



August 24, 2026

Sent via email to: cdb195@gmail.com
Clint & Stacey Badowski

Dear Operator:

A permit application to adopt an oil or gas well was received on August 11, 2026. Pursuant to Section 3211(a) and (l) of the 2012 Oil and Gas Act., a person who proposes to conduct abandoned or orphan well operations shall first obtain a permit to operate such a well.

This well adoption permit requires the new owner/operator to comply with all applicable statutes and regulations including the responsibility to properly plug the well upon abandonment. Pursuant to the notifications requirements of Section 3211(b.2) of 58 Pa. C.S. 3201-3274 ("2012 Oil & Gas Act"), you are hereby notified of both statutory and regulator obligations to properly plug any adopted well upon abandonment as noted on the Permit Application to Adopt an Oil or Gas Well.

As an operator of wells, you are responsible for submitting annual production reports pursuant to 25 Pa. Code §78.121 and mechanical integrity information pursuant to 25 Pa. Code §78.88. Please be advised that the Department will continue to monitor production data and mechanical integrity for all wells in your well inventory.

Please review the well inventory to verify that all adopted wells are listed.
<https://www.depgreenport.state.pa.us/ReportExtracts/OG/OilGasWellInventoryReport>

Greenport registration must be completed and the information can be found at:

<http://www.depgreenport.state.pa.us/elibrary/GetFolder?FolderID=3091>

http://files.dep.state.pa.us/OilGas/BOGM/BOGMPortalFiles/OilGasReports/Greenport/Oil_and_Gas_Operator_and_Electronic_Filing_Administrator.pdf

Any person aggrieved by this action may appeal the action to the Environmental Hearing Board (Board) pursuant to Section 4 of the Environmental Hearing Board Act, 35 P.S. § 7514, and the Administrative Agency Law, 2 Pa.C.S. Chapter 5A. The Board's address is:

Environmental Hearing Board
Suite 310 Piatt Place
301 5th Avenue
Pittsburgh, PA 15222

TDD users may contact the Environmental Hearing Board through the Pennsylvania Relay Service, 717-787-3483.

Appeals must be filed with the Board within 30 days of receipt of notice of this action unless the appropriate statute provides a different time. This paragraph does not, in and of itself, create any right of appeal beyond that permitted by applicable statutes and decisional law.

A Notice of Appeal form and the Board's rules of practice and procedure may be obtained online at www.ehb.pa.gov or by contacting the Secretary to the Board at 717.787.3483. The Notice of Appeal form and the Board's rules are also available in braille and on audiotape from the Secretary to the Board.

IMPORTANT LEGAL RIGHTS ARE AT STAKE. YOU SHOULD SHOW THIS DOCUMENT TO A LAWYER AT ONCE. IF YOU CANNOT AFFORD A LAWYER, YOU MAY QUALIFY FOR FREE PRO BONO REPRESENTATION. CALL THE SECRETARY TO THE BOARD AT 717.787.3483 FOR MORE INFORMATION. YOU DO NOT NEED A LAWYER TO FILE A NOTICE OF APPEAL WITH THE BOARD.

IF YOU WANT TO CHALLENGE THIS ACTION, YOUR APPEAL MUST BE FILED WITH AND RECEIVED BY THE BOARD WITHIN 30 DAYS OF RECEIPT OF NOTICE OF THIS ACTION.

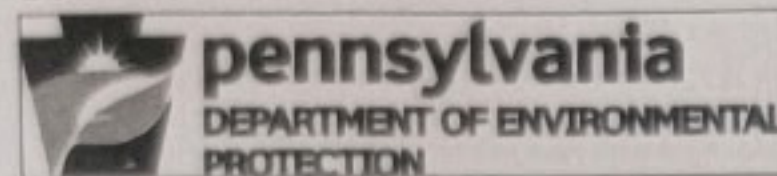
If there are questions or discrepancies contact the Oil & Gas Inspector Kyle Thomas at 814.671.1316 or kylethomas@pa.gov.

Sincerely,

Kate Hogue

Program Support
Northwest Regional Office

cc: Joseph Gaboff
Andy Klinger
Operator with application
OGI/OGIS
Environmental Group Manager
File



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

Electronically Received 8/11/2026 kh

049-25518
Client # 401609
Site # 889295
Auth # 1579719

PERMIT APPLICATION TO ADOPT AN OIL OR GAS WELL

A. APPLICANT INFORMATION																																																										
Applicant Name <u>Clint D Badowski / Stacey A. Badowski</u>										Applicant Notification Pursuant to the notification requirements of Section 3211(b.2) of 58 Pa. C.S. Sections 3201-3274 ("2012 Oil and Gas Act"), the applicant is hereby notified of both statutory and regulatory obligations to properly plug any adopted well upon abandonment.																																																
Address <u>2976 Clark Road</u>				DEP ID / OGO No. <u>13321</u>																																																						
City <u>ERIE</u>		State <u>PA</u>		Zip Code <u>16510</u>		Project No. (If previously assigned by DEP)																																																				
Telephone No. <u>570-419-7178</u>				Fax No.																																																						
B. WELL INFORMATION																																																										
Group wells by county and use a separate form to list wells in each different county.																																																										
US Well No. (API No.)	County	Municipality	Well (Farm) Name	Well No.	Serial No.	Date Drilled	Well Type	Total Depth	Quad	Section	Was Well Involved in Hydraulic Fracturing Communication Incident/Evidence of Integrity Failure?	Latitude (DD)	Longitude (DD)																																													
<u>04-26618</u>	<u>ERIE</u>	<u>Harbor Creek</u>	<u>2976 Clark Road</u>	<u>1</u>			<u>gas</u>					<u>42.14678</u>	<u>-79.97331</u>																																													
Compliance Review: <u>Robert Bechtel</u>										Date: <u>8/12/2026</u>																																																
Approval: Oil and Gas District Manager: <u>Scott M. Dudziec</u>										Date: <u>8/17/2026</u>																																																
<table border="1"> <thead> <tr> <th colspan="5">Attachments Checklist (please check all that apply)</th> <th colspan="8">Applicant Signature</th> </tr> </thead> <tbody> <tr> <td colspan="5">1. ☐ Well Locations Plotted on a USGS 7.5 Minute Topographic Map</td> <td colspan="8" rowspan="5"> Subject to the penalties of Title 18-Pa C.S. Section 4904 relating to unsworn falsification to authorities, I certify that I have the authority to submit this request to operate the above-listed abandoned wells. Further, I certify that the information provided on this form and attachments is true and correct to the best of my knowledge and information. Signature <u>Clint D Badowski / Stacey A. Badowski</u> Date <u>08/10/26</u> Type or Print Name and Title <u>Clint D. Badowski / Stacey A. Badowski</u> </td> </tr> <tr> <td colspan="5">2. ☐ Driller's Log, if available</td> </tr> <tr> <td colspan="5">3. ☐ Any Additional Well Information Available</td> </tr> <tr> <td colspan="5">4. ☐ Workover Summary, if required</td> </tr> <tr> <td colspan="5">5. ☐ Operating/Ownership Interests Information</td> </tr> </tbody> </table>													Attachments Checklist (please check all that apply)					Applicant Signature								1. ☐ Well Locations Plotted on a USGS 7.5 Minute Topographic Map					Subject to the penalties of Title 18-Pa C.S. Section 4904 relating to unsworn falsification to authorities, I certify that I have the authority to submit this request to operate the above-listed abandoned wells. Further, I certify that the information provided on this form and attachments is true and correct to the best of my knowledge and information. Signature <u>Clint D Badowski / Stacey A. Badowski</u> Date <u>08/10/26</u> Type or Print Name and Title <u>Clint D. Badowski / Stacey A. Badowski</u>								2. ☐ Driller's Log, if available					3. ☐ Any Additional Well Information Available					4. ☐ Workover Summary, if required					5. ☐ Operating/Ownership Interests Information				
Attachments Checklist (please check all that apply)					Applicant Signature																																																					
1. ☐ Well Locations Plotted on a USGS 7.5 Minute Topographic Map					Subject to the penalties of Title 18-Pa C.S. Section 4904 relating to unsworn falsification to authorities, I certify that I have the authority to submit this request to operate the above-listed abandoned wells. Further, I certify that the information provided on this form and attachments is true and correct to the best of my knowledge and information. Signature <u>Clint D Badowski / Stacey A. Badowski</u> Date <u>08/10/26</u> Type or Print Name and Title <u>Clint D. Badowski / Stacey A. Badowski</u>																																																					
2. ☐ Driller's Log, if available																																																										
3. ☐ Any Additional Well Information Available																																																										
4. ☐ Workover Summary, if required																																																										
5. ☐ Operating/Ownership Interests Information																																																										

OPERATOR'S GENERAL INFORMATION FORM

DEP USE ONLY	
Client Id #	401609
OGO #	69861
Agent's Id #	

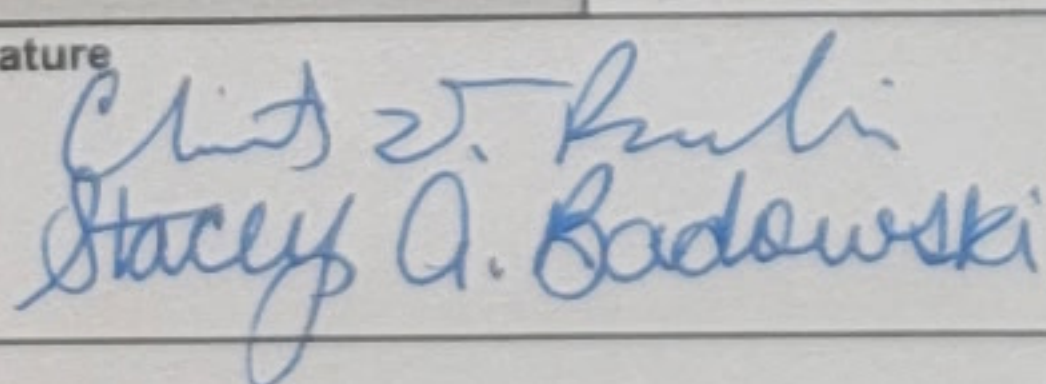
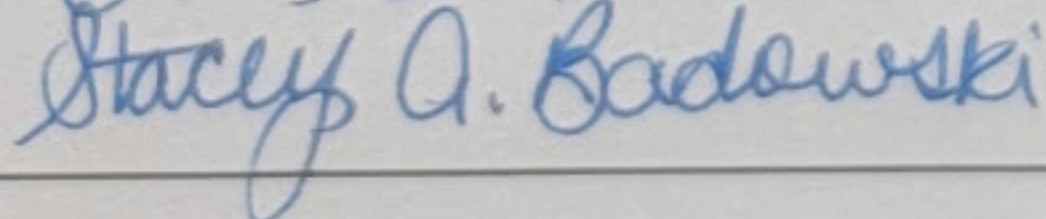
Before completing this form, please read the instructions on the back. This information will be used to establish or verify our computer records about you or your organization as an oil or gas well operator in Pennsylvania. Any applicant who has not previously conducted business with the DEP Oil and Gas Program must submit this form when applying for an oil or gas approval/permit.

GENERAL OPERATOR INFORMATION		Enter the name and address under which you or your organization operate (and bond) oil and gas wells in Pennsylvania.			
Type of Organization / Code	Corporate, Company, Partnership or Registered Fictitious Name			Federal Tax ID#	
Individual or Partner - Last Name	First Name	MI	Suffix	Social Sec #	
Badowski	CLINT	D		XXXXXXXXXXXXXXXXXX	
Individual or Partner - Last Name	First Name	MI	Suffix	Social Sec #	
Badowski	Stacey	A		XXXXXXXXXXXXXXXXXX	
Individual or Partner - Last Name	First Name	MI	Suffix	Social Sec #	
				XXXXXXXXXXXXXXXXXX	
Mailing Address			☐ Check if this is a new address.		
2976 Clark Road					
City	State	ZIP+4	Country (If Other Than USA)		
Erie	PA	16510			
Phone (Daytime)	Ext.	FAX	Email Address		
570-419-7178			cdb195@gmail.com		
Person to Contact - Last Name	First Name	MI	Suffix	Title	
Badowski	CLINT	D			

Parent or Subsidiary Information	Any changes to business structure must be provided to the Oil and Gas Program within 30 days of the change. If there is currently no parent or subsidiary, check the applicable boxes below. If there is, you must attach the Ownership and Control form 8000-FM-OOGM0118.
Check if no parent: ☐	Check if no subsidiaries: ☐

FIELD OFFICE	Fill in this part if the person or branch office responsible for operations in Pennsylvania is at a location other than the corporate address above.			
Person to Contact - Last Name	First Name	MI	Suffix	Title
Mailing Address				
City	State	ZIP+4	Country (If Other Than USA)	
Phone (Daytime)	Ext.	FAX	Email Address	

OPERATOR'S AGENT	Non-resident operators <u>only</u> must designate an agent who is a Pennsylvania resident (or corporation) to serve as the operator's corporate presence for service of legal process.	
Agent's Name	Mailing Address	☐ Check if only for change of current agent's address.
☐ Check if this is a new agent.	City	State ZIP+4 Phone (Daytime)

CERTIFICATION	The undersigned certifies that the above information is correct as of this date, and until DEP is notified otherwise it applies to all future oil or gas well permit applications from this organization or individual.	
Signature	Type or print name and title of signer	Date
	CLINT D. BADOWSKI	08/10/26
	Stacey A. Badowski	