

OIL & GAS DRILLING PERMIT APPLICATION (Oil & Gas Form 1)

APPLICATION TO:

DRILL **RE-DRILL** □ DEEPEN \Box STRAT HOLES

Application to drill must be submitted to the Oil and Gas Supervisor, Department of Natural Resources, Division of Geology and Earth Resources, MS 47007, Olympia, WA 98504-7007, and approval must be obtained before drilling begins. Submit this application, accompanied by a completed State Environmental Policy Act (SEPA) checklist, Oil & Gas Blanket Drilling and Production Bond, and appropriate permit fee, which shall be in cash or a check drawn upon or issued by a Washington State qualified depository and payable to the Department of Natural Resources.

DRILLING PERMIT FEE SCHEDULE

Fees:		
To drill, re-drill, or deepen	to 3500 feet	\$ 250
	3501-7000 feet	\$ 500
	7001-12,000 feet	\$ 750
	12,001 feet plus	\$1,000
Shallow (less than 2,000 feet, for geologic information only)		\$ 100
Notification for seismic shot holes		\$ 100

Note: Each person who succeeds to the rights and obligations under this permit shall, within 10 days after the rights are acquired, notify the Supervisor in writing thereof.

NAME OF COMPANY OR OPERATOR

Name:	Phone:
Address:	Email:
City/State/Zip:	Fax:
DESCRIPTION OF LEASE OR PROPERT	Y
Fee owner:	Phone:
Address:	Email:
City/State/Zip:	Fax:
Number of acres:Well name and number:	
Surface owner if not mineral owner:	Phone:
Address:	Email:
City/State/Zip:	Fax:
Number of wells on lease: Acres assigned to well:	_
LOCATION OF WELL	
Field or general vicinity: County:	
Well location:	

(Give latitude/longitude in decimal degrees and section, township, and range with footage from section lines.)

LOCATION OF WELL (Continued)

Nearest distance from propose	d well to proper	rty or lease line:		feet	
Distance from proposed well to	o nearest compl	eted or applied	for well on same l	ease:	feet
Proposed depth to be drilled:		feet	Elevation of surfa	ace:	feet
Draw a sketch in the space bell location of the proposed well a (1) the nearest section (2) the nearest lease 1 (3) the nearest wells	nd show distand n lines, both not lines on all sides	ces and direction rth (or south) an s of this location	n from the well to: d east (or west)		e sketch must show the
Give names of adjoining lease	or property own	ners and designa	ate property lines.		
Section(s)	, T	N, R	\Box (E) \Box (W)	Indicate scale use	ed :
If different from the above-nar should be sent:	ned company of	r operator, give	name and address	to which correspo	ndence regarding this well
Name:				Phone:	
Address:				Email:	
City/State/Zip:				Fax:	
		NC	ORTH		
WEST			UTH		EAST

AFFIDAVIT

		<i>(print or type name)</i> , being first duly sworn on oath, state and matter contained on this form are true and correct.
Subscribed and swor	-	
This	day of	, 201, at
		My commission expires:
	Notary Public	
		Signature:
		Name:
		Position:
Representing (comp	any or operator):	
Address:		Phone:
City/State/Zip:		Email:
Denied	Date:	
	Washington Department of Natural Reso Division of Geology and Earth Reso	
	By	
	Name:	
		Title:
Permit no	upervisor. This number sho	 Id always be used in correspondence relating to this well.)
Γhis permit issued u	nder bond dated	
Ву		, Principal