

**From:** [Hogue, Kate](#)  
**To:** [Pennhills Info](#)  
**Cc:** [Ayers, Brian](#)  
**Subject:** 123-49464, 123-49465, 123-49466, 123-49467, 123-49463  
**Date:** Thursday, September 17, 2026 9:09:00 AM  
**Attachments:** [Auth 1582714 123-49464.pdf](#)  
[image001.png](#)  
[Auth 1582715 123-49465.pdf](#)  
[Auth 1582726 123-49466.pdf](#)  
[Auth 1582760 123-49467.pdf](#)  
[Auth 1582707 123-49463.pdf](#)  
[Well Permit Cover Letter \(conventional\) 8-17-26.pdf](#)

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**Operator,**

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

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

The cover letter for these permits is also attached.

This information can also be viewed on our website, at the Oil and Gas Mapping tool:

<https://www.dep.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](http://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<br><b>306870</b> | Auth ID<br><b>1582760</b> |
| Watershed Name                         | Quality                   |

|                                             |                                             |                                              |                                                                                                         |                                   |
|---------------------------------------------|---------------------------------------------|----------------------------------------------|---------------------------------------------------------------------------------------------------------|-----------------------------------|
| Permittee<br><b>PENNHILLS RESOURCES LLC</b> |                                             | OGO.#<br><b>OGO-68600</b>                    | Permit Number<br><b>37-123-49467-00-00</b>                                                              | Date Issued<br><b>09/15/2026</b>  |
| Address<br><b>PO BOX 426</b>                |                                             | Farm Name & Well Number<br><b>WT 1072 13</b> |                                                                                                         | Well Serial #                     |
|                                             |                                             | Municipality<br><b>Sheffield Twp</b>         | County<br><b>Warren</b>                                                                                 |                                   |
| <b>MT JEWETT, PA 16740</b>                  |                                             | 7½ ' Quadrangle Name<br><b>Sheffield</b>     |                                                                                                         | Map Section #<br><b>9</b>         |
| Phone<br><b>(814) 975-3009</b>              | Project #                                   |                                              | Latitude<br><b>41-38-12.3216</b>                                                                        | Longitude<br><b>-79-1-31.3608</b> |
| Surf Elev at Site<br><b>1744 feet</b>       | Anticipated Maximum TVD<br><b>2050 feet</b> | Well Type<br><b>OG</b>                       | Offset distances referenced to NE corner of map section.<br><b>South 10898 feet      West 6937 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. This permit is conditioned upon the well operator obtaining all appropriate approvals, including local, municipal and zoning approvals, and any revision or modification of those approvals.
2. Contact the Inspector at least 24 hours prior to commencing any frac/stimulation procedures.

This permit expires **09/15/2027** unless drilling is commenced on or before that date and prosecuted with due diligence.

Susan Price for Thomas Donohue – 9/15/2026

**Subsurface Permits Environmental Program Manager**

ERIC WYMER

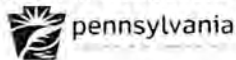
PO BOX 669  
KNOX, PA 16232

814-573-3588

Oil & Gas Inspector

Address

Phone Number



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

# PERMIT APPLICATION TO DRILL AND OPERATE A CONVENTIONAL WELL

|                                                                    |  |                    |                         |                     |                                            |                                                                  |                                                                                                                                                      |                                                                                                                                         |                     |                      |
|--------------------------------------------------------------------|--|--------------------|-------------------------|---------------------|--------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------------------|
| Notes<br><b>NC</b><br><b>PNDI 4/9/2026</b><br><b>CK# 17206-550</b> |  | OGO # <b>68600</b> | Client Id <b>306870</b> | Bond # <b>16332</b> | C: <b>9/2/26 gmc</b> G: <b>ACM 9/10/26</b> | INV: <b>1169735</b> Auth Id <b>1582760</b> Site Id <b>890747</b> | DEP USE ONLY<br>Objection Date - Do not issue before:<br><b>8/31/26</b><br>Date Approved:<br><b>SGP 9/10/26</b><br>Special Cond <b>24 hr/ zoning</b> | API #'s37- <b>123-49467</b><br>and - - - - -<br>Watershed Name:<br>Designation: <input type="checkbox"/> HQ <input type="checkbox"/> EV | PF Id <b>894733</b> | SF Id <b>1487501</b> |
|--------------------------------------------------------------------|--|--------------------|-------------------------|---------------------|--------------------------------------------|------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------------------|

Please read instructions before you begin filling in this form.

| WELL INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                            |                                                            |                                                                         |                                                                                                                                                                                                                                                                                                                                        |                                                      |                                                                                                                                                                                                                                                                                                                                                                                                       |                     |                                                                                                                                                                                   |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Well Operator<br><b>PENNHILLS RESOURCES, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                |                                                                            | DEP ID#<br><b>306870</b>                                   | Well API #<br><b>37- - - -</b>                                          |                                                                                                                                                                                                                                                                                                                                        | Well Farm Name<br><b>WT 1072</b>                     |                                                                                                                                                                                                                                                                                                                                                                                                       | Well #<br><b>13</b> |                                                                                                                                                                                   |  |
| Address<br><b>P.O. BOX 426</b>                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                            | LAT <b>41°38' 12.32"</b>                                   |                                                                         | NAD<br><b>83</b>                                                                                                                                                                                                                                                                                                                       |                                                      | Project Number                                                                                                                                                                                                                                                                                                                                                                                        |                     | Serial #                                                                                                                                                                          |  |
| LONG <b>79°01' 31.36"</b>                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                            |                                                            |                                                                         |                                                                                                                                                                                                                                                                                                                                        |                                                      |                                                                                                                                                                                                                                                                                                                                                                                                       |                     |                                                                                                                                                                                   |  |
| City<br><b>MT. JEWETT</b>                                                                                                                                                                                                                                                                                                                                                                                                                       | State<br><b>PA</b>                                                         | Zip<br><b>16740</b>                                        | Municipality Name/ City, Borough, Township<br><b>SHEFFIELD Township</b> |                                                                                                                                                                                                                                                                                                                                        |                                                      | County<br><b>WARREN</b>                                                                                                                                                                                                                                                                                                                                                                               |                     |                                                                                                                                                                                   |  |
| Phone<br><b>814-975-3009</b>                                                                                                                                                                                                                                                                                                                                                                                                                    | Fax<br><b>814-778-6874</b>                                                 | Email<br><b>langsurveyingllc@gmail.com</b>                 |                                                                         |                                                                                                                                                                                                                                                                                                                                        | USGS 7.5 min. quadrangle map<br><b>SHEFFIELD, PA</b> |                                                                                                                                                                                                                                                                                                                                                                                                       | Section<br><b>9</b> |                                                                                                                                                                                   |  |
| <input type="checkbox"/> Check if this is a new address                                                                                                                                                                                                                                                                                                                                                                                         |                                                                            | 24/7 Emergency Phone contact number<br><b>814-598-0237</b> |                                                                         | 911 address of well site (if available)<br><b>N/A</b>                                                                                                                                                                                                                                                                                  |                                                      |                                                                                                                                                                                                                                                                                                                                                                                                       |                     |                                                                                                                                                                                   |  |
| Freshwater Impoundment Name/<br>Identification <b>N/A</b>                                                                                                                                                                                                                                                                                                                                                                                       | Centralized Impoundment Name/<br>Identification <b>N/A</b>                 | Well Pad Name/Identification<br><b>N/A</b>                 |                                                                         | Borrow Area Name/Identification<br><b>COMMERCIAL PIT</b>                                                                                                                                                                                                                                                                               |                                                      |                                                                                                                                                                                                                                                                                                                                                                                                       |                     |                                                                                                                                                                                   |  |
| Surface Elev<br><b>1744' ✓</b>                                                                                                                                                                                                                                                                                                                                                                                                                  | Deepest Formation to be penetrated<br><b>BRADFORD GROUP (BRADFORD 2ND)</b> | Anticipated TVD<br><b>2050'</b>                            |                                                                         | PERMIT TYPE<br>Check applicable.<br>Application is to:<br><input checked="" type="checkbox"/> Drill a new<br><input type="checkbox"/> Re-permit expired permit<br><input type="checkbox"/> Deepen well<br><input type="checkbox"/> Redrill wellbore<br><input type="checkbox"/> Alter well<br><input type="checkbox"/> Other (specify) |                                                      | TYPE OF WELL<br>Check applicable.<br><input type="checkbox"/> Gas<br><input type="checkbox"/> Oil<br><input checked="" type="checkbox"/> Comb. (gas & oil/condensate)<br><input type="checkbox"/> Injection, recovery<br><input type="checkbox"/> Injection, disposal<br><input type="checkbox"/> Coalbed Methane<br><input type="checkbox"/> Gas Storage<br><input type="checkbox"/> Other (specify) |                     | APPLICATION FEE<br>Check applicable.<br><input checked="" type="checkbox"/> Conventional<br><input type="checkbox"/> \$200 (Home Use Well)<br><b>Total Application Fee \$ 550</b> |  |
| Target Formation(s) proposed for production<br><b>BRADFORDGROUP(BRADFORD2ND)</b>                                                                                                                                                                                                                                                                                                                                                                |                                                                            | Anticipated Target Top/Bottom TVD<br><b>1840' 1900'</b>    |                                                                         |                                                                                                                                                                                                                                                                                                                                        |                                                      |                                                                                                                                                                                                                                                                                                                                                                                                       |                     |                                                                                                                                                                                   |  |
| Number of wellbore laterals proposed under this application <b>0</b>                                                                                                                                                                                                                                                                                                                                                                            |                                                                            |                                                            |                                                                         |                                                                                                                                                                                                                                                                                                                                        |                                                      |                                                                                                                                                                                                                                                                                                                                                                                                       |                     |                                                                                                                                                                                   |  |
| Total feet of wellbore to be drilled under this application <b>2050 Ft.</b><br>If applying for a permit to rework an existing well not registered or permitted, check this box <input type="checkbox"/> and enter date drilled, if known: _____ (see instructions)<br><b>PNDI Attached: <input checked="" type="checkbox"/> Any threatened or endangered "hit" must include a copy of the clearance letter from the applicable agency(ies).</b> |                                                                            |                                                            |                                                                         |                                                                                                                                                                                                                                                                                                                                        |                                                      |                                                                                                                                                                                                                                                                                                                                                                                                       |                     |                                                                                                                                                                                   |  |
| Application submitted as: Coal well: <input type="checkbox"/> Attach Coal Module<br>CBM well <input type="checkbox"/> Attach Coal Module<br>Non coal well <input checked="" type="checkbox"/> Attach justification.                                                                                                                                                                                                                             |                                                                            |                                                            |                                                                         | <div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>RECEIVED</b><br/><br/> <b>AUG 31 2026</b><br/> Environmental Protection<br/>Northwest Regional Office </div>                                                                                                                                               |                                                      | Configuration<br><input checked="" type="checkbox"/> Vertical<br><input type="checkbox"/> Horizontal<br><input type="checkbox"/> Deviated<br><input type="checkbox"/> Multiple laterals                                                                                                                                                                                                               |                     | 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).                                                                                                                                                                                                                            | <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? ☐ ☒
- a. If Yes, print the names of: Storage Field: Operator:
4. Is the proposed well location within the permitted area of a landfill? ☐ ☒
5. Will the well be drilled within 200 feet from any existing building or an existing water supply? ☐ ☒
- a. If "Yes," is written consent from the owner attached? ☐ ☐
- b. If written consent is not attached, is a variance request (form 8000-FM-OOGM0058) attached? ☐ ☐
6. Will the well be located where it may impact a public resource as outlined in the "Coordination of a Well Location with Public Resources" form 5500-PM-OG0076? If yes, attach a completed copy of the form and clearance letters from applicable agencies. ☒ ☐
7. Will any portion of the well site be in a Special Protection High Quality ☐ (HQ) or Exceptional Value ☐ (EV) watershed? ☐ ☒
- Provide name of special protection stream \_\_\_\_\_.
- 7.1 Will the well be drilled using enhanced drilling or completion technologies into a formation that typically produces gas or petroleum? ☐ ☒
8. Is this well part of a development which requires an Earth Disturbance Permit for Oil and Gas Activities disturbing more than 5 acres? If yes, list the number of the ESCGP approval if the permit has been issued. Has not been issued ☐ ☒
- 8.1 Is the disturbed area of the well site between 1 to 5 acres and in a Special Protection Watershed ☐ ☒
9. Is waste, including drill cuttings, from the drilling of this well is to be disposed of on this well site? Yes ☒ No ☐
10. Will the well or well site be located within a defined 100 year floodplain or where the floodplain is undefined, within 100 feet of the top of the bank of a perennial stream or within 50 feet of the top of the bank of an intermittent stream. Yes ☐ No ☒
- a. If yes, is a waiver request attached that will protect the Waters of the Commonwealth? Yes ☐ No ☒
11. Is the well to be located within a H<sub>2</sub>S area pursuant to §78.77a? Yes ☐ No ☒
12. Attach a current Ownership & Control form 8000-FM-OOGM0118.

**Signature of Applicant**

The person signing this form attests that they have the authority to submit this application on behalf of the applicant, and that the information, including all related submissions, is true and accurate to the best of their knowledge.

Signature of Person Authorized to Submit Application

(Print or Type)

Name of Signer: STUART MORRIS

Title: CEO

Date

8-19-26

Phone: 814-368-4139

Application Preparer/Contact: ANDREW ROSENBERGER, PLS



RECEIVED

AUG 31 2026

Environmental Protection  
Northwest Regional OfficeCOMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
OFFICE OF OIL AND GAS MANAGEMENT

## WELL LOCATION PLAT

PAGE 1 Surface Location

Auth ID #:

Permit #123-49467

Project #:

C: ACM

9/9/26

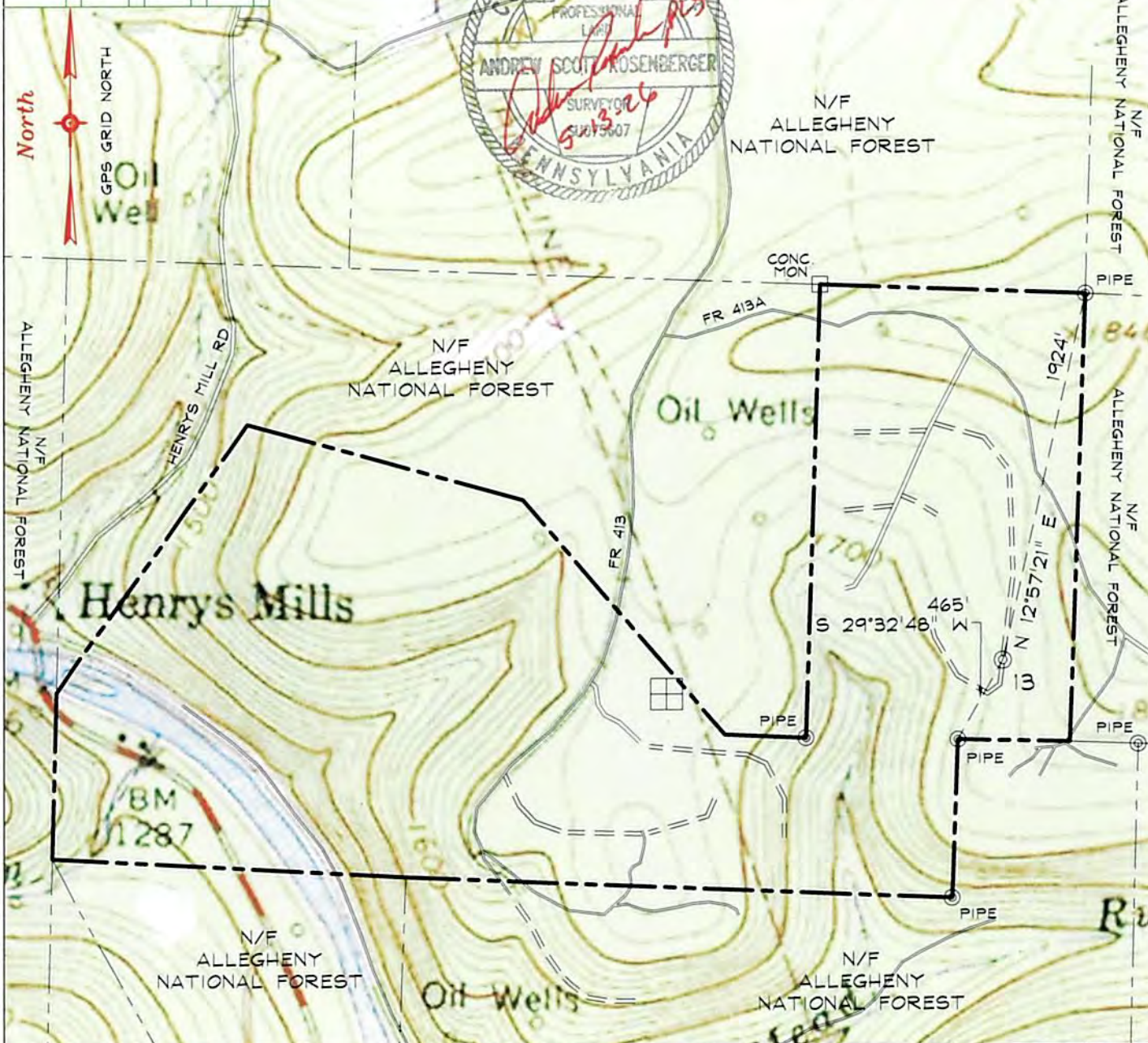
C:

☐ Denotes location of top of well on topo map.
Well is located on topo map **10898** feet south of latitude **41° 40' 00"**

True Latitude: NORTH

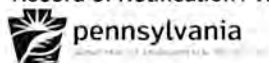
**41° 38' 12" 32"**

True Latitude: WEST

**79° 01' 31" 36"**Well is located on topo map **6937** feet west of longitude **79° 00' 00"**

|                                                                  |                                   |                                |                                                       |                                                       |                                   |                                       |
|------------------------------------------------------------------|-----------------------------------|--------------------------------|-------------------------------------------------------|-------------------------------------------------------|-----------------------------------|---------------------------------------|
| Applicant/Well Operator Name:<br><b>PENNHILLS RESOURCES, LLC</b> |                                   | DEP ID #<br><b>306870</b>      | Well (Farm) Name:<br><b>WT 1072</b>                   |                                                       | Well #:<br><b>13</b>              | Serial #:                             |
| Address:<br><b>P.O. BOX 426, MT. JEWETT, PA 16740</b>            |                                   |                                | County:<br><b>WARREN</b>                              | Municipality:<br><b>SHEFFIELD</b>                     | Well Type:<br><b>COMBINATION</b>  |                                       |
| 911 address of well site:<br><b>N/A</b>                          |                                   |                                | USGS 7½' Quadrangle Map Name:<br><b>SHEFFIELD, PA</b> |                                                       | Map Section:<br><b>9</b>          | Surface Elevation:<br><b>1744</b> ft. |
| Surveyor or Engineer:<br><b>ANDREW S. ROSENBERGER</b>            | Phone #:<br><b>(814) 368-4139</b> | Dwg #:<br><b>06578.13</b>      | Date:<br><b>5/13/26</b>                               | Scale:<br><b>1"=800'</b>                              | Tract Acreage:<br><b>230± AC.</b> |                                       |
| Lat. & Long Metadata Method:<br><b>SURVEY GRADE GPS</b>          |                                   | Accuracy:<br><b>+/- 10 ft.</b> | Datum:<br><b>NAD 83</b>                               | Elevation Metadata Method:<br><b>SURVEY GRADE GPS</b> | Accuracy:<br><b>+/-10 ft.</b>     | Datum:<br><b>NAVD 88</b>              |
|                                                                  |                                   |                                |                                                       |                                                       |                                   | Survey Date:<br><b>5/26</b>           |





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**

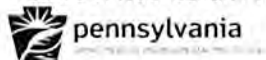
|                                            |                   |
|--------------------------------------------|-------------------|
| Farm Name - Well #<br>WT 1072 WELL #13     |                   |
| Applicant Name<br>PENNHILLS RESOURCES, LLC | DEP ID#<br>306870 |
| <b>DEP USE ONLY</b>                        | 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.<br><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<br>Note the means and attach proof. |                |                   |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|-------------------|----------------------|-----------------------------------------------------------------|----------------|--------------------------------------------------|----------------|-------------------|-----------------|
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                  |                   |                      |                                                                 |                | Certified Mail Dates                             |                | Address Affidavit | Written Consent |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                  |                   |                      |                                                                 |                | Sent                                             | Return Receipt |                   |                 |
| Print Name: ALLEGHENY NATIONAL FOREST<br>Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Address: 4 FARM COLONY DRIVE<br>WARREN, PA 16365 | X                 |                      |                                                                 |                | 5/28/26                                          | 6/4/26         |                   |                 |
| Print Name: SHEFFIELD TOWNSHIP<br>Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Address: P.O. BOX 784<br>SHEFFIELD, PA 16347     |                   |                      |                                                                 | X              | 5/28/26                                          | 6/3/26         |                   |                 |
| Print Name: WETMORE TOWNSHIP<br>Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Address: 318 SPRING STREET<br>KANE, PA 16735     |                   |                      |                                                                 | X              | 5/28/26                                          | 6/16/26        |                   |                 |
| Print Name: HAMILTON TOWNSHIP<br>Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Address: P.O. BOX 23<br>LUDLOW, PA 16333         |                   |                      |                                                                 | X              | 5/28/26                                          | 6/4/26         |                   |                 |
| Print Name: MEAD TOWNSHIP<br>Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Address: 119 MEAD BLVD<br>CLARENDON, PA 16313    |                   |                      |                                                                 | X              | 5/28/26                                          | 6/3/26         |                   |                 |

**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 |
|----------------------|----------|-------|--------------------------|----------------------------|--------------------------|
|                      |          |       | <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"/> |



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 #<br>WT 1072 WELL #13     |                   |
| Applicant Name<br>PENNHILLS RESOURCES, LLC | DEP ID#<br>306870 |
| DEP USE<br>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.<br><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<br>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<br><br>Signature                                                                                                                                                                                                                                                                                                                                                                                                                                               |                   |                      |                                                                 | X              | 5/28/26                                          | 6/3/26         |                   |                 |
| Print Name: HOWE TOWNSHIP Address: 7947 ROUTE 666 SHEFFIELD, PA 16347<br><br>Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                   |                      |                                                                 | X              | 5/28/26                                          | 6/3/26         |                   |                 |
| Print Name: HIGHLAND TOWNSHIP Address: P.O. BOX 505 JAMES CITY, PA 16734<br><br>Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                   |                      |                                                                 | X              | 5/28/26                                          | 6/2/26         |                   |                 |
| 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 |
|----------------------|----------|-------|--------------------------|----------------------------|--------------------------|
|                      |          |       | <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"/> |

7018 0680 0001 1304 2582

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

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

Warren, PA 16365

OFFICIAL USE

|                                                              |        |      |
|--------------------------------------------------------------|--------|------|
| Certified Mail Fee                                           | \$5.30 | 0701 |
| Extra Services & Fees (check box, add fee as appropriate)    |        | 51   |
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$3.00 |      |
| <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       | \$2.17  | 05/28/2026 |
| Total Postage | \$11.87 |            |

|                |                           |
|----------------|---------------------------|
| Sent To        | ALLEGHENY NATIONAL FOREST |
| Street and A   | 4 FARM COLONY DRIVE       |
| City, State, Z | WARREN, PA 16365          |

|            |                    |
|------------|--------------------|
| PS Form 38 | WT 1072 11-18 E1-2 |
|------------|--------------------|

## SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

ALLEGHENY NATIONAL FOREST  
4 FARM COLONY DRIVE  
WARREN, PA 16365



9590 9402 8267 3094 9210 05

2. Article Number (Transfer from service label)

7018 0680 0001 1304 2582

PS Form 3811, July 2020 PSN 7530-02-000-9053 WT 1072 11-18 E1-2

## COMPLETE THIS SECTION ON DELIVERY

|                                                                                                                                                 |                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| A. Signature                                                                                                                                    | <input checked="" type="checkbox"/> Agent<br><input type="checkbox"/> Addressee |
| X <i>J. Bortell</i>                                                                                                                             |                                                                                 |
| B. Received by (Printed Name)                                                                                                                   | C. Date of Delivery                                                             |
| <i>Lidia Bortell</i>                                                                                                                            | <i>6/4/26</i>                                                                   |
| D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input type="checkbox"/> No |                                                                                 |

|                                                                        |                                                                     |
|------------------------------------------------------------------------|---------------------------------------------------------------------|
| 3. Service Type                                                        | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature                               | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input checked="" type="checkbox"/> Certified Mail®                    | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery                           |                                                                     |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       |                                                                     |
| <input type="checkbox"/> Insured Mail                                  |                                                                     |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |                                                                     |

Domestic Return Receipt

7018 0680 0001 1304 2575

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

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Sheffield, PA 16347

OFFICIAL USE

|                                                              |        |      |
|--------------------------------------------------------------|--------|------|
| Certified Mail Fee                                           | \$5.30 | 0701 |
| Extra Services & Fees (check box, add fee as appropriate)    |        | 51   |
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$3.00 |      |
| <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       | \$2.17  | 05/28/2026 |
| Total Postage | \$11.87 |            |

|                |                     |
|----------------|---------------------|
| Sent To        | SHEFFIELD TOWNSHIP  |
| Street and A   | P.O. BOX 784        |
| City, State, Z | SHEFFIELD, PA 16347 |

|            |                    |
|------------|--------------------|
| PS Form 38 | WT 1072 11-18 E1-2 |
|------------|--------------------|

## SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

SHEFFIELD TOWNSHIP  
P.O. BOX 784  
SHEFFIELD, PA 16347



9590 9402 8267 3094 9210 12

2. Article Number (Transfer from service label)

7018 0680 0001 1304 2575

PS Form 3811, July 2020 PSN 7530-02-000-9053 WT 1072 11-18 E1-2

## COMPLETE THIS SECTION ON DELIVERY

|                                                                                                                                                            |                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| A. Signature                                                                                                                                               | <input type="checkbox"/> Agent<br><input type="checkbox"/> Addressee |
| X <i>Carol Schaefer</i>                                                                                                                                    |                                                                      |
| B. Received by (Printed Name)                                                                                                                              | C. Date of Delivery                                                  |
| <i>Carol Schaefer</i>                                                                                                                                      | <i>6-3-26</i>                                                        |
| D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input checked="" type="checkbox"/> No |                                                                      |

|                                                                        |                                                                     |
|------------------------------------------------------------------------|---------------------------------------------------------------------|
| 3. Service Type                                                        | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature                               | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Adult Signature Restricted Delivery           | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input checked="" type="checkbox"/> Certified Mail®                    | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Certified Mail Restricted Delivery            | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery                           |                                                                     |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery       |                                                                     |
| <input type="checkbox"/> Insured Mail                                  |                                                                     |
| <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) |                                                                     |

Domestic Return Receipt

7018 0680 0001 1304 2568

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

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

Kane, PA 16735

**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 \$

 Postmark  
Here

 Postage \$7.17  
 \$

 Total Postage \$12.47  
 \$

 Sent To  
 Street and Apt. WETMORE TOWNSHIP  
 318 SPRING STREET  
 City, State, ZIP+4® KANE, PA 16735

PS Form 3811 WT 1072 11-18 E1-2

ns

**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 9210 29

2. Article Number (Transfer from service label)

7018 0680 0001 1304 2568

PS Form 3811, July 2020 PSN 7530-02-000-9053 WT 1072 11-18 E1-2 Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

 A. Signature ☐ Agent  
 X Jodi Brinkley ☐ Addressee  
 B. Received by (Printed Name) C. Date of Delivery  
 Jodi Brinkley 6/16/26  
 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

 318 Spring St  
 Kane

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

7018 0680 0001 1304 2551

**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**

 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 \$

 Postmark  
Here

 Postage \$7.17  
 \$

 Total Postage \$12.47  
 \$

 Sent To  
 Street and Apt. HAMILTON TOWNSHIP  
 P.O. BOX 23  
 City, State, ZIP+4® LUDLOW, PA 16333

PS Form 3811 WT 1072 11-18 E1-2

**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 9210 36

2. Article Number (Transfer from service label)

7018 0680 0001 1304 2551

PS Form 3811, July 2020 PSN 7530-02-000-9053 WT 1072 11-18 E1-2 Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

 A. Signature ☐ Agent  
 X Becky Davidson ☐ Addressee  
 B. Received by (Printed Name) C. Date of Delivery  
 Becky Davidson 6-4-26  
 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

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

7018 0680 0001 1304 2544

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

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

Clarendon, PA 16313

**OFFICIAL USE**

Certified Mail Fee \$5.30

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 \$2.17

Total Postage \$11.87

Sent To MEAD TOWNSHIP

Street and A. 119 MEAD BLVD

City, State, Z. CLARENDON, PA 16313

PS Form 38 WT 1072 11-18 E1-2

## 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 9210 43

2. Article Number (Transfer from service label)

7018 0680 0001 1304 2544

PS Form 3811, July 2020 PSN 7530-02-000-9053 WT 1072 11-18 E1-2

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

6-3

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

## 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 9210 74

2. Article Number (Transfer from service label)

7018 0680 0001 1304 1288

PS Form 3811, July 2020 PSN 7530-02-000-9053 WT 1072-E1,2 11-18

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

6-3

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

7018 0680 0001 1304 1288

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

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

Clarendon, PA 16313

**OFFICIAL USE**

Certified Mail Fee \$5.30

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 \$2.17

Total Postage \$11.87

Sent To CHERRY GROVE TOWNSHIP

Street and A. 6039 CHERRY GROVE ROAD

City, State, Z. CLARENDON, PA 16313

PS Form 38 WT 1072 11-18 E1-2

Domestic Return Receipt

7018 0680 0001 1304 2537

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

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

Sheffield, PA 16347

|                                                              |        |
|--------------------------------------------------------------|--------|
| Certified Mail Fee                                           | \$5.30 |
| \$                                                           | \$4.40 |
| Extra Services & Fees (check box, add fee as appropriate)    |        |
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$     |
| <input type="checkbox"/> Return Receipt (electronic)         | \$     |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$     |
| <input type="checkbox"/> Adult Signature Required            | \$     |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$     |
| Postage                                                      | \$2.17 |

Postmark  
Here

05/28/2026

Total Postage

\$11.87

Sent To

Street and Apt.

City, State, ZIP

HOWE TOWNSHIP  
7947 ROUTE 666  
SHEFFIELD, PA 16347

PS Form 3800

WT 1072 11-18 E1-2

8

## SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

HOWE TOWNSHIP  
7947 ROUTE 666  
SHEFFIELD, PA 16347



9590 9402 8267 3094 9210 67

2. Article Number (Transfer from service label)

7018 0680 0001 1304 2537

PS Form 3811, July 2020 PSN 7530-02-000-9053 WT 1072 11-18 E1-2 Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Jessica Mohr ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Jessica Mohr

C. Date of Delivery

6/3/26

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

## SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

HIGHLAND TOWNSHIP  
P.O. BOX 505  
JAMES CITY, PA 16734



9590 9402 8267 3094 9210 50

2. Article Number (Transfer from service label)

7018 0680 0001 1304 2520

PS Form 3811, July 2020 PSN 7530-02-000-9053 WT 1072 11-18 E1-2 Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Joou Brunkley ☐ Agent ☐ Addressee

B. Received by (Printed Name)

Joou Brunkley

C. Date of Delivery

6/2/26

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

7018 0680 0001 1304 2520

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

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

James City, PA 16734

|                                                              |        |
|--------------------------------------------------------------|--------|
| Certified Mail Fee                                           | \$5.30 |
| \$                                                           | \$4.40 |
| Extra Services & Fees (check box, add fee as appropriate)    |        |
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$     |
| <input type="checkbox"/> Return Receipt (electronic)         | \$     |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$     |
| <input type="checkbox"/> Adult Signature Required            | \$     |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$     |
| Postage                                                      | \$2.17 |

Postmark  
Here

05/28/2026

Total Postage

\$11.87

Sent To

Street and Apt.

City, State, ZIP

HIGHLAND TOWNSHIP  
P.O. BOX 505  
JAMES CITY, PA 16734

PS Form 3800

WT 1072 11-18 E1-2



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<br><b>PENNHILLS RESOURCES, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                              | DEP ID No.<br><b>306870</b>            | Well Farm Name and No.<br><b>WT 1072</b> |                                         | <b>13</b>                                                           |
| Address<br><b>P.O. BOX 426</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                              |                                        | Project No. (if previously assigned)     |                                         |                                                                     |
| City<br><b>MT. JEWETT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | State<br><b>PA</b>           | Zip Code<br><b>16740</b>               | County<br><b>WARREN</b>                  | Municipality<br><b>SHEFFIELD</b>        |                                                                     |
| Phone No.<br><b>8149753009</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Fax No.<br><b>8147786874</b> | Latitude<br><b>N 41 ° 38 ' 12.32 "</b> |                                          | Longitude<br><b>W 79 ° 01 ' 31.36 "</b> |                                                                     |
| 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 type="checkbox"/> No |
| 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).<br><b>ALLEGHENY NATIONAL FOREST</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                              |                                        |                                          |                                         |                                                                     |
| List the name, address, and phone number of the person responsible for management of the public resource.<br><b>4 FARM COLONY DRIVE, WARREN, PA 16365</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                              |                                        |                                          |                                         |                                                                     |
| 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>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.<br><b>PA GAME COMMISSION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                              |                                        |                                          |                                         |                                                                     |
| 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.<br><b>AN EROSION &amp; SEDIMENTATION CONTROL PLAN HAS BEEN PREPARED AND REVIEWED WITH ALLEGHENY NATIONAL FOREST PERSONNEL. A CONSERVATION MEASURE WAS IDENTIFIED BY PA GAME COMMISSION, WHO DEFERRED TO THE U.S. FISH &amp; WILDLIFE SERVICE AND NO POTENTIAL IMPACTS ARE ANTICIPATED.</b> |                              |                                        |                                          |                                         |                                                                     |

## 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**

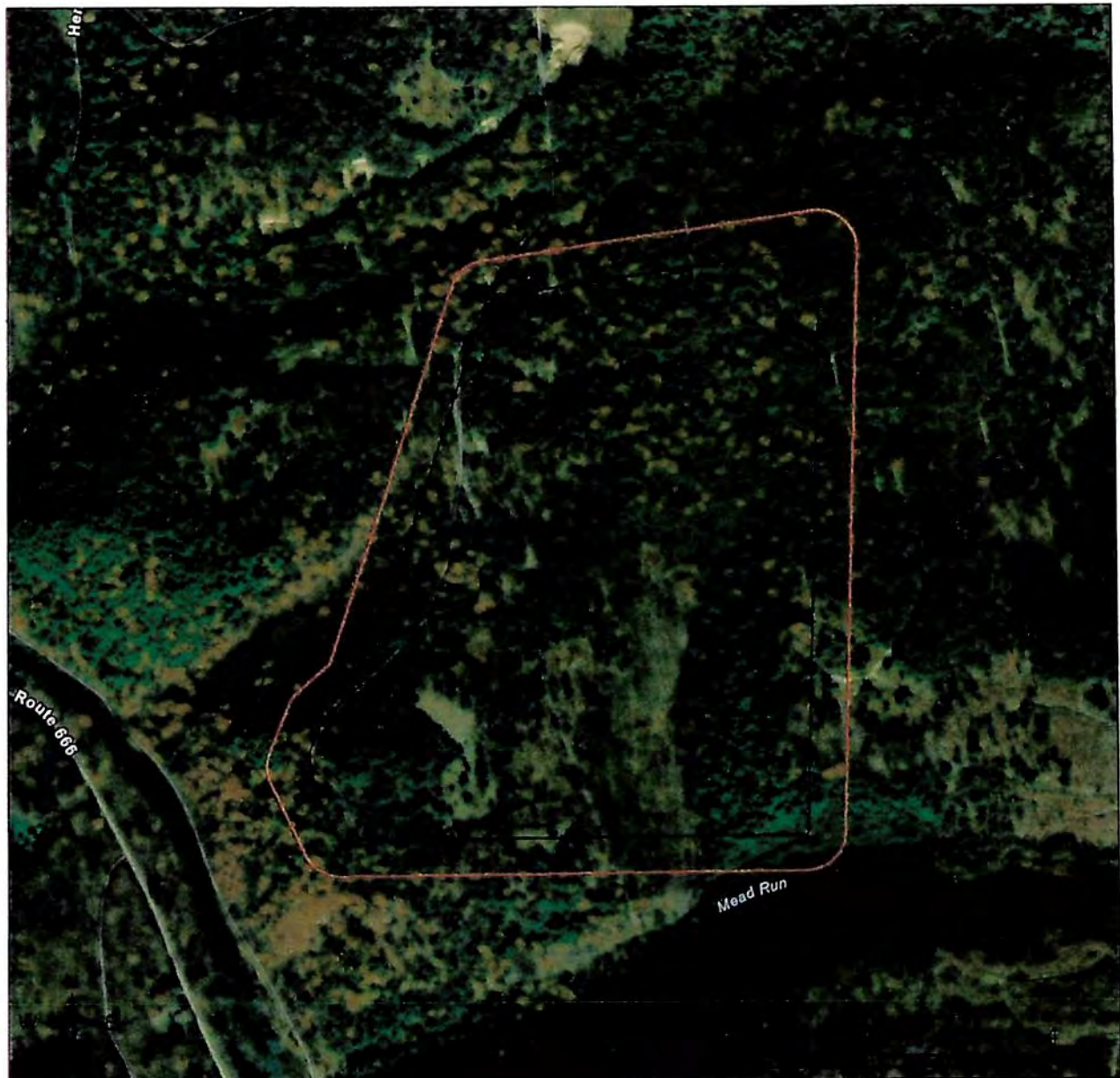
Degrees Minutes Seconds: **41° 38' 13.5584" N, 79° 1' 46.1561" W**

## 2. SEARCH RESULTS

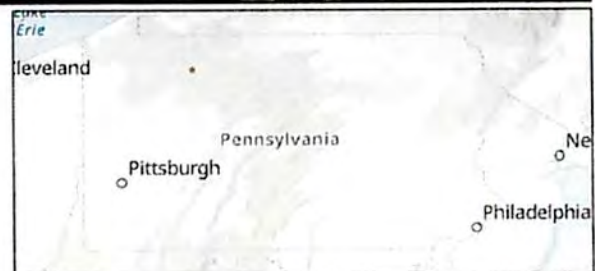
| Agency                                              | Results                     | Response                                               |
|-----------------------------------------------------|-----------------------------|--------------------------------------------------------|
| PA Game Commission                                  | <b>Conservation Measure</b> | <b>No Further Review Required, See Agency Comments</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                      | 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

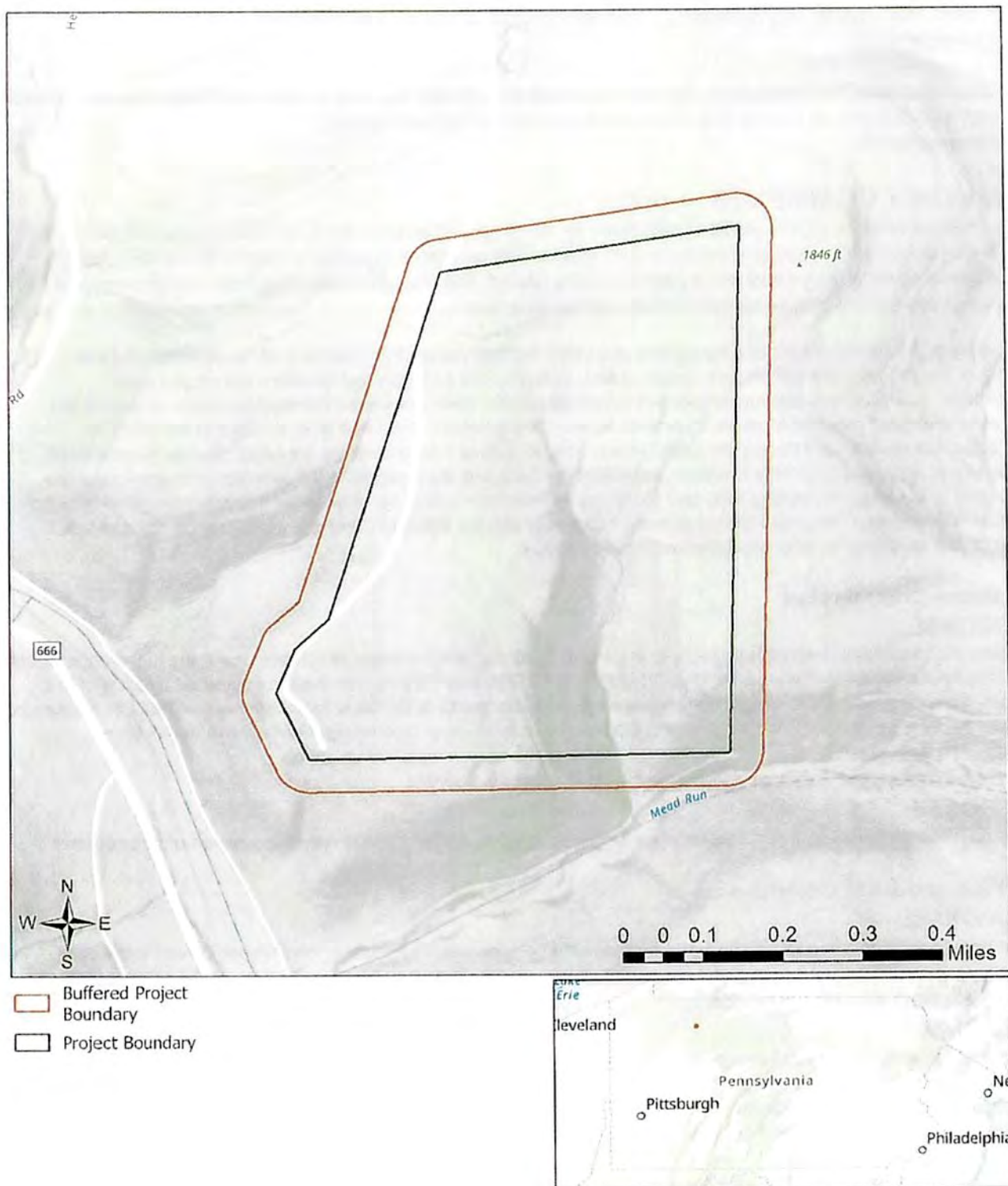


-  Buffered Project Boundary
-  Project Boundary



Sources: Esri, Vantor, Airbus DS, USGS, NGA, 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, NGA, NASA, CGIAR, N Robinson, NCEAS, NLS, OS, 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](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)

### 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)

### 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 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: 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

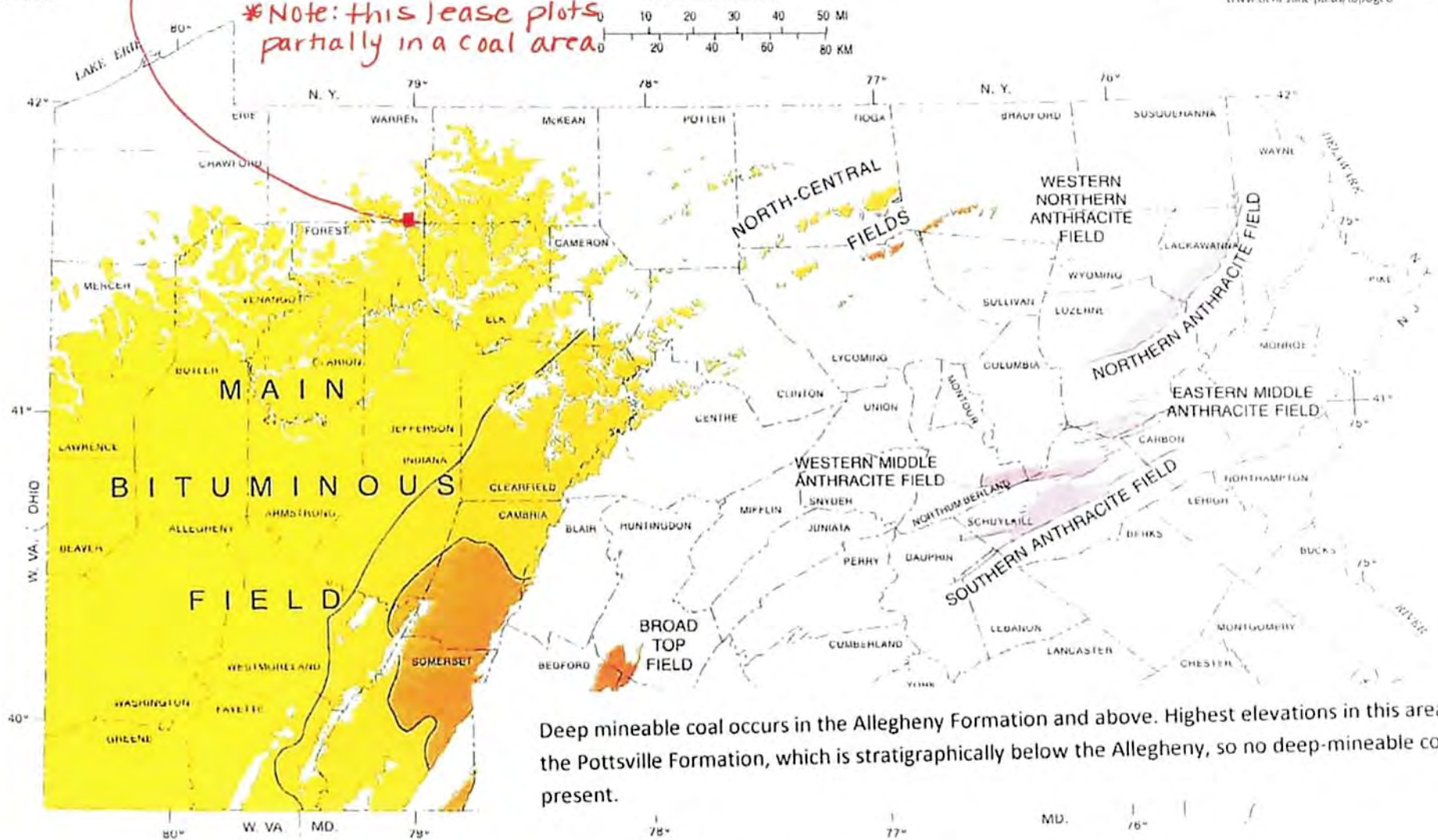
Pennhills Resources, LLC  
WT 1072 Lease

# 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

\*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

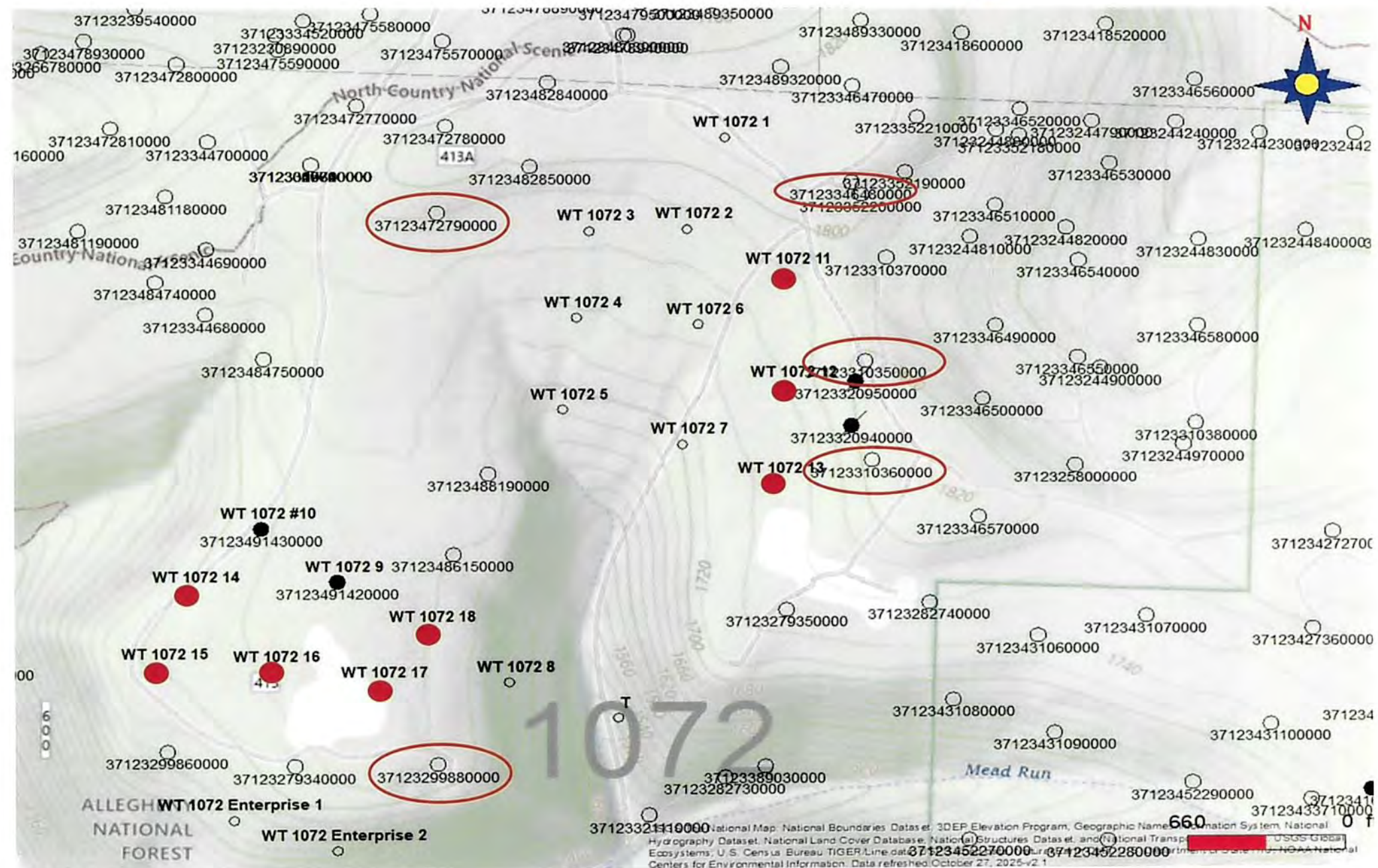




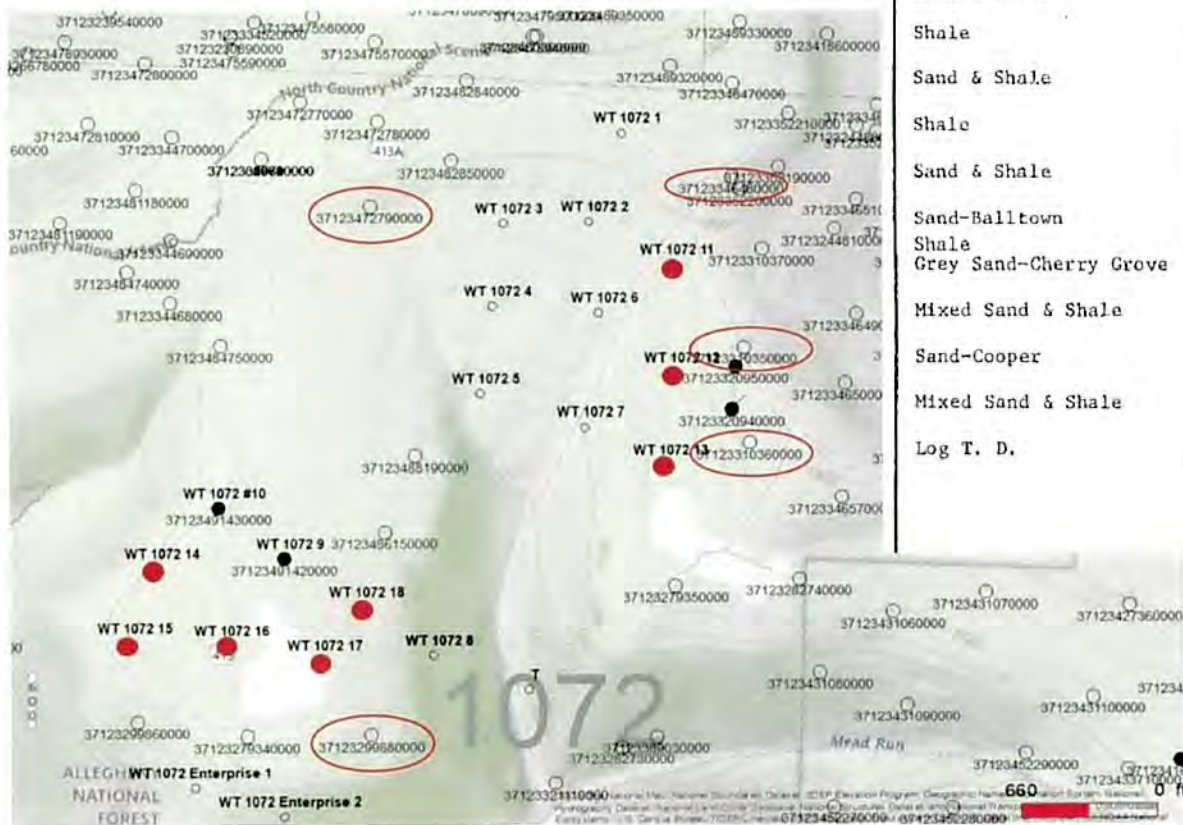
Pennhills Resources, LLC  
WT 1072 Lease

WT 1072 11, 12, 13, 14, 15, 16, 17, 18

● Location of requested well permi

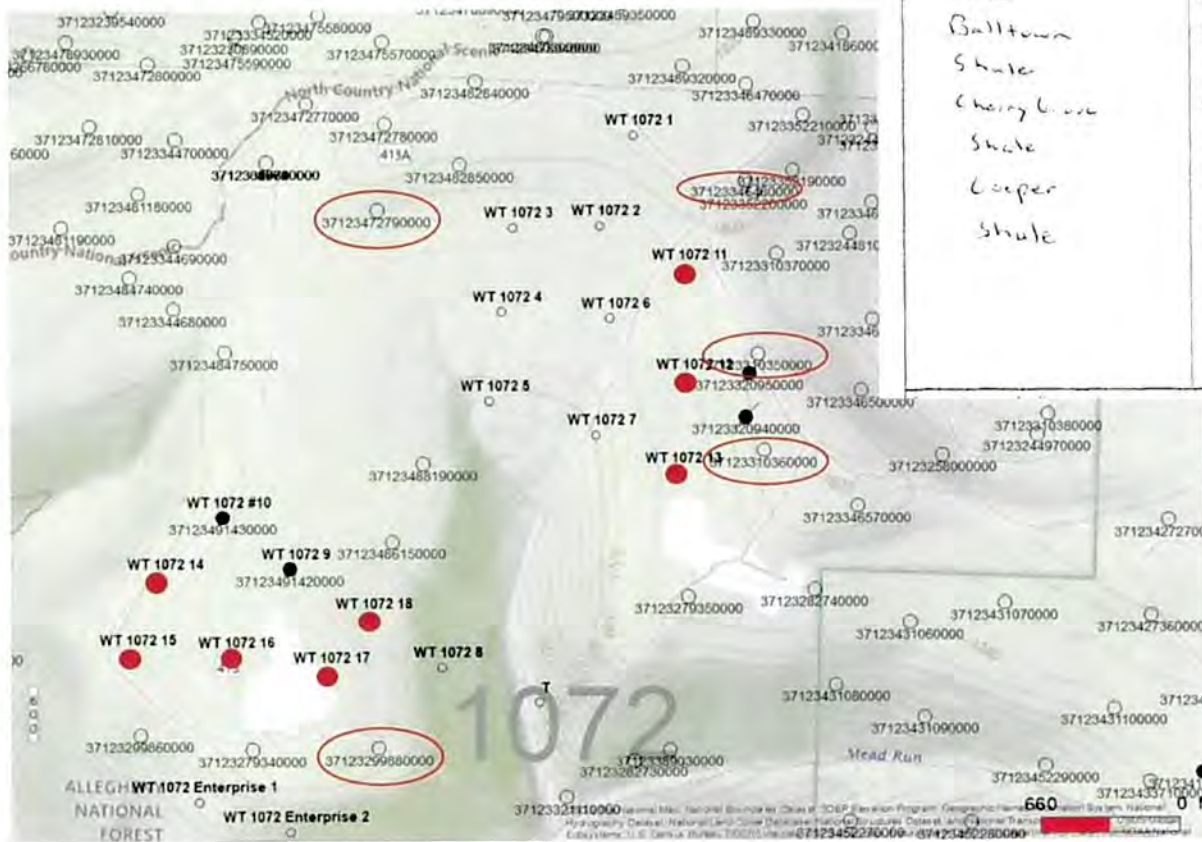


|                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------|
| No coal noted on driller's 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.                                                                                 |



| FORMATIONS               |       |        |           |           |                                      |                |
|--------------------------|-------|--------|-----------|-----------|--------------------------------------|----------------|
| NAME                     | TOP   | BOTTOM | GAS<br>AT | OIL<br>AT | WATER AT<br>(FRESH OR<br>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'  |           |           |                                      |                |

|                                     |                    |             |              |
|-------------------------------------|--------------------|-------------|--------------|
| Pennhills Resources Proposed Wells: | WT 1072 11         | 41.63941912 | -79.02529228 |
|                                     | WT 1072 12         | 41.63796584 | -79.02520306 |
|                                     | WT 1072 13         | 41.63675419 | -79.02520306 |
|                                     | WT 1072 14         | 41.6352793  | -79.0343113  |
|                                     | WT 1072 15         | 41.63429812 | -79.03478233 |
|                                     | WT 1072 16         | 41.63427212 | -79.03306829 |
|                                     | WT 1072 17         | 41.63408913 | -79.03142424 |
|                                     | WT 1072 18         | 41.6348101  | -79.0307068  |
| Driller's Logs:                     | 37-123-29988-00-00 | 41.633114   | -79.030482   |
|                                     | 37-123-47279-00-00 | 41.64011346 | -79.03061645 |
|                                     | 37-123-31036-00-00 | 41.63704432 | -79.02388499 |
|                                     | 37-123-31035-00-00 | 41.63831277 | -79.02402719 |
|                                     | 37-123-34648-00-00 | 41.64039898 | -79.02423965 |



37-123-47279-00-00

| LOG OF FORMATIONS                                                                                   |               |                  |                  |                  |                                  |                |
|-----------------------------------------------------------------------------------------------------|---------------|------------------|------------------|------------------|----------------------------------|----------------|
| Well API#: 37-123-27274-000                                                                         |               |                  |                  |                  |                                  |                |
| (If you will need more space than this page, please photocopy the blank form before filling it in.) |               |                  |                  |                  |                                  |                |
| Formation Name<br>or Lithology                                                                      | Top<br>(feet) | Bottom<br>(feet) | Gas at<br>(feet) | Oil at<br>(feet) | Water at<br>(fresh / brine, ft.) | Source of Data |
| Fine Sandstone                                                                                      | 0             | 20               |                  |                  | Fresh                            | Log            |
| Sandstone                                                                                           | 20            | 150              |                  |                  | 27'                              |                |
| Shale                                                                                               | 150           | 460              |                  |                  | 32'                              |                |
| Redrock                                                                                             | 460           | 480              |                  |                  | 424'                             |                |
| Shale                                                                                               | 480           | 1640             |                  |                  |                                  |                |
| Clarendon                                                                                           | 1640          | 1650             |                  |                  |                                  |                |
| Shale                                                                                               | 1650          | 1690             |                  |                  |                                  |                |
| Balltown                                                                                            | 1690          | 1700             |                  |                  |                                  |                |
| Shale                                                                                               | 1700          | 1730             |                  |                  |                                  |                |
| Cherry Grove                                                                                        | 1730          | 1760             |                  |                  |                                  |                |
| Shale                                                                                               | 1760          | 1865             |                  |                  |                                  |                |
| Cooper                                                                                              | 1865          | 1910             |                  |                  |                                  |                |
| Shale                                                                                               | 1910          | 1986             |                  |                  |                                  |                |

|                                     |                    |             |              |
|-------------------------------------|--------------------|-------------|--------------|
| Pennhills Resources Proposed Wells: | WT 1072 11         | 41.63941912 | -79.02529228 |
|                                     | WT 1072 12         | 41.63796584 | -79.02520306 |
|                                     | WT 1072 13         | 41.63675419 | -79.02520306 |
|                                     | WT 1072 14         | 41.6352793  | -79.0343113  |
|                                     | WT 1072 15         | 41.63429812 | -79.03478233 |
|                                     | WT 1072 16         | 41.63427212 | -79.03306829 |
|                                     | WT 1072 17         | 41.63408913 | -79.03142424 |
|                                     | WT 1072 18         | 41.6348101  | -79.0307068  |
| Driller's Logs:                     | 37-123-29988-00-00 | 41.633114   | -79.030482   |
|                                     | 37-123-47279-00-00 | 41.64011346 | -79.03061645 |
|                                     | 37-123-31036-00-00 | 41.63704432 | -79.02388499 |
|                                     | 37-123-31035-00-00 | 41.63831277 | -79.02402719 |
|                                     | 37-123-34648-00-00 | 41.64039898 | -79.02423965 |

No coal noted on driller's log.

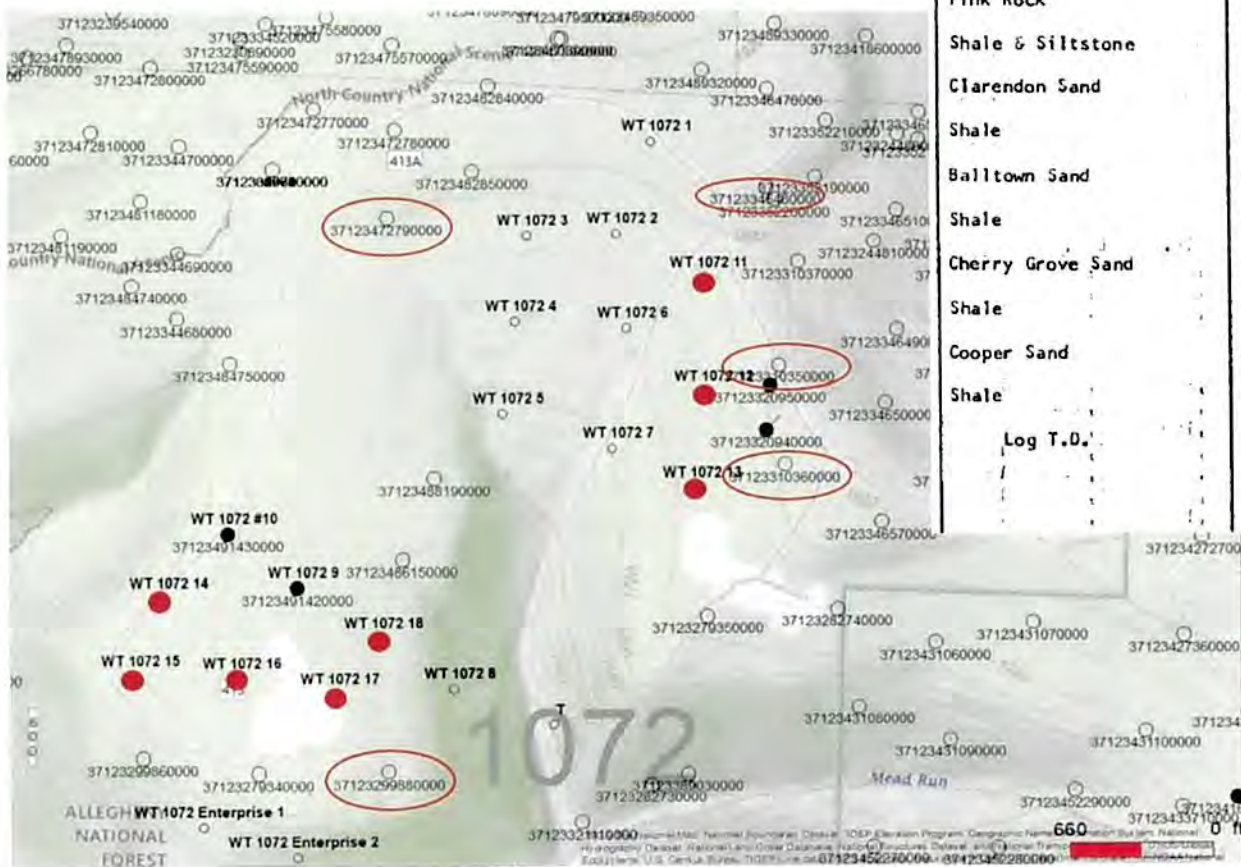
No coal thickness greater than 28" thick encountered.

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.

37-123-31036-00-00

| FORMATIONS            |       |        |        |        |                                |                |
|-----------------------|-------|--------|--------|--------|--------------------------------|----------------|
| NAME                  | TOP   | BOTTOM | GAS AT | OIL AT | WATER AT (FRESH OR SALT WATER) | SOURCE OF DATA |
| Mud & Gravel          | 0'    | 240'   | -      | -      | -                              | Driller's Log  |
| Sand, Shale & Redrock | 240'  | 552'   | -      | -      | -                              | " "            |
| Shale                 | 552'  | 864'   | -      | -      | -                              | Electric Log   |
| Sand Knox 2nd         | 864'  | 877'   | -      | -      | -                              | " "            |
| Shale                 | 877'  | 912'   | -      | -      | -                              | " "            |
| Sand Knox 3rd         | 912'  | 939'   | -      | -      | -                              | " "            |
| Shale & Siltstone     | 939'  | 1050'  | -      | -      | -                              | " "            |
| Shale                 | 1050' | 1161'  | -      | -      | -                              | " "            |
| Pink Rock             | 1161' | 1272'  | -      | -      | -                              | " "            |
| Shale & Siltstone     | 1272' | 1383'  | -      | -      | -                              | " "            |
| Clarendon Sand        | 1383' | 1494'  | -      | -      | -                              | " "            |
| Shale                 | 1494' | 1605'  | -      | -      | -                              | " "            |
| Balltown Sand         | 1605' | 1637'  | -      | 1612'  | -                              | " "            |
| Shale                 | 1637' | 1722'  | -      | -      | -                              | " "            |
| Cherry Grove Sand     | 1722' | 1799'  | -      | 1744'  | -                              | " "            |
| Shale                 | 1799' | 1854'  | -      | -      | -                              | " "            |
| Cooper Sand           | 1854' | 1952'  | -      | 1909'  | -                              | " "            |
| Shale                 | 1952' | 1998'  | -      | -      | -                              | " "            |
| Log T.O.              |       | 1998'  |        |        |                                | S.L.M.         |



|                                     |                    |             |              |
|-------------------------------------|--------------------|-------------|--------------|
| Pennhills Resources Proposed Wells: | WT 1072 11         | 41.63941912 | -79.02529228 |
|                                     | WT 1072 12         | 41.63796584 | -79.02520306 |
|                                     | WT 1072 13         | 41.63675419 | -79.02520306 |
|                                     | WT 1072 14         | 41.6352793  | -79.0343113  |
|                                     | WT 1072 15         | 41.63429812 | -79.03478233 |
|                                     | WT 1072 16         | 41.63427212 | -79.03306829 |
|                                     | WT 1072 17         | 41.63408913 | -79.03142424 |
|                                     | WT 1072 18         | 41.6348101  | -79.0307068  |
| Driller's Logs:                     | 37-123-29988-00-00 | 41.633114   | -79.030482   |
|                                     | 37-123-47279-00-00 | 41.64011346 | -79.03061645 |
|                                     | 37-123-31036-00-00 | 41.63704432 | -79.02388499 |
|                                     | 37-123-31035-00-00 | 41.63831277 | -79.02402719 |
|                                     | 37-123-34648-00-00 | 41.64039898 | -79.02423965 |

No coal noted on driller's log.

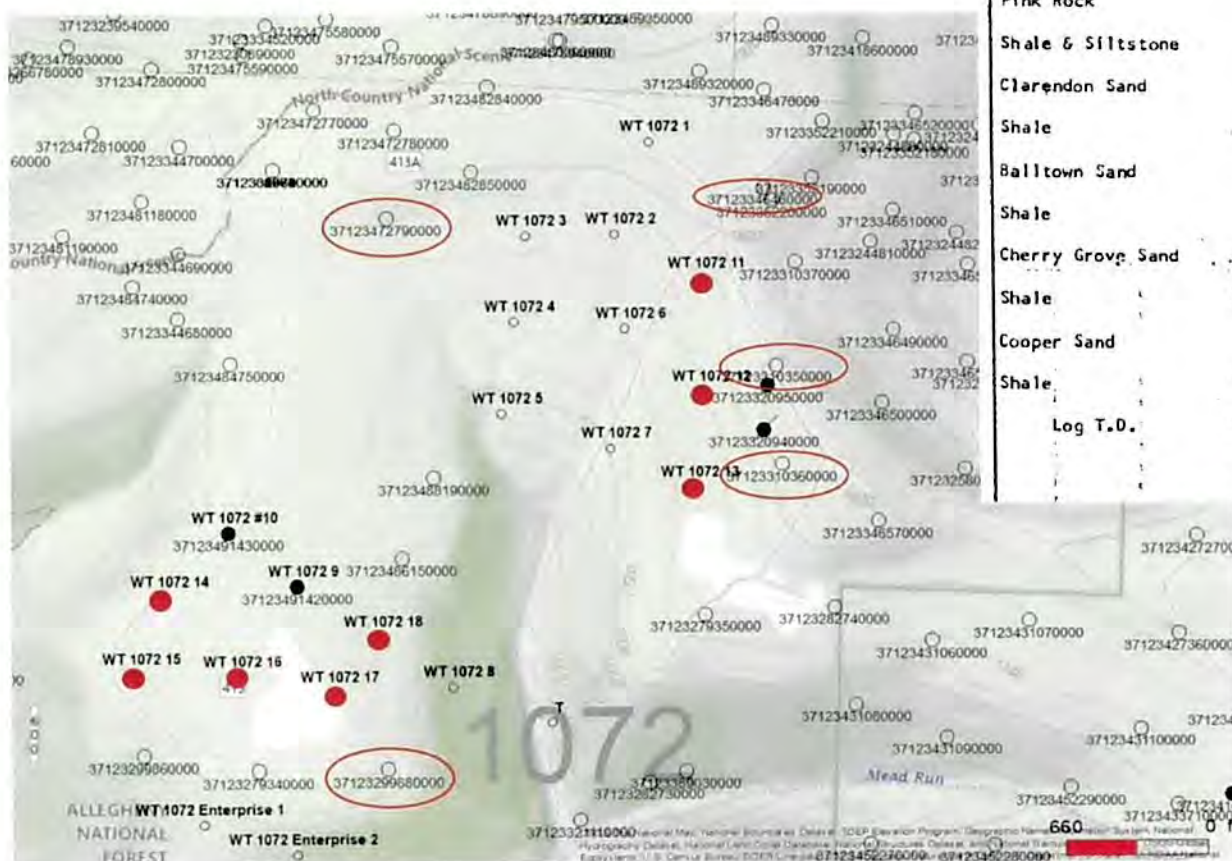
No coal thickness greater than 28" thick encountered.

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.

37-123-31035-00-00

| FORMATIONS            |       |        |        |        |                                |                |
|-----------------------|-------|--------|--------|--------|--------------------------------|----------------|
| NAME                  | TOP   | BOTTOM | GAS AT | OIL AT | WATER AT (FRESH OR SALT WATER) | SOURCE OF DATA |
| Mud & Gravel          | 0'    | 220'   | -      | -      | 83'-94'-119'                   | Driller's Log  |
| Sand, Shale & Redrock | 220'  | 546'   | -      | -      | 259'-280'                      | " "            |
| Shale                 | 546'  | 820'   | -      | -      |                                | Electric Log   |
| Sand Knox 2nd         | 820'  | 865'   | -      | -      |                                | " "            |
| Shale                 | 865'  | 903'   | -      | -      |                                | " "            |
| Sand Knox 3rd         | 903'  | 930'   | -      | -      |                                | " "            |
| Shale & Siltstone     | 930'  | 1068'  | -      | -      |                                | " "            |
| Shale                 | 1068' | 1206'  | -      | -      |                                | " "            |
| Pink Rock             | 1206' | 1344'  | -      | -      |                                | " "            |
| Shale & Siltstone     | 1344' | 1480'  | -      | -      |                                | " "            |
| Clarendon Sand        | 1480' | 1532'  | -      | -      |                                | " "            |
| Shale                 | 1532' | 1580'  | -      | -      |                                | " "            |
| Balltown Sand         | 1580' | 1644'  | -      | 1596'  |                                | " "            |
| Shale                 | 1644' | 1710'  | -      | -      |                                | " "            |
| Cherry Grove Sand     | 1710' | 1818'  | -      | -      |                                | " "            |
| Shale                 | 1818' | 1886'  | -      | -      |                                | " "            |
| Cooper Sand           | 1886' | 1943'  | -      | 1891'  |                                | " "            |
| Shale                 | 1943' | 2000'  | -      | -      |                                | " "            |
| Log T.D.              |       | 2000'  |        |        |                                | S.L.M.         |



|                                     |                    |             |              |
|-------------------------------------|--------------------|-------------|--------------|
| Pennhills Resources Proposed Wells: | WT 1072 11         | 41.63941912 | -79.02529228 |
|                                     | WT 1072 12         | 41.63796584 | -79.02520306 |
|                                     | WT 1072 13         | 41.63675419 | -79.02520306 |
|                                     | WT 1072 14         | 41.6352793  | -79.0343113  |
|                                     | WT 1072 15         | 41.63429812 | -79.03478233 |
|                                     | WT 1072 16         | 41.63427212 | -79.03306829 |
|                                     | WT 1072 17         | 41.63408913 | -79.03142424 |
|                                     | WT 1072 18         | 41.6348101  | -79.0307068  |
| Driller's Logs:                     | 37-123-29988-00-00 | 41.633114   | -79.030482   |
|                                     | 37-123-47279-00-00 | 41.64011346 | -79.03061645 |
|                                     | 37-123-31036-00-00 | 41.63704432 | -79.02388499 |
|                                     | 37-123-31035-00-00 | 41.63831277 | -79.02402719 |
|                                     | 37-123-34648-00-00 | 41.64039898 | -79.02423965 |

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.

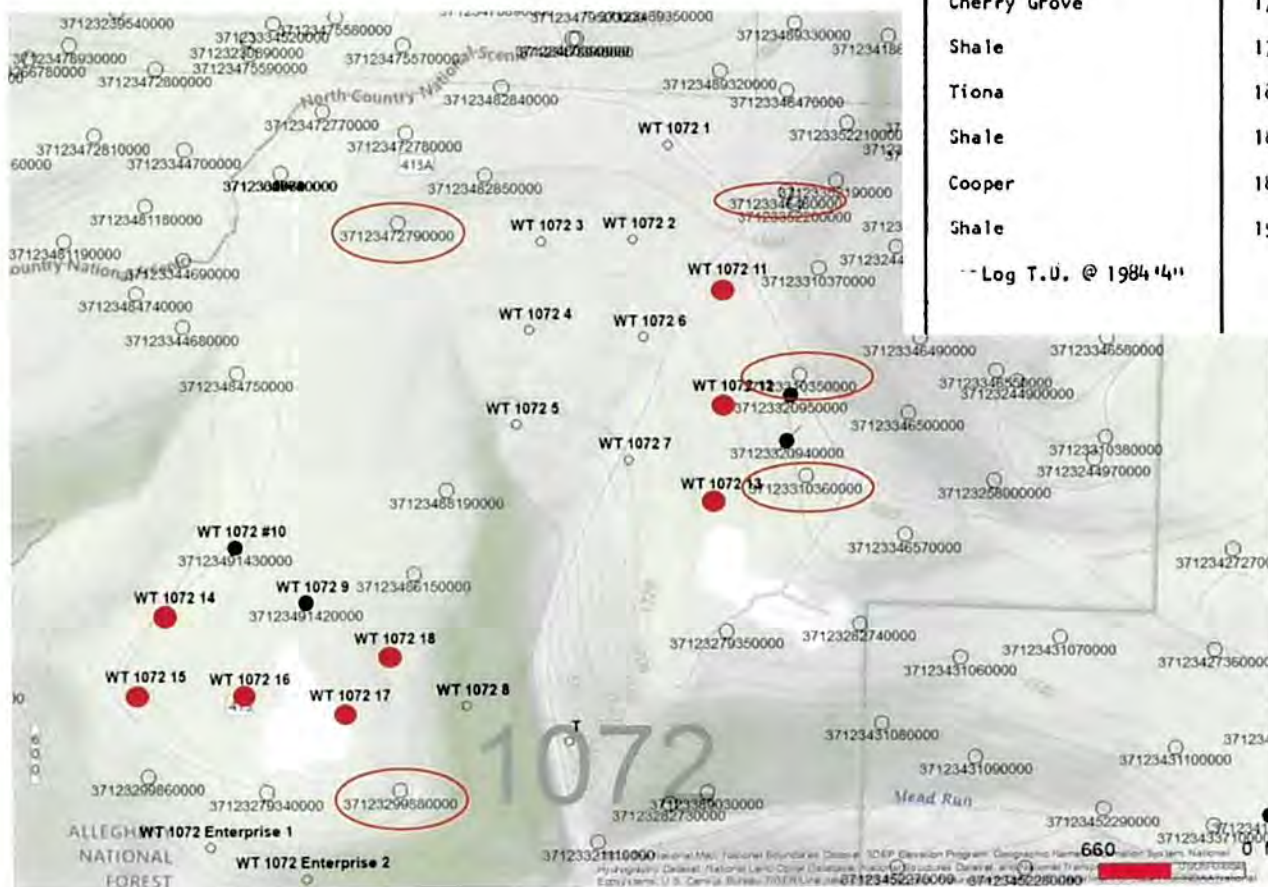
No coal noted on driller's logs within 1 sq. mile area.

37-123-34648-00-00

# FORMATIONS

| NAME                  | TOP   | BOTTOM   | GAS AT | OIL AT | WATER AT (FRESH OR SALT WATER) | SOURCE OF DATA |
|-----------------------|-------|----------|--------|--------|--------------------------------|----------------|
| Fill, Brown Sand      | 0'    | 30'      | -      | -      | -                              | Driller's Log  |
| Sand & Shale          | 30'   | 832'     | -      | -      | 143' (Fresh)                   | " "            |
| Pink Rock, Grey Shale | 832'  | 1475'    | -      | -      | -                              | Electric Log   |
| Silt & Shale          | 1475' | 1596'    | -      | -      | -                              | " "            |
| Clarendon             | 1596' | 1617'    | -      | -      | -                              | " "            |
| Shale                 | 1617' | 1648'    | -      | -      | -                              | " "            |
| Balltown              | 1648' | 1630'    | -      | -      | -                              | " "            |
| Shale                 | 1630' | 1705'    | -      | -      | -                              | " "            |
| Cherry Grove          | 1705' | 1779'    | -      | -      | -                              | " "            |
| Shale                 | 1779' | 1815'    | -      | -      | -                              | " "            |
| Tiona                 | 1815' | 1843'    | -      | -      | -                              | " "            |
| Shale                 | 1843' | 1882'    | -      | -      | -                              | " "            |
| Cooper                | 1882' | 1935'    | -      | -      | -                              | " "            |
| Shale                 | 1935' | 1984' 4" | -      | -      | -                              | " "            |

-- Log T.U. @ 1984' 4"





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

**OIL AND GAS OPERATOR  
OWNERSHIP AND CONTROL INFORMATION**

PLEASE TYPE OR PRINT

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                             |                                                                                                                                                                 |                                                         |                                                         |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------------------------------------|--|
| <b>GENERAL OPERATOR INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                             | Enter the name and address under which you or your organization operate oil and gas wells in Pennsylvania which must be the same name as is providing the bond. |                                                         |                                                         |  |
| Corporate, Company, Partnership or Registered Fictitious Name<br><b>Pennhills Resources, LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                        |                             | Type of Organization / Code<br><b>Limited Liability Company</b>                                                                                                 |                                                         | Federal Tax ID#<br><b>01-0968862</b>                    |  |
| Individual or Partner - Last Name<br><b>Morris</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | First Name<br><b>Stuart</b> | MI<br><b>J</b>                                                                                                                                                  | Suffix                                                  |                                                         |  |
| Mailing Address<br><b>3055 Route 219</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                             |                                                                                                                                                                 |                                                         | <input type="checkbox"/> Check if this is a new address |  |
| City<br><b>Kane</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | State<br><b>PA</b>          | ZIP+4<br><b>16735</b>                                                                                                                                           | Country (If Other Than USA)                             |                                                         |  |
| Phone (Daytime)<br><b>814.975.3009</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Ext.                        | FAX<br><b>814.996.4950</b>                                                                                                                                      | Email Address<br><b>s.morris@pennhillsresources.com</b> |                                                         |  |
| Person to Contact - Last Name<br><b>Morris</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | First Name<br><b>Stuart</b> | MI<br><b>J</b>                                                                                                                                                  | Suffix                                                  | Title<br><b>CEO</b>                                     |  |
| <p>If the applicant is an individual or partnership operating under a name that is different than your full personal name, the name must be registered as a fictitious name with the Department of State. Please attach a copy of your <b>APPROVED</b> fictitious name registration. <input type="checkbox"/> Registration attached <input checked="" type="checkbox"/> Registration previously submitted and still active.</p>                                                                                                         |                             |                                                                                                                                                                 |                                                         |                                                         |  |
| <p>If the applicant is a domestic or foreign corporation or limited liability company, it must be registered to conduct business in Pennsylvania with the Department of State. Please attach a copy of your <b>APPROVED</b> corporate registration or authorization to conduct business in Pennsylvania.</p> <p><input type="checkbox"/> Registration attached <input checked="" type="checkbox"/> Authorization to conduct business in PA attached <input type="checkbox"/> Registration previously submitted still active</p>         |                             |                                                                                                                                                                 |                                                         |                                                         |  |
| <p>If the applicant has <b>NO parent company</b>, check the following box.</p> <p><input checked="" type="checkbox"/> <b>No parent.</b></p> <p>If the applicant has a <b>parent company</b>, include the following information for the parent company: the name of the company, its address, phone number, taxpayer ID No., and state of incorporation, if the company is a corporation.</p> <p>Name _____ Phone No. ( ) _____</p> <p>Address _____ Taxpayer ID No. _____</p> <p>_____ If corporation, state of incorporation _____</p> |                             |                                                                                                                                                                 |                                                         |                                                         |  |

If the applicant has **NO subsidiaries**, indicate by checking the following box.

☒ **No subsidiary.**

If the applicant has **one or more subsidiaries**, include the following information for each subsidiary company: the name of the company, its address, phone number, taxpayer ID No., and state of incorporation, if the company is a corporation.

**Name** \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

**Address** \_\_\_\_\_ Taxpayer ID No. \_\_\_\_\_

\_\_\_\_\_ If corporation, state of incorporation \_\_\_\_\_

**Name** \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

**Address** \_\_\_\_\_ Taxpayer ID No. \_\_\_\_\_

\_\_\_\_\_ If corporation, state of incorporation \_\_\_\_\_

**Name** \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

**Address** \_\_\_\_\_ Taxpayer ID No. \_\_\_\_\_

\_\_\_\_\_ If corporation, state of incorporation \_\_\_\_\_

**Name** \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

**Address** \_\_\_\_\_ Taxpayer ID No. \_\_\_\_\_

\_\_\_\_\_ If corporation, state of incorporation \_\_\_\_\_

**Name** \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

**Address** \_\_\_\_\_ Taxpayer ID No. \_\_\_\_\_

\_\_\_\_\_ If corporation, state of incorporation \_\_\_\_\_

(Attach additional sheet, in the same format, if necessary.)

## SIGNATURES

Under penalty of law, the undersigned hereby certify that they have the authority to submit this application on behalf of the applicant, that they have reviewed the information contained in this application and certify that the information is true and correct to the best of their knowledge and belief.

Pennhills Resources, LLC

(Print Name of Applicant)

Stuart J. Morris

(Print Name & Title of Signatory)

Date 3-25-2026



(Signature)

Please call 717-772-2199 with any questions.