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

# AREA OF REVIEW LANDOWNER SURVEY DEVELOPMENT PLAN OPTION INSTRUCTIONS (Unconventional Operations Only)

#### **GENERAL INFORMATION**

The following instructions are designed to assist the applicant in properly completing the *Area of Review Landowner Survey Development Plan Option (Unconventional Operations Only)* form. Pursuant to 25 Pa. Code Section 78a.52a (relating to Area of Review), unconventional operators who are planning to drill new wells are required to submit a questionnaire to landowners in an effort to identify all nearby offset oil and gas wells. As part of this regulation, the operator must send a questionnaire form to surrounding landowners within 1,000 feet of the proposed new well.

The Area of Review Landowner Survey Development Plan Option is intended to facilitate the collection of information on offset wells from multiple landowners and in association with multiple new well locations. Operators choosing this option must download the <u>electronic form</u> and use it to compile the necessary information. The responsible Department of Environmental Protection (DEP) inspector must provide written approval to extend the period of use for information collected under the development plan option from three to five years. The Area of Review Landowner Survey (Unconventional Operations Only), form <u>8000-FM-OOGM0148U</u>, must be used to gather the necessary information for populating the electronic form.

#### **INSTRUCTIONS**

In the header section of the form, enter the operator name, Department of Environmental Protection (DEP) ID/OGO number, point of contact, and telephone number.

Provide the farm name; well number; and, if applicable, the serial number assigned to the well for tracking purposes. The farm name, well number, and serial number are the applicant's designations to identify the well the operator intends to hydraulically fracture. Next, enter the US Well Number or API number assigned to the well uses the following format: CCC-XXXXX. CCC represents the three-digit county code and XXXXX represents the unique 5-digit county ID. The sections of the US Well Number or API number must be separated by a dash (-). If an API number has not yet been assigned to the well, this space may be left blank and updated later. Enter the county and municipality names with the appropriate designation type [i.e.: city, borough (boro), or township (twp)] of the surface location of the well the operator intends to hydraulically fracture.

Enter the name of the current surface landowner for the property evaluated. If the surface landowner is a land management agency or commission, enter the name of the responsible agency or commission. If a local designee has been appointed by the surface landowner, enter the name of the designee in the space provided. Leave this space blank when not applicable. Enter the current mailing address, including street name and number, P.O. Box, city, state, and zip code for the parcel. If the parcel has no mailing address, provide the mailing address for the surface landowner or designee. Include the tax parcel ID for the tract of land where the offset well is located. Provide the telephone numbers for the surface landowner or their designee, including a home/business number, a cell phone number, and any other telephone number; and indicate the time of day when it is best to contact the surface landowner or their designee. It is not necessary to provide telephone numbers in association with all of the fields on the form and both telephone numbers and contact time may be left blank if the surface landowner was not responsive.

Enter "Y" if the landowner provided actionable information per DEP's *Guidelines for Implementing Area of Review Regulatory Requirement*, <u>Technical Guidance No. 800-0810-001</u>, otherwise enter "N." Any information that a landowner provides that can be supported by actual physical evidence of the existence of an offset well (photographs, maps, records, etc.) that may penetrate the zone of hydraulic fracturing influence should prompt operator action, provided access to the location is granted.

#### WELL INFORMATION

In the appropriate column, provide the number of active, inactive, abandoned, plugged, and orphan wells for which physical evidence was provided and access for inspection permitted. In lieu of this, the operator may list the US Well

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Number or API numbers/alternate well IDs provided in the <u>Area of Review Summary Table Report</u>. Any fields that do not apply should be left blank.

Provide the date that the survey information was completed for the parcel. For each parcel surveyed, this date marks the date from which the expiration date for information gathered is measured. If the landowner is unresponsive, the date entered should be the date at which the recommended period for response time ends in accordance with DEP's *Guidelines for Implementing Area of Review (AOR) Regulatory Requirement for Unconventional Wells*, <u>Technical Guidance No. 800-0810-001</u>. Indicate the number of years for which the survey remains valid. This is either three or five years. DEP must authorize an extension to five years in all cases. If an extension to five years has been provided, enter the name of the DEP employee authorizing this extension. Leave this field blank if no extension has been granted.

The operator comments column is optional and provided for additional information about the landowner survey process, as needed. Entries are limited to 255 characters or less.