

## **GEOTHERMAL EXPLORATION** PERMIT APPLICATION (Geothermal Form 1)

APPLICATION TO:	□ DRILL	☐ RE-DRILL	□ DEEPEN	
Application to drill mus	t be submitted to the	Geothermal Supervisor,	Department of Natura	al Resources, Division of Geology
and Earth Resources, M	S 47007, Olympia, V	WA 98504-7007, and app	proval must be obtained	ed before drilling begins. Submit
this application, accomp	anied by a complete	d State Environmental Po	olicy Act (SEPA) chec	cklist, Geothermal Blanket Drilling
Bond and appropriate p	ermit fee, which sha	ll be in cash or a check d	rawn upon or issued l	ov a Washington State qualified

DRILLIN	G PERMIT FEE SCHEDUI	Æ
Fees:		
To drill, re-drill, or deepen	\$ 200	
Bonds (Geothermal Supervisor sets amount): One exploration well	\$15,000 minimum	
Blanket bond (two or more exploration wells)	\$15,000 minimum \$50,000 minimum	
One core hole (temperature-gradient hole)	\$ 5,000 minimum	
Blanket bond (two or more core holes)	\$25,000 minimum	
<b>Note:</b> Each person who succeeds to the rights and within 10 days after the rights are acquired, notify		11,
NAME OI	F COMPANY OR OPERATO	)R
Name:		Phone:
Address:	Email:	
City/State/Zip:	Fax:	
DESCRIPTI	ON OF LEASE OR PROPE	RTY
		Phone:
Fee owner:		
Fee owner:		
		Email:
Address:		Email: Fax:
Address:City/State/Zip:	me and number:	Email: Fax:
Address: Well nar	me and number:	Email: Fax: Phone:
Address:  City/State/Zip:  Number of acres:  Surface owner if not mineral owner:	me and number:	Email: Email: Phone: Email:
Address:  City/State/Zip:  Number of acres: Well nate   Surface owner if not mineral owner:  Address:	me and number:	Email: Fax: Phone: Email: Fax:
Address: Well name Surface owner if not mineral owner: Address: City/State/Zip: Number of wells on lease: Acres ass	me and number:	Email: Fax: Phone: Email: Fax:
Address: Well name Surface owner if not mineral owner: Address: City/State/Zip: Number of wells on lease: Acres ass	me and number:  signed to well:  OCATION OF WELL	Email: Fax: Phone: Email: Fax:

## LOCATION OF WELL (Continued)

Nearest distance from prop	osed well to prope	erty or lease line:		feet	
Distance from proposed well to nearest completed or applied for well on same lease:					feet
Proposed depth to be drilled	d:	feet	Elevation of surfa	ice:	feet
Draw a sketch in the space location of the proposed we (1) the nearest sec (2) the nearest lea (3) the nearest we	ell and show distar etion lines, both no se lines on all side	nces and direction orth (or south) and es of this location	n from the well to: d east (or west)		sketch must show the
Give names of adjoining le	ase or property ow	ners and designa	ate property lines.		
Section(s)	, T	N, R	$\square$ (E) $\square$ (W)	Indicate scale used	d:
If different from the above-should be sent:	named company o	or operator, give i	name and address	to which correspon	dence regarding this well
Name:				Phone:	
Address:				Email: _	
City/State/Zip:				Fax:	
		NC	RTH		
WEST					EAST

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SOUTH

## **AFFIDAVIT**

I,		(	(print or type name), being first duly sworn on oath, state that
			ained on this form are true and correct.
Subscribed and swo	orn to before me		
This	day of	, 201,	at
			My commission expires:
	Notary Public		
			Signature:
			Name:
			Position:
Representing (comp	oany or operator):		
Address:			Phone:
City/State/Zip:			Email:
		ACTION OF	ACENCY
☐ Approved	Date:		
☐ Denied	Date:		
iii Beilled	Date.		<u> </u>
			Washington Department of Natural Resources
			Division of Geology and Earth Resources
			Ву
			Name:
			Title:
Permit no(To be filled in by S	upervisor. This number sho	 ould always be used	d in correspondence relating to this well.)
This permit issued u	under bond dated		
Ву			, Principal