map showing the location of the proposed alternative waste management practices</li> <li>2) Full size set of plan design drawings showing proposed facility dimensions and location relative to existing facilities</li> <li>3) A brief detailed project narrative describing the proposed project</li> </ol>					
<b>INTENDED ALTERNATIVE PRACTICE</b>			<i>Check the appropriate box and complete the applicable section of the form.</i>		
<input type="checkbox"/> For temporary containment of polluttional 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.					
<input checked="" type="checkbox"/> 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.					
<input checked="" type="checkbox"/> 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.					
<b>A. PITS AND TANKS FOR TEMPORARY CONTAINMENT</b>					
Complete this section if requesting approval of an alternative practice for temporary containment of polluttional substances and wastes from drilling, altering, or completing a well. See 25 Pa. Code § 78.56.					
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).					
<input type="checkbox"/> 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.					
<input checked="" type="checkbox"/> 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.					



Tech Due Date 04/04/2026  
bgr 03/04/2026

**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  <i>Stuart J. Morris</i>	Print or Type Signer's Name and Title  STUART J. MORRIS, CEO	Date  3/3/2024
---	--	----------------------

**DEP USE ONLY**

<input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied  DEP Representative: Brian Ayers	Conditions: <input type="checkbox"/> YES, see below or attached. <input type="checkbox"/> NO	Date  03.20.26
---	---	----------------------

Conditions: A site evaluation determined that this site is unsuited for the proposed Alternate Waste Management Practices. The operator may resubmit the Request for Approval of Alternate Waste Management Practices if they can demonstrate that shallow groundwater will not compromise the drill pit on this well site.



## **WT. 4339 – WELL #48**

### **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 1,200' from a stream, an unnamed tributary to North Branch Willow Creek. The pit is located more than 5,000' from any wetlands and more than 3,500' from an existing building or water supply. North Branch Willow Creek lies +/-5,500' west of any clearing limits. There aren't any wetlands or buildings within 3,500' 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 Cookport loam (CpD).

Historical records indicate fresh water will be encountered at a depth of 50-130'

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.

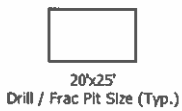
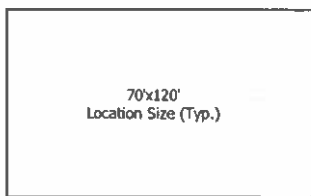
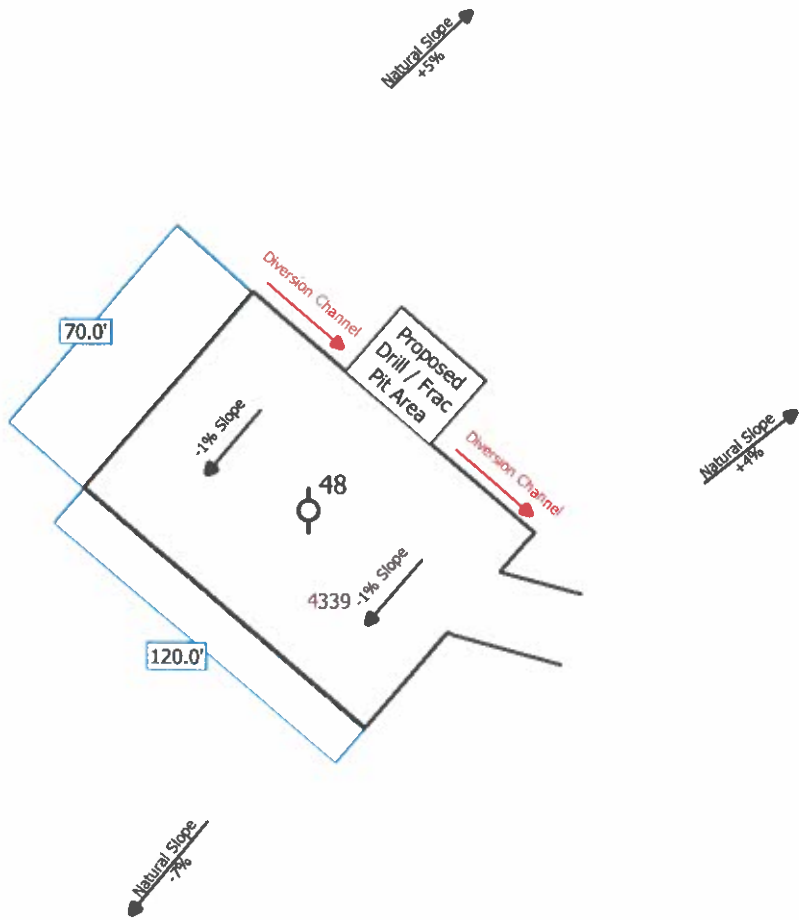
PH and conductivity will be tested and reported according to regulations.



**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.



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 4339 - Well 48		
Mallory Satterwhite		
County: McKean	Twp: Foster	Scale: PA
Date: 01/28/2026	Scale: Not to Scale	Dwn By: TPR

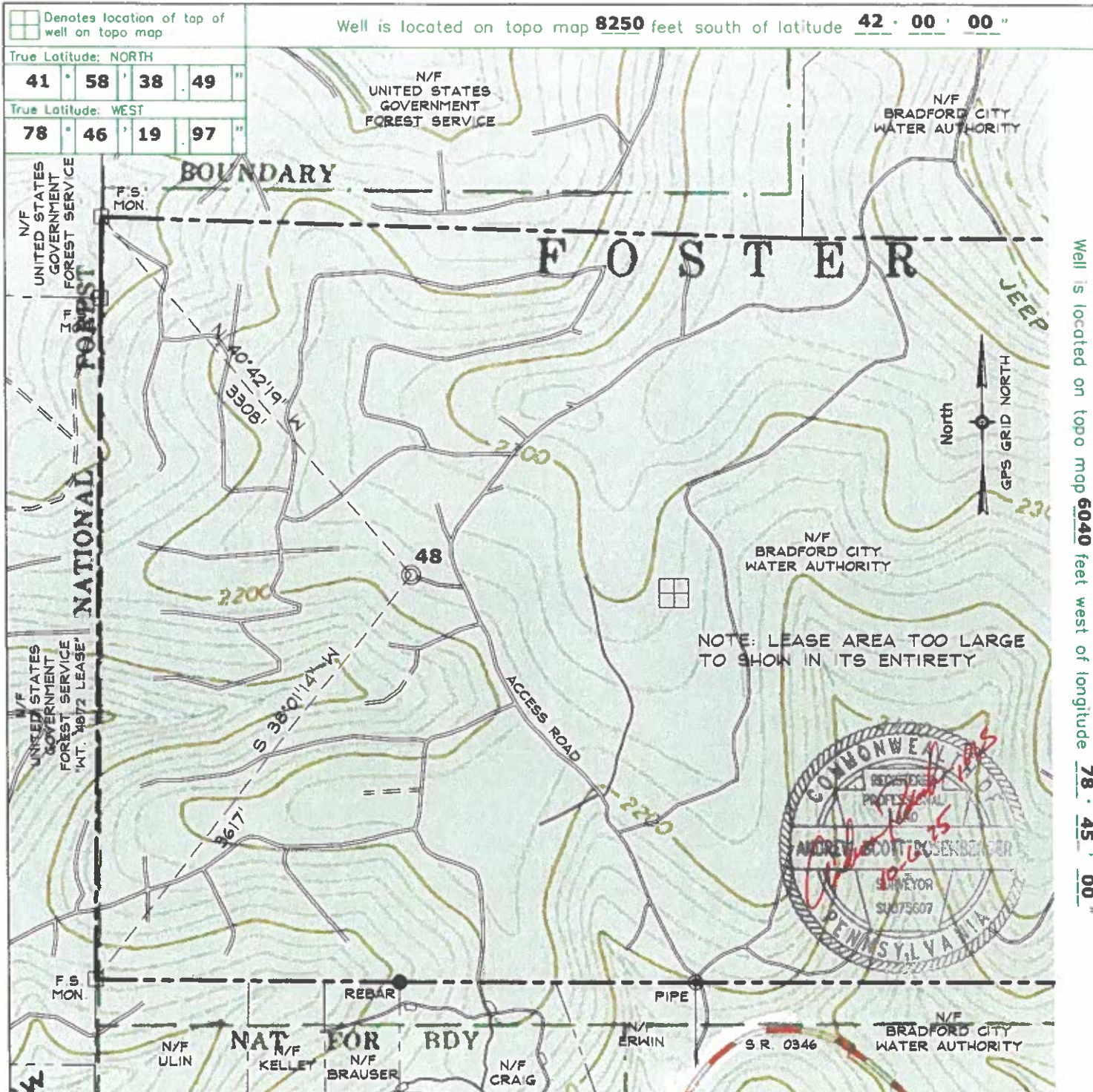




**WELL LOCATION PLAT**

PAGE 1 Surface Location

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



Well is located on topo map 6040 feet west of longitude 78 . 45 . 00 "

Applicant/Well Operator Name: <b>PENNHILLS RESOURCES, LLC</b>		DEP ID # <b>306870</b>	Well (Form) Name: <b>WT 4339</b>	Well #: <b>48</b>	Serial #:
Address: <b>P.O. BOX 426, MT. JEWETT, PA 16740</b>		County: <b>McKEAN</b>	Municipality: <b>FOSTER</b>	Well Type: <b>COMBINATION</b>	
911 address of well site: <b>N/A</b>		USGS 7½' Quadrangle Map Name: <b>STICKNEY, PA-NY</b>	Map Section: <b>3</b>	Surface Elevation: <b>2224</b> ft.	
Surveyor or Engineer: <b>ANDREW S. ROSENBERGER</b>	Phone #: <b>(814) 368-4139</b>	Dwg #: <b>06487.48</b>	Date: <b>10/6/25</b>	Scale: <b>1"=1000'</b>	Tract Acreage: <b>1200± AC.</b>
Lat. & Long Metadata Method: <b>SURVEY GRADE GPS</b>	Accuracy: <b>+/- 10</b> ft.	Datum: <b>NAD 83</b>	Elevation Metadata Method: <b>SURVEY GRADE GPS</b>	Accuracy: <b>+/-10</b> ft.	Datum: <b>NAVD 88</b>
				Survey Date: <b>10/25</b>	

## 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**.

<b>Applicant / Well Operator Name</b> PENNHILLS RESOURCES, LLC.	<b>DEP ID#</b> 306870	<b>Well (Farm) Name</b> WT 4339	<b>Well #</b> 48	<b>Serial #</b>
<b>Surface Landowner / Lessor:</b> BRADFORD CITY WATER AUTHORITY		<b>Angle &amp; Course of Deviation (Drilling):</b> NONE	<b>Anticipated True Vertical Depth Feet (TVD):</b> 1866'	<b>Anticipated Total Measured Depth Feet (TMD):</b> 1866'
<b>Target Formation(s):</b> TIONA		<b>Deepest Formation to be penetrated</b> BRADFORD 2ND	<b>Number of laterals:</b> 0	<b>Total footage to be drilled all laterals:</b> 0
<b>Surface Owner/Water Purveyor w/Water Supply within 1000'/3000'</b>		<b>Latitude Longitude of Water Supply</b>		
N/A				
<b>Municipality: where the well will be drilled, adjacent to the well, or within 3000 feet</b>		<b>Municipality: where the well will be drilled, adjacent to the well, or within 3000 feet</b>		
FOSTER TOWNSHIP				
OTTO TOWNSHIP				
KEATING TOWNSHIP				
BRADFORD TOWNSHIP		<b>Coal related parties</b>		
CORYDON TOWNSHIP				
CITY OF BRADFORD				