



pennsylvania
DEPARTMENT OF ENVIRONMENTAL PROTECTION

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

DEP USE ONLY
Application Tracking #
1581678

Electronically Received 8/27/26 dg
OGO-13321 PA DEP OFC OIL & GAS MGMT
Client 62492
Site 879104

Proposed Alternate Method or Material for Casing, Plugging, Venting or Equipping a Well

Well Operator PA DEP		DEP ID#		Well Permit or Registration Number 37-019-91447	
Address 400 Market Street				Well Farm Name A. Shakley	
City Harrisburg	State PA	Zip Code 17101		Well # 3	Serial # OOGM FS25-6
Phone 717-772-2199	Fax			County Butler	Municipality Center Twp

*A proposed alternate method is subject to provisions in §3221 of the 2012 Oil and Gas Act, 58 Pa. C.S. §3221 Section 13 of the Coal and Gas Resource Coordination Act, 58 P.S. §513 and 25 PA Code §§78.75-78.75a (relating to Alternate Methods.) **Attach proof of notification of coal operator(s).***

Describe in reasonable detail using a written description and / or diagram:

- 1. the proposed alternate method or materials, and**
- 2. the manner in which the alternative will satisfy the goals of the laws and regulations.**

Original:

As per PA DEP plugging regulation, 78.75 (a), "A well operator may request approval from the Department to use an alternate method or material for the casing, plugging or equipping of a well under section 211 of the act (58 P.S. & 601.211)." We are proposing and requesting to plug this well from attainable bottom back to surface with Class A. cement according to regulation, 78.91 (h). In lieu of venting we will be burying the wellhead 3ft below surface to comply with regulation 78.96.

Revised (8/26/26)

In addition, 4.5" casing was unsuccessful retrieving free pipe. Resulting in perforating 4 shots at 495', 400', and 360'. We also attempted to cut 4.5" at 300' and 284'. Afterwards the well was cemented back to surface with Class A. cement.

Optional: Approval by Coal Owner or Operator Signature _____ Date _____ Print or Type Signer's Name and Title _____		Signature of Applicant / Well Operator Signature Date 8/26/26 Print or Type Signer's Name and Title Robert Kozel, President	
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If optional approval is signed by coal owner or operator, the 15-day objection period may be waived.

DEP USE ONLY		
Approved by (DEP Manager)	Conditions ☐ YES, See Attached ☐ NO	Date 8/27/26