

From: [Hogue, Kate](#)
To: [Pennhills Info](#)
Cc: [Ayers, Brian](#)
Subject: 123-49448
Date: Thursday, August 20, 2026 2:14:00 PM
Attachments: [Auth 1579715 123-49448.pdf](#)
[image001.png](#)
[Well Permit Cover Letter \(conventional\) 8-17-26.pdf](#)

Operator,

The Department of Environmental Protection has completed the review of the application corresponding to the attached permit.

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

The cover letter for this permit 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 | Clerical Supervisor II
Department of Environmental Protection | District Oil and Gas Operations

Northwest District Office
230 Chestnut Street | Meadville, PA 16335
Office: 814.332.6868
Emergency: 800.541.2050
dep.pa.gov

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

WELL PERMIT

DEP USE ONLY	
Permittee's eFACTS ID 306870	Auth ID 1579715
Watershed Name	Quality

Permittee PENNHILLS RESOURCES LLC		OGO.# OGO-68600	Permit Number 37-123-49448-00-00	Date Issued 08/20/2026
Address P.O. BOX 426		Farm Name & Well Number WT 1072 8		Well Serial #
		Municipality Sheffield Twp	County Warren	
MT. JEWETT, PA 16740		7½' Quadrangle Name Sheffield		Map Section # 9
Phone (814) 975-3009	Project #		Latitude 41-38-3.0516	Longitude -79-1-45.8796
Surf Elev at Site 1639 feet	Anticipated Maximum TVD 2000 feet	Well Type OG	Offset distances referenced to NE corner of map section. South 11836 feet West 8040 feet	

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

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

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

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

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

Special Permit Conditions:

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

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.

This permit expires **08/20/2027** unless drilling is commenced on or before that date and prosecuted with due diligence.

Thomas Donohue 8/20/26
Subsurface Permits Environmental Program Manager

ERIC WYMER

PO BOX 669
KNOX, PA 16232

814-573-3588

Oil & Gas Inspector

Address

Phone Number



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

RECEIVED

AUG 10 2026

Environmental Protection
District Regional Office

PERMIT APPLICATION TO DRILL AND OPERATE A CONVENTIONAL WELL

Notes OK #16826 \$500		DEP USE ONLY	
OGC #	68600	Objection Date - Do not issue before:	123-49448
Client Id	306870	8/10/2026	API #s37- - - - -
Bond #	16332	Date Approved:	and - - - - -
		SGP 8/14/26	Watershed Name:
			Designation: ☐ HQ ☐ EV
NC	C: dg 8/11/26 G: SAZ 8/12/2026	Special Cond.	FRAC/STIM 24 and Zoning
PNDI 4/9/26	INV:		
	APS #1168311 Auth Id 1579715	Site Id	890272
		PF Id	894253
		SF Id	1485774

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 1072	Well # 8	
Address P.O. BOX 426		LAT 41°38' 03.05"	NAD 83	Project Number	Serial #
		LONG - 79°01' 45.88"			
City MT. JEWETT	State PA	Zip 16740	Municipality Name/ City, Borough, Township SHEFFIELD Township	County WARREN	
Phone 814-975-3009	Fax 814-778-6874	Email s.morris@pennhillsresources.co	USGS 7.5 min. quadrangle map SHEFFIELD, PA	Section 9	

☐ Check if this is a new address		24/7 Emergency Phone contact number 814-598-0237	911 address of well site (if available) N/A
Freshwater Impoundment Name/ Identification N/A	Centralized Impoundment Name/ Identification N/A	Well Pad Name/Identification N/A	Borrow Area Name/Identification COMMERCIAL PIT
Surface Elev 1639'	Deepest Formation to be penetrated: BRADFORD GROUP	Anticipated TVD 2000'	PERMIT TYPE Check applicable. Application is to: ☒ Drill a new ☐ Re-permit expired permit ☐ Deepen well ☐ Redrill wellbore ☐ Alter well ☐ Other (specify)
Target Formation(s) proposed for production BRADFORD GROUP	Anticipated Target Top/Bottom TVD 1450' 1800'		
Number of wellbore laterals proposed under this application 0 Total feet of wellbore to be drilled under this application 2000 Ft. If applying for a permit to rework an existing well not registered or permitted, check this box ☐ and enter date drilled, if known: (see instructions)			TYPE OF WELL Check applicable. ☐ Gas ☐ Oil ☒ Comb. (gas & oil/condensate) ☐ Injection, recovery ☐ Injection, disposal ☐ Coalbed Methane ☐ Gas Storage ☐ Other (specify)
PNDI Attached: ☒ Any threatened or endangered "hit" must include a copy of the clearance letter from the applicable agency(ies). Application submitted as: Coal well: ☐ Attach Coal Module CBM well ☐ Attach Coal Module Non coal well ☒ Attach justification.			APPLICATION FEE Check applicable. ☒ Conventional ☐ \$200 (Home Use Well) Total Application Fee \$ 500 Bond Agreement Id

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



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

WELL LOCATION PLAT

PAGE 1 Surface Location

Auth ID # 1579715 SAZ 8/12/2026
Permit # 123-49448
Project #:

☐ Denotes location of top of well on topo map.		Well is located on topo map 11836 feet south of latitude 41° 40' 00"	
True Latitude: NORTH			
41° 38' 03" 05"			
True Latitude: WEST			
79° 01' 45" 88"			

Well is located on topo map **8040** feet west of longitude **79° 00' 00"**

Applicant/Well Operator Name: PENNHILLS RESOURCES, LLC		DEP ID # 306870	Well (Farm) Name: WT 1072	Well #: 8	Serial #:
Address: P.O. BOX 426, MT. JEWETT, PA 16740		County: WARREN	Municipality: SHEFFIELD	Well Type: COMBINATION	
911 address of well site: N/A		USGS 7½' Quadrangle Map Name: SHEFFIELD, PA	Map Section: 9	Surface Elevation: 1639 ft.	
Surveyor or Engineer: ANDREW S. ROSENBERGER	Phone #: (814) 368-4139	Dwg #: 06560.8	Date: 4/16/26	Scale: 1"=800'	Tract Acreage: 230± AC.
Lat. & Long Metadata Method: SURVEY GRADE GPS	Accuracy: +/- 10 ft.	Datum: NAD 83	Elevation Metadata Method: SURVEY GRADE GPS	Accuracy: +/-10 ft.	Datum: NAVD 88
				Survey Date: 4/26	



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

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

Farm Name - Well # WT 1072 WELL #8	
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. Notification: Signature below name indicates the party's acknowledgement of receipt of the well location plat and serves as proof of notification		Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies <1000'	Municipalities	Notification Note the means and attach proof.			
						Certified Mail Dates		Address Affidavit	Written Consent
						Sent	Return Receipt		
Print Name: ALLEGHENY NATIONAL FOREST Signature	Address: 4 FARM COLONY DRIVE WARREN, PA 16365	X				5/13/26	5/18/26		
Print Name: SHEFFIELD TOWNSHIP Signature	Address: P.O. BOX 784 SHEFFIELD, PA 16347				X	4/17/26	4/20/26		
Print Name: WETMORE TOWNSHIP Signature	Address: 318 SPRING STREET KANE, PA 16735				X	4/17/26	4/28/26		
Print Name: HAMILTON TOWNSHIP Signature	Address: P.O. BOX 23 LUDLOW, PA 16333				X	4/17/26	4/24/26		
Print Name: MEAD TOWNSHIP Signature	Address: 119 MEAD BLVD CLARENDON, PA 16313				X	4/17/26	4/20/26		

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
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐



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

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

Farm Name - Well # WT 1072 WELL #8	
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. Notification: Signature below name indicates the party's acknowledgement of receipt of the well location plat and serves as proof of notification		Surface Landowner	Gas Storage Operator	Surface Landowners & Water Purveyors with water supplies <1000'	Municipalities	Notification Note the means and attach proof.			
						Certified Mail Dates		Address Affidavit	Written Consent
						Sent	Return Receipt		
Print Name: CHERRY GROVE TOWNSHIP	Address: 6039 CHERRY GROVE ROAD CLARENDON, PA 16313				X	4/17/26	4/20/26		
Signature									
Print Name: HOWE TOWNSHIP	Address: 7947 ROUTE 666 SHEFFIELD, PA 16347				X	4/17/26	4/21/26		
Signature									
Print Name: HIGHLAND TOWNSHIP	Address: P.O. BOX 505 JAMES CITY, PA 16734				X	4/17/26	4/28/26		
Signature									
Print Name:	Address:								
Signature									
Print Name:	Address:								
Signature									

Record of Written Consent

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

Print and Sign Name:	Address:	Date:	Surface Owner	Water Well within 200 feet	Building within 200 feet
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐

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Warren, PA 16366

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Certified Mail Fee \$5.30

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

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$12.17

Total Postage and \$11.87

Sent To

Street and Apt. # ALLEGHENY NATIONAL FOREST
4 FARM COLONY DRIVE
City, State, ZIP+4 WARREN, PA 16365

PS Form 3800, WT 1072 1-4,6-8

Postmark Here
MAY 13 2026
BRADFORD PA 16701
USPS

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.
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1. Article Addressed to:

ALLEGHENY NATIONAL FOREST
4 FARM COLONY DRIVE
WARREN, PA 16365



9590 9402 8267 3094 9211 73

2. Article Number (Transfer from service label)

7018 0680 0001 1304 1066

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Shoshanna Ochocki ☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
Shoshanna Ochocki 5/18/26

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™

☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)

WT 1072 1-4,6-8 Domestic Return Receipt

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Sheffield, PA 16347

OFFICIAL USE

Certified Mail Fee \$5.30

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

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$12.17

Total Postage and \$11.87

Sent To

Street and Apt. No. Howe Township
7947 Route 666
City, State, ZIP+4 Sheffield, PA 16347

PS Form 3800, A WT 1072 1,2-4,6-8

Postmark Here
APR 17 2026
BRADFORD PA 16701
USPS

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

Howe Township
7947 Route 666
Sheffield, PA 16347



9590 9402 8267 3094 9213 19

2. Article Number (Transfer from service label)

7018 0680 0001 1304 0724

PS Form 3811, July 2020 PSN 7530-02-000-9053 WT 1072 1,2-4,6-8

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Jessica More ☐ Agent
☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
Jessica More 4/21/26

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☐ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Signature Confirmation™

☐ Collect on Delivery ☐ Signature Confirmation Restricted Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

7018 0680 0001 1304 0717

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

☐ Return Receipt (hardcopy)	\$	00.00
☐ Return Receipt (electronic)	\$	00.00
☐ Certified Mail Restricted Delivery	\$	00.00
☐ Adult Signature Required	\$	00.00
☐ Adult Signature Restricted Delivery	\$	00.00

Postage \$2.17

Total Postage and Fees \$7.47

Sent To Highland Township

Street and Apt. No. P.O. Box 505

City, State, Zip+4 James City, PA 16734

PS Form 3800, WT 1072 1,2-4,6-8

BRADFORD PA 16701

Postmark Here
APR 17 2020
04/17/2020
USPS

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1. Article Addressed to:

Highland Township
P O Box 505
James City, PA 16734



9590 9402 8267 3094 9213 02

2. Article Number (Transfer from service label)

7018 0680 0001 1304 0717

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
X *Lloyd Halpern*

B. Received by (Printed Name) *Lloyd Halpern* C. Date of Delivery *4/28/20*

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

3. Service Type

☐ Adult Signature	☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery	☐ Registered Mail™
☐ Certified Mail®	☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery	☐ Signature Confirmation™
☐ Collect on Delivery	☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery Restricted Delivery	

Insured Mail (over \$500)

Domestic Return Receipt

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Certified Mail Fee \$5.30

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

☐ Return Receipt (hardcopy)	\$	00.00
☐ Return Receipt (electronic)	\$	00.00
☐ Certified Mail Restricted Delivery	\$	00.00
☐ Adult Signature Required	\$	00.00
☐ Adult Signature Restricted Delivery	\$	00.00

Postage \$2.17

Total Postage and Fees \$7.47

Sent To Sheffield Township

Street and Apt. P.O. Box 784

City, State, Zip+4 Sheffield, PA 16347

PS Form 3800, WT 1072 1,2-4,6-8

BRADFORD PA 16701

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04/17/2020
USPS

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

1. Article Addressed to:

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



9590 9402 8267 3094 9213 40

2. Article Number (Transfer from service label)

7018 0680 0001 1304 0748

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
X *Caren Schwader*

B. Received by (Printed Name) *Caren Schwader* C. Date of Delivery *4/23/20*

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

3. Service Type

☐ Adult Signature	☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery	☐ Registered Mail™
☐ Certified Mail®	☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery	☐ Signature Confirmation™
☐ Collect on Delivery	☐ Signature Confirmation Restricted Delivery
☐ Collect on Delivery Restricted Delivery	

Insured Mail (over \$500)

Domestic Return Receipt

WT 1072 1,2-4,6-8

7018 0680 0001 1304 0762

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Certified Mail Fee \$5.00

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

☐ Return Receipt (hardcopy)	\$	
☐ Return Receipt (electronic)	\$	
☐ Certified Mail Restricted Delivery	\$	
☐ Adult Signature Required	\$	
☐ Adult Signature Restricted Delivery	\$	

Postage \$12.17

Total Postage and Fee \$17.17

Sent To

Street and Apt. No., b

City, State, ZIP+4®

CHERRY GROVE TOWNSHIP
6039 CHERRY GROVE ROAD
CLARENDON, PA 16313

PS Form 3800, Apr 10 72 1, 2-4, 6-8

BRADFORD PA 16701
Postmark
APR 17 2026
USPS

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:

CHERRY GROVE TOWNSHIP
6039 CHERRY GROVE ROAD
CLARENDON, PA 16313



9590 9402 8267 3094 9212 89

2. Article Number (Transfer from service label)

7018 0680 0001 1304 0762

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Margie Ague*

☒ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

4-20

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

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Signature Confirmation™

☒ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7018 0680 0001 1304 0731

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OFFICIAL USE

Certified Mail Fee \$5.00

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

☐ Return Receipt (hardcopy)	\$	
☐ Return Receipt (electronic)	\$	
☐ Certified Mail Restricted Delivery	\$	
☐ Adult Signature Required	\$	
☐ Adult Signature Restricted Delivery	\$	

Postage \$12.17

Total Postage and Fee \$17.17

Sent To

Street and Apt. No.

City, State, ZIP+4®

MEAD TOWNSHIP
119 MEAD BLVD.
CLARENDON, PA 16313

PS Form 3800, Apr 10 72 1, 2-4, 6-8

BRADFORD PA 16701
Postmark
APR 17 2026
USPS

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

MEAD TOWNSHIP
119 MEAD BLVD.
CLARENDON, PA 16313



9590 9402 8267 3094 9213 26

2. Article Number (Transfer from service label)

7018 0680 0001 1304 0731

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Margie Ague*

☒ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

4-20

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

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7018 0680 0001 1304 2513

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OFFICIAL USE

Ludlow, PA 16333

Certified Mail Fee \$15.30

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

☐ Return Receipt (hardcopy)	\$0.00
☐ Return Receipt (electronic)	\$0.00
☐ Certified Mail Restricted Delivery	\$0.00
☐ Adult Signature Required	\$0.00
☐ Adult Signature Restricted Delivery	\$0.00

Postage \$42.17

Total Postage and Certified Mail Fee \$57.47

Sent To Hamilton Township

Street and Apt. N P.O. Box 23

City, State, ZIP+4 Ludlow, PA 16333

PS Form 3800, WT 1072 1,2-4,6-8

Postmark Here
APR 17 2026
BRADFORD PA 16701
USPS

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

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



9590 9402 8267 3094 9212 96

2. Article Number (Transfer from service label)

7018 0680 0001 1304 2513

PS Form 3811, July 2020 PSN 7530-02-000-9053 WT 1072 1,2-4,6-8

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Betsy Davidson* C. Date of Delivery *4-24-26*

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

3. Service Type

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

Domestic Return Receipt

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

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

OFFICIAL USE

Kane, PA 16735

Certified Mail Fee \$15.30

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

☐ Return Receipt (hardcopy)	\$0.00
☐ Return Receipt (electronic)	\$0.00
☐ Certified Mail Restricted Delivery	\$0.00
☐ Adult Signature Required	\$0.00
☐ Adult Signature Restricted Delivery	\$0.00

Postage \$42.17

Total Postage and Certified Mail Fee \$57.47

Sent To Wetmore Township

Street and Apt. 318 Spring Street

City, State, ZIP Kane, PA 16735

PS Form 3800, WT 1072 1,2-4,6-8

Postmark Here
APR 17 2026
BRADFORD PA 16701
USPS

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Wetmore Township
318 Spring Street
Kane, PA 16735



9590 9402 8267 3094 9213 33

2. Article Number (Transfer from service label)

7018 0680 0001 1304 0755

PS Form 3811, July 2020 PSN 7530-02-000-9053 WT 1072 1,2-4,6-8

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Jody Binkley* C. Date of Delivery *4-28-26*

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

3. Service Type

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

Domestic Return Receipt

1. PROJECT INFORMATION

Project Name: Henry Mills Area

Date of Review: 4/9/2026 09:39:54 AM

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

Project Area: 158.96 acres

County(s): Warren

Township/Municipality(s): Sheffield Township

ZIP Code:

Quadrangle Name(s): SHEFFIELD

Watersheds HUC 8: Middle Allegheny-Tionesta

Watersheds HUC 12: Lower Sheriff Run-Tionesta Creek; South Branch Tionesta Creek-Tionesta Creek

Decimal Degrees: 41.637100, -79.029488

Degrees Minutes Seconds: 41° 38' 13.5584" N, 79° 1' 46.1561" W

2. SEARCH RESULTS

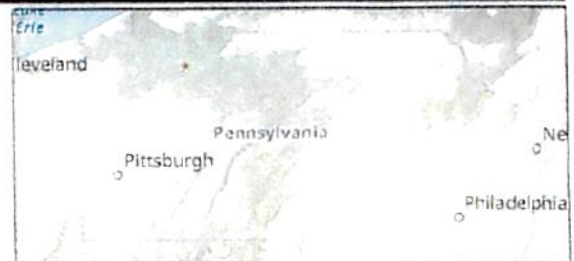
Agency	Results	Response
PA Game Commission	Conservation Measure	No Further Review Required, See Agency Comments
PA Department of Conservation and Natural Resources	No Known Impact	No Further Review Required
PA Fish and Boat Commission	No Known Impact	No Further Review Required
U.S. Fish and Wildlife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

Pennsylvania Natural Diversity Inventory (PNDI) records indicate that while threatened and endangered and/or special concern species and resources are in the project vicinity and that recommended Conservation Measures should be implemented in their entirety to avoid and minimize impacts to these species, no further coordination is required with the jurisdictional agencies. If a DEP permit is required for this project, DEP has the discretion to incorporate one or more Conservation Measures into its permit. This response does not reflect potential agency concerns regarding potential impacts to other ecological resources, such as wetlands.

Henry Mills Area

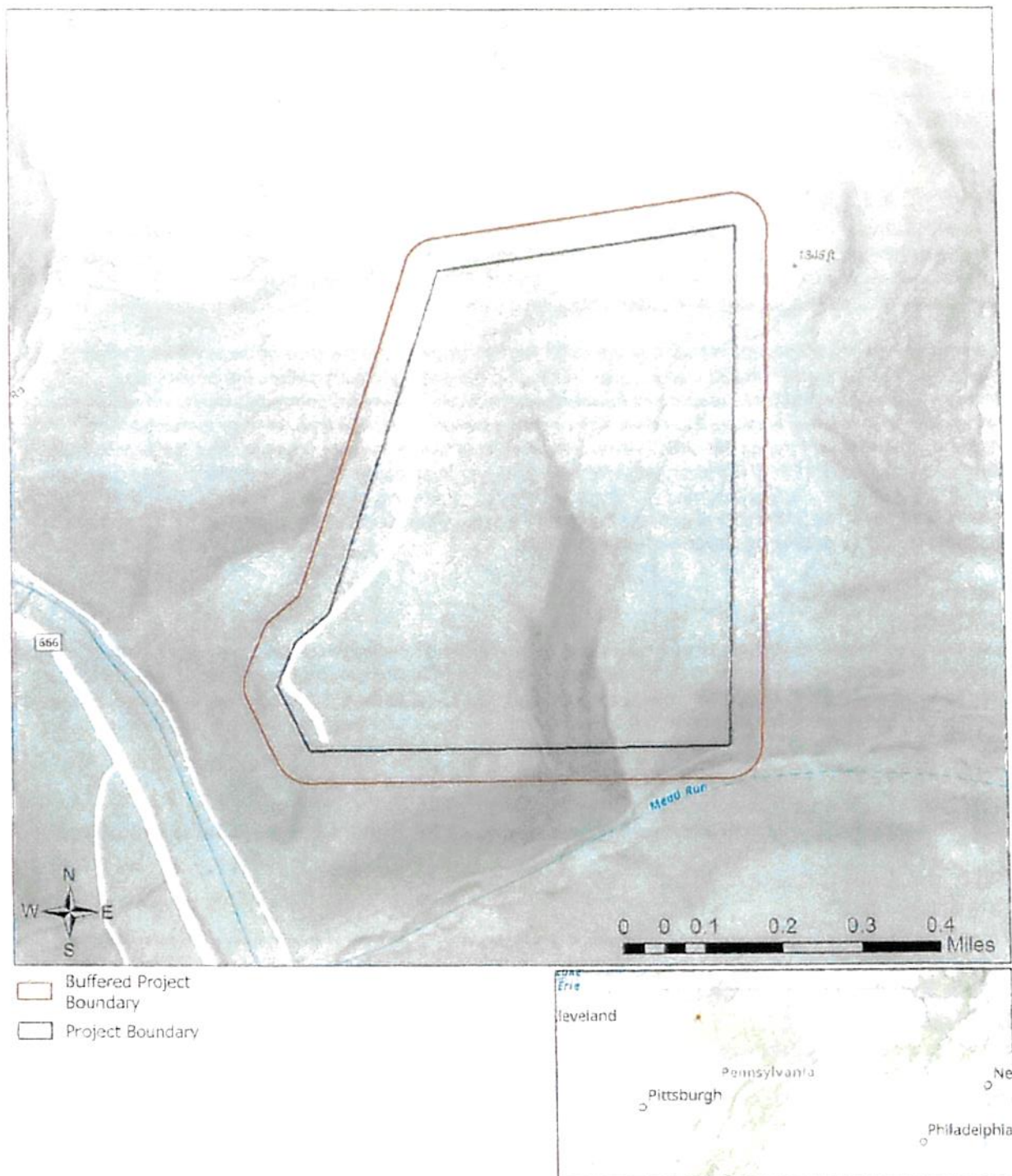


-  Buffered Project Boundary
-  Project Boundary



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

Henry Mills Area



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

RESPONSE TO QUESTION(S) ASKED

Q1: Will the action include disturbance to trees such as tree cutting (or other means of knocking down, or bringing down trees, tree topping, or tree trimming), pesticide/herbicide application or prescribed fire?

Your answer is: No

Q2: Does the action area contain any caves (or associated sinkholes, fissures, or other karst features), mines, rocky outcroppings, culverts, or tunnels that could provide habitat for hibernating bats?

Your answer is: No

3. AGENCY COMMENTS

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

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

PA Game Commission

RESPONSE:

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

PA Department of Conservation and Natural Resources

RESPONSE:

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

PA Fish and Boat Commission

RESPONSE:

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

U.S. Fish and Wildlife Service

RESPONSE:

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

4. DEP INFORMATION

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

5. ADDITIONAL INFORMATION

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

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

6. AGENCY CONTACT INFORMATION

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

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

U.S. Fish and Wildlife Service
Pennsylvania Field Office
Endangered Species Section
110 Radnor Rd, Suite 101
State College, PA 16801
Email: IR1_ESPenn@fws.gov
NO Faxes Please

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

7. PROJECT CONTACT INFORMATION

Name: Thomas Rich
Company/Business Name: Pennhills Resources LLC
Address: PO Box 426
City, State, Zip: MT Jewett PA 16740
Phone: (814) 975-3009 Fax: (814) 778-6874
Email: t.rich@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.

Thomas P Rich
applicant/project proponent signature

4-9-26
date

From: [Andrew Rosenberger](#)
To: [Zeno, Sally](#)
Subject: [External] Re: Pennhills Resources, LLC WT 1072 Well #8 PNDI Clarification
Date: Thursday, August 13, 2026 7:44:27 AM
Attachments: [image001.png](#)
[image002.png](#)

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 Phish button](#) in Outlook.

Good morning Sally,

I appreciate you reviewing the permit application for this well. The area of this project was recently logged by the landowner so there shouldn't be any tree removal or disturbance for this well pad or road.

Please let me know if you have any other questions. Thank you again for reviewing this application, Andrew

On Wed, Aug 12, 2026 at 2:46 PM Zeno, Sally <szeno@pa.gov> wrote:

Good afternoon,

I am reviewing the Pennhills Resources, LLC WT 1072 Well #8 application. The answer to the PNDI Page 4, "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?", has been answered "No". The aerial imagery shows the well is located in a forested area and the access road is proposed and not existing. Please provide an explanation as to why this would be answered as "No". I have included a snip of the aerial imagery from Google Earth that includes the proposed well site.



Sally A. Zeno, G.I.T. | Geoscientist

Department of Environmental Protection | District Oil & Gas Operations

Northwest District Office

230 Chestnut Street | Meadville, PA 16335

Office: 814-332-6198

Fax: 814-332-6121

dep.pa.gov

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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



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 1072	8
Address P.O. BOX 426		Project No. (if previously assigned)		
City MT. JEWETT	State PA	Zip Code 16740	County WARREN	Municipality SHEFFIELD
Phone No. 8149753009	Fax No. 8147786874	Latitude N 41 ° 38 ' 03.05 "	Longitude W 79 ° 01 ' 45.88 "	
1. Will the well be located in or within 200 ft. of a publicly owned park, forest, gameland, designated wildlife area, or Natural National Landmark?			☒ Yes ☐ No	
2. Will the well be located within the corridor of a state or national scenic river?			☐ Yes ☒ No	
3. If answering "Yes" to questions 1 or 2, name the public resource(s). ALLEGHENY NATIONAL FOREST				
List the name, address, and phone number of the person responsible for management of the public resource. 4 FARM COLONY DRIVE, WARREN, PA 16365				
Must the administrator of the public resource approve or otherwise authorize the proposed well, well site, access road, or gathering pipeline?			☐ Yes ☒ No	
Has the approval or authorization been received?			☐ Yes ☐ No	
4. Has the search of the proposed well location against the Pennsylvania Natural Diversity Inventory (PNDI), or any other evaluation, identified a potential conflict with a species of special concern?			☒ Yes ☐ No	
If "Yes", provide PNDI Search Number <u>834538</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. PENNSYLVANIA GAME COMMISSION				
5. Will the well be located within 200 ft. of any historical or archaeological sites listed as national or state historic places?			☐ Yes ☒ No	
6. If the proposed well is an unconventional well, will the well be located within 1000 ft. of water wells, surface water intakes, reservoirs, or other water supply extraction points used by a water purveyor?			☐ Yes ☒ No	
7. If the answer to questions 1, 2, 4, 5, or 6 is "YES", describe in detail the coordination with applicable resource agencies, the potential impacts to any public resource identified above, if any, and the additional measures proposed to avoid, minimize, or otherwise mitigate the impacts to public resources. There was a conservation measure noted for the PA Game Commission. No potential impacts were found as part of our search. An E&S plan was prepared as part of this project and was reviewed by the Allegheny National Forest.				

*Pennhills Resources, LLC
WT 1072 Lease*

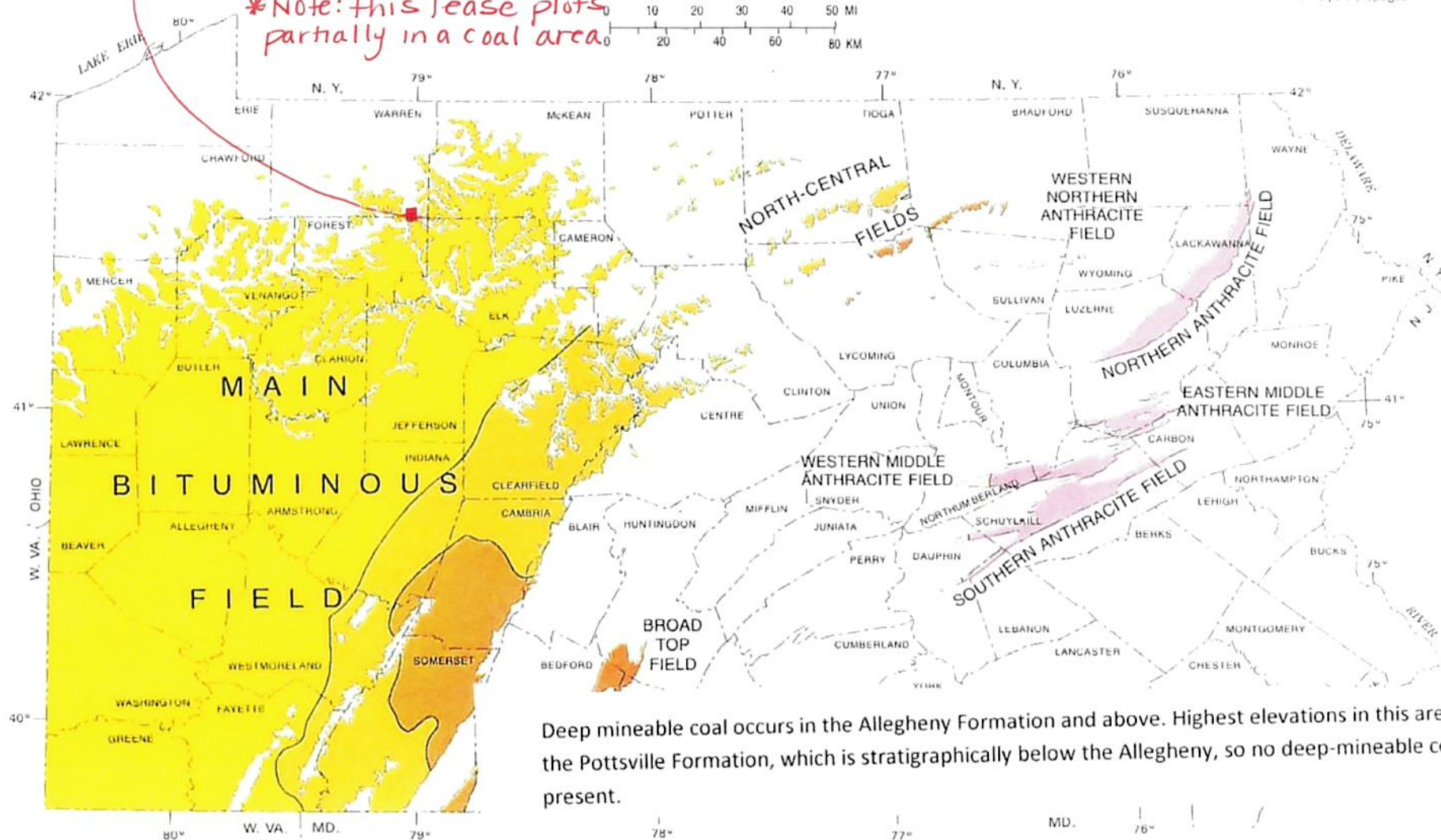
DISTRIBUTION OF PENNSYLVANIA COALS

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

SCALE 1:2,000,000

10 20 30 40 50 MI
0 20 40 60 80 KM

**Note: this lease plots
partially in a coal area*



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

EXPLANATION

BITUMINOUS FIELDS



ANTHRACITE FIELDS





Pennhills Resources, LLC
WT 1072 Lease

Coal Justification: WT 1072 8

Pennhills Resources Proposed Wells:	WT 1072 8
Driller's Logs:	37-123-29988-00-00
No coal noted on driller's log.	
No coal thickness greater than 28" thick encountered.	
The depth of the Allegheny formation is less than 100' and therefore would be considered to be non-coal due to insufficient overburden.	
No coal noted on driller's logs within 1 sq. mile area.	

37-123-29988-00-00

FORMATIONS						
NAME	TOP	BOTTOM	GAS AT	OIL AT	WATER AT (FRESH OR SALT WATER)	SOURCE OF DATA
Mud	0'	38'				Drillers Log
Grey, Brown Sand & Shale	38'	74'				" "
Grey Sand & Shale	74'	173'				" "
Brown Sand	173'	181'				" "
Brown, Gray Sand & Shale	181'	251'				" "
Grey Sand & Shale	251'	529'				" "
Red Rock	529'	543'				Electric Log
Sand & Shale	543'	717'				" "
Shale	717'	771'				" "
Sand & Shale	771'	839'				" "
Shale	839'	967'				" "
Sand & Shale	967'	1522'				" "
Sand-Balltown	1522'	1542'		1524'		" "
Shale	1542'	1630'				" "
Grey Sand-Cherry Grove	1630'	1701'		1632'		" "
Mixed Sand & Shale	1701'	1814'				" "
Sand-Cooper	1814'	1851'		1825'		" "
Mixed Sand & Shale	1851'	1960'				" "
Log T. D.		1960'				

