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

APPLICATION TO: □ DRILL □ DEEPEN □ RE-DRILL □ 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 PROPERTY

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 proposed well to property or lease line: ___________________ feet

Distance from proposed well to nearest completed or applied for well on same lease: ___________________ feet

Proposed depth to be drilled: ___________________ feet  Elevation of surface: ___________________ feet

Draw a sketch in the space below and attach a map of the well location by a licensed surveyor. The sketch must show the location of the proposed well and show distances and direction from the well to:

(1) the nearest section lines, both north (or south) and east (or west)
(2) the nearest lease lines on all sides of this location
(3) the nearest wells on all sides of this location.

Give names of adjoining lease or property owners and designate property lines.

Section(s) ____________________ , T ______ N, R _____ ☐ (E) ☐ (W)  Indicate scale used : ________________

If different from the above-named company or operator, give name and address to which correspondence regarding this well should be sent:

Name: ______________________________________________________________  Phone:  _____________________
Address:  _____________________________________________________________  Email:  _____________________
City/State/Zip:  ________________________________________________________  Fax:  _______________________

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AFFIDAVIT

I, ______________________________________________ (print or type name), being first duly sworn on oath, state that to the best of my knowledge and belief the facts and matter contained on this form are true and correct.

Subscribed and sworn to before me

This ______________ day of ______________, 201__, at __________________________

My commission expires: __________________________

__________________________________________________
Notary Public

Signature: ______________________________________

Name: ______________________________________

Position: ______________________________________

Representing (company or operator): __________________________

Address: ____________________________________________ Phone: ______________________

City/State/Zip: __________________________ Email: ______________________

ACTION OF AGENCY

☐ Approved Date: __________________________

☐ Denied Date: __________________________

Washington Department of Natural Resources
Division of Geology and Earth Resources

By ______________________________________

Name: ______________________________________

Title: ______________________________________

Permit no. __________________________

(To be filled in by Supervisor. This number should always be used in correspondence relating to this well.)

This permit issued under bond dated __________________________

By ______________________________________, Principal