

STATE OF OHIO
DEPARTMENT OF NATURAL
RESOURCES

Division of Oil and Gas
Resources Management
WELL PERMIT

API WELL NUMBER
34-155-2-4079-00-00

OWNER NAME, ADDRESS

KLEESE DEVELOPMENT ASSOCS
103 W MARKET ST 3RD FLOOR
WARREN

OH 44481

DATE ISSUED

8/20/2013

PERMIT EXPIRES

8/20/2015

TELEPHONE NUMBER

(330) 392-7899

IS HEREBY GRANTED PERMISSION TO: Salt Water Injection Well New Well

AND ABANDON WELL IF UNPRODUCTIVE

PURPOSE OF WELL: Water Injection - Disposal

COMPLETION DATE IF PERMIT TO PLUG:

DESIGNATION AND LOCATION:

LEASE NAME B & J NO 1 INJECTION (SWIW #33)
WELL NUMBER 1
COUNTY TRUMBULL
CIVIL TOWNSHIP VIENNA
TRACT OR ALLOTMENT
SURFACE FOOTAGE LOCATION 370' NL & 275' EL OF LOT 29
TARGET FOOTAGE LOCATION

SURFACE NAD27

X: 2504564
Y: 581858
LAT: 41.249208904635
LONG: -80.6649749988833

TARGET NAD27

TYPE OF TOOLS: Air Rotary

PROPOSED TOTAL DEPTH 9100 FEET
GROUND LEVEL ELEVATION 1157 FEET

GEOLOGICAL FORMATION(S):

KNOX - MT SIMON SANDSTONE

SPECIAL PERMIT CONDITIONS: Samples Requested, see attached letter
Salt Water Injection Well (Class II) Construction and Operating Conditions

CASING PROGRAM (CASING MUST BE CENTRALIZED AND IS SUBJECT TO APPROVAL OF THE OIL AND GAS INSPECTOR):

16" APPROX. 146' WITH CEMENT CIRCULATED TO SURFACE
11-3/4" APPROX. 580' WITH CEMENT CIRCULATED TO SURFACE
8-5/8" INTERMEDIATE APPROX. 1000' AND CEMENTED
4-1/2" CASING 8000' CEMENTED TO A MINIMUM OF 300' ABOVE INJECTION ZONE
2-7/8" TUBING SET ON A PACKER APPROX. 50' ABOVE INJECTION ZONE

This permit is NOT TRANSFERABLE. This permit, or an exact copy thereof, must be displayed in a conspicuous and easily accessible place at the well site before permitted activity commences and remain until the well is completed. Ample notification to inspector is necessary.

OIL AND GAS WELL INSPECTOR:

STEPHEN OCHS (330) 933-2090
THOMAS HILL - Supervisor (330) 283-3204
DISTRICT #: (330) 896-0616

INSPECTOR NOTIFICATION

The oil and gas inspector must be notified at least 24 hours prior to:

1. Commencement of site construction
2. Pit excavation and closure
3. Commencement of drilling, reopening, converting or plugback operations
4. Installation and cementing of all casing strings
5. BOP testing
6. Well stimulation
7. Plugging operations
8. Well pad construction

The oil and gas inspector must be notified immediately upon:

1. Discovery of defective well construction
2. Detection of any natural gas or H2S gas during drilling in urban areas
3. Discovery of defective well construction during well stimulation
4. Determination that a well is a lost hole
5. Determination that a well is a dry hole

FIRE AND EMERGENCY NUMBERS

FIRE: () - 911
MEDICAL SERVICE () - 911

Richard J. Simmers

CHIEF, Division of Oil and Gas Resources
Management

STATE OF OHIO
DEPARTMENT OF NATURAL
RESOURCES

Division of Oil and Gas
Resources Management
WELL PERMIT

API WELL NUMBER
34-155-2-4079-00-00

KLEESE DEVELOPMENT ASSOCS
103 W MARKET ST 3RD FLOOR
WARREN, OH 44481

PERMIT CONDITIONS – CLASS II SALTWATER INJECTION WELL – DRILL NEW WELL

**RE: Permit # 4079, SWIW #33, B & J No. 1, Vienna
Township, Trumbull County, Ohio**

Constructional conditions:

- 1. The 4-1/2" casing must be enclosed with Class A cement from the total depth to approximately 7700 feet (minimum of 300 feet above the top of the injection zone).**
- 2. Bow-string or rigid centralizers must be used to provide sufficient casing stand off and foster effective circulation of cement to isolate critical zones including aquifers, flow zones, voids, lost circulation zones, and hydrocarbon-bearing zones.**
- 3. No drilling into the Precambrian basement is allowed on Class II injection wells.**
- 4. Kleese Development Associates shall run at minimum, a gamma ray, compensated density-neutron, and resistivity geophysical log. A copy of this geophysical log must be submitted to the UIC Section within 48 hours after the geophysical logging has been accomplished.**
- 5. Prior to setting the tubing and packer, Kleese Development Associates shall run a radioactive tracer test or spinner survey to demonstrate that the injection fluids are going into the permitted injection zones. The Division recommends using the radioactive fluid versus the radioactive beads, if a tracer survey is to be accomplished. Copies of these logs shall be submitted to the Division within 48 hours after the geophysical logging has been accomplished.**
- 6. After completion of the well and setting of the tubing and packer, Kleese Development Associates shall run two downhole digital pressure gauges to record original reservoir pressure and perform a pressure fall-off test. The pressure fall-off test method will be provided Kleese Development Associates well in advance of the testing requirements.**
- 7. Injection tubing must be set on a packer at approximately 7950 feet. A 1/4", female, threaded fitting with a stop valve must be installed on the tubing and accessible at the surface.**
- 8. The annular space between the injection tubing and the 4-1/2" production casing must be filled with a fluid (e.g., freshwater with a corrosion inhibitor additive), pressure tested to at least 1845 psi, and monitored for at least 15 minutes with no more than a five percent**

decline in pressure. Additionally, the injection line must also be tested to 1845 psi for 15 minutes with no more than a five percent decline.

9. The UIC Section and the Mineral Resources Inspector must be notified at a minimum of 48 hours in advance of the time of cementing, placing and removing of casing, installation of the tubing and packer, testing of the casing, construction of the surface facilities, pressure testing of the injection line, and initial injection so that a representative of the Division can be present to witness the operations. The Division must also be notified in advance of any subsequent removal of the injection tubing or resetting the packer. A pressure test will also be required.
10. Surface facilities as proposed in the application are satisfactory and must be constructed under the supervision of a representative of the Division. A concrete pad with drain must be constructed so as to contain any spillage of saltwater during unloading from the trucks. Any proposed changes in the surface facilities must be submitted in writing and must have prior approval of the UIC Section.
11. **If an unloading pad is to be constructed, the underground concrete vault associated with the catch basin on the unloading pad shall be of one-piece construction and if the concrete vault has a detached lid, the lid must be exposed above the ground level. Additionally, the inside walls of the concrete vault shall be sealed with a salt-corrosion type material such as an asphalt-based coating to prevent deterioration of the vault from the brine water.**
12. A Well Construction Record (Form 8) must be submitted within 30 days after completion describing how the well was completed for injection operations. This report should include the amount and grade of tubing, type and depth of packer, treatment of the injection formation, testing of the system integrity, method used to monitor pressure in the annulus and injection tubing, and method used to monitor volumes of injected fluid.
13. **A Murphy Switch or other cut-off switch device must be in-line with the injection pump and set at the maximum allowable surface injection pressure of 1845 psi, so that the pump will automatically shut-down upon exceeding the maximum allowable surface injection pressure.**
14. **Kleese Development Associates shall notify the Division in writing prior to the initiation of injection operations and injection operations shall not commence until the Division provides Kleese Development Associates with written approval that authorizes injection. Operational conditions to the permit shall be issued with the written approval.**



Ohio Department of Natural Resources

JOHN R. KASICH, GOVERNOR

JAMES ZEHRINGER, DIRECTOR

REQUEST FOR DRILL CUTTINGS SAMPLES

In accordance with Ohio Revised Code, Section 1509.10 (C), the Ohio Department of Natural Resources, Division of Geological Survey requires a set of drill cuttings from the following well:

Operator: KLEESE DEVELOPMENT ASSOCS
 Phone: (330) 392-7899
 API #: _____
 Application #: aPATT022318
 Lease Name: KDA INJECTION WELL #1
 Located: Surface: _____
 Target: _____
 County: TRUMBULL
 Township: VIENNA
 Interval(s): Top of Knox to TD

The following *minimum* sample sizes are required:

Vertical hole, fluid	Every 10 ft., 25 grams dried OR 100 grams unwashed
Vertical hole, air	Every 50 ft., 25 grams dried
Horizontal	Every 90 ft., 25 grams dried

Sample hole and intervals must be clearly labeled.

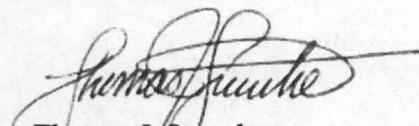
Samples collection and delivery are the responsibility of the operator. Please send the samples to:

ODNR Division of Geological Survey
 3307 S. Old State Rd.
 Delaware, OH 43015-9454

Your point of contact for sample shipment and delivery is:

Aaron Evelsizor
 Phone: (740) 548-7348 Ext. 130
 E-mail: aaron.evelsizor@dnr.state.oh.us

If requested, we will hold the samples confidential for a period of one (1) year from the date that the well reached total depth (TD). A request for confidentiality must be made in writing to the Division Chief.



Thomas J. Serenko
 Division Chief

Date requested
6/5/2013

DAILY ROUTE SLIP Vienna

APPLICATION NO. aPATT022317 TYPE: Salt Water Injection Well

CONAME KLEESE DEVELOPMENT ASS API

WELL NAME /NO. B & J NO 1 INJECTION 1

COUNTY 155 TRUMBULL INITIALS DATE

DATE APPLICATION REC'D pn 5/23/2013

PERMIT FEE AND CHECK NO. \$1,000.00 16364

RUSH AMOUNT RUSH CHECK NO. \$0.00 0

APPLICATION ENTERED pn 5/23/13

APPLICATIONS AND PLATS SENT FOR MINE APPROVAL AA NA

COAL APPROVAL RECEIVED AA NA

OIL/GAS AFFIDAVIT REC'D AA NA

URBANIZED AREA YES NO CAF 5/24/13

URBANIZED AREA NOTIFICATION SENT AA NA

PRE-PERMIT REVIEW SENT TO INSPECTOR/REC'D BACK AA 6-28-13

URBAN MAP REVIEW AA NA

STATE LAND YES NO AA NA

SAMPLES: /SPECIAL AREAS AA 6-5-13

GEOLOGIST APPROVAL pn 8/20/13

DATA ENTRY /ISSUED pn 8/20/13

PERMIT: TAKEN _____ MAILED pn 8/20/13

FAX TO: _____

FINAL MAP CHECK MS 8/20/13

COMMENTS: _____

Proof Sheet

APPL NUMBER aPATT022317
OWNER NUMBER 2655
OWNER NAME KLEESE DEVELOPMENT ASSOCS
EXISTING WELL 0
API PERMIT NO
APPL TYPE SWIW
TYPE OF WELL SWD
VARIANCE REQUEST
WELL NAME B & J NO 1 INJECTION
WELL NUMBER 1 (SWIW # 33)
PREV/PROPOSED TD 0
DRILL UNIT ACRES 0
TYPE OF TOOL RTA
WELL CLASS SWIW
FIRE PHONE () - 911
MEDICAL PHONE () - 911
COUNTY CODE 155
COUNTY NAME TRUMBULL
COAL (Y=-1/N=0) 0
CIVIL TOWNSHIP VIENNA
SURF QUAD GIRARD
Nad 27 SURF ORIG X 2,504,564
Nad 27 SURF ORIG Y 581,858
GROUND ELEVATION 1157
SURF SEC
SURF LOT 29
SURF QTR TWP
SURF ALLOT
SURF TRACT
SURF FRACTION

URBANIZED AREA ?
NAME

STATE LAND ?

MP Check # 0

PROPOSED FORMATIONS

~~NEWBURG/KNOX/MT SIMON~~

UTICA/PT PLEASANT

MARCELLUS

TARG COUNTY CODE

TARG COUNTY NAME

TARG CIVIL TWP

TARG QUAD

Nad 27 TARG ORIG X

Nad 27 TARG ORIG Y

TARG ELEV 0

TARG SECTION

TARG LOT

TARG QTR TWP

TARG ALLOT

TARG TRACT

TARG FRACTION

Proof Sheet

SURFACE FOOTAGE

370' NL & 275' EL of Lot 29

TARGET FOOTAGE

CASING PROGRAM

09	16	146
09	11 3/4	580
13	8 5/8	1000
32	4 1/2	8000
40	27/8	50

SPECIAL CONDITIONS/COMMENTS

Class II operational & construction conditions

COMPLETION DT

MINES APPROVAL

AFFIDAVIT APPROV

FINAL ENTRY DATE

SOURCES OF WATER

WATERSHED LAKE ERIE OHIO RIVER

RUMA ATTACHED

EST WITHDRAWAL RATE (GAL/DAY)

NON AGREEMENT AFFIDAVIT ATTACHED

EST TOTAL VOLUME (GALLONS)

WATER WELL SAMPLING RESULTS

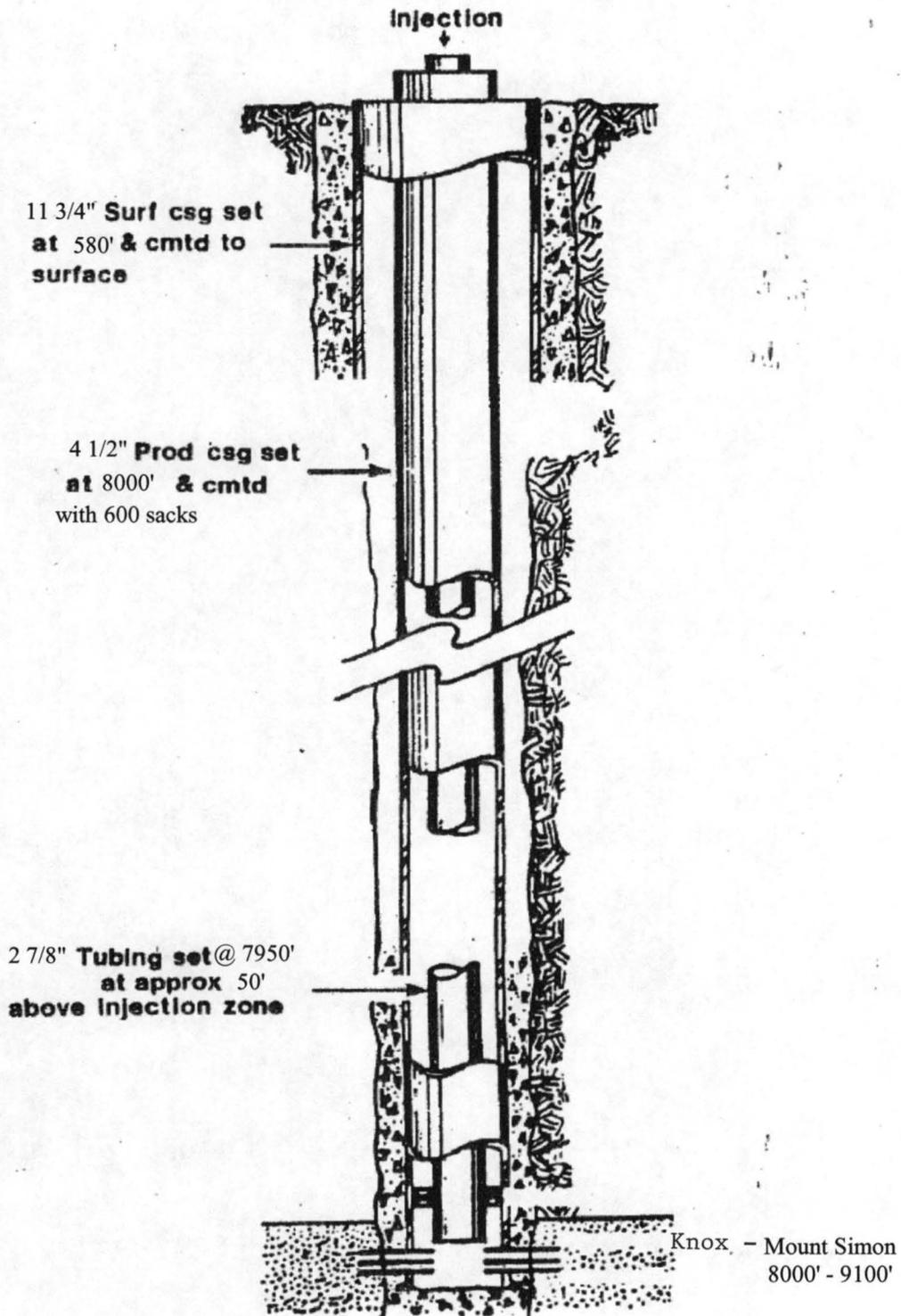
RECYCLED WATER EST TOTAL VOLUME (GALLONS)

DATE SUBMITTED

Trumbull County, Vienna Twp.,
SWIW # 32 B&J #1
P # 4079

**Subsurface Construction
For Injection Well**

Maximum Injection Pressure: 1845 psi



Total Depth: 9100'

#16364
81055

APPLICATION FOR A PERMIT (Form 1)
OHIO DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL AND GAS RESOURCES MANAGEMENT
2045 MORSE ROAD, BUILDING F-2
COLUMBUS, OHIO 43229-6693
(614) 265-6922

ALPHO 22317

SEE INSTRUCTIONS ON BACK

1. We (applicant) <u>Kleese Development Associates</u>		2. Owner #: <u>2655</u>	
Address: <u>103 West Market, Warren, OH 44481</u>		Phone #: <u>330-392-7899</u>	
hereby apply this date <u>May 17,</u> 20 <u>13</u> for a permit to:			
<input checked="" type="checkbox"/> Drill New Well	<input type="checkbox"/> Revised Location	<input type="checkbox"/> Convert	
<input type="checkbox"/> Drill Horizontally	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Deepen	
<input type="checkbox"/> Drill Directionally	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Reopen	
<input type="checkbox"/> Reissue	<input type="checkbox"/> Orphan Well Program	<input type="checkbox"/> Temporary Inactive	
3. TYPE OF WELL:			
<input type="checkbox"/> Oil & Gas	<input type="checkbox"/> Annular Disposal	<input checked="" type="checkbox"/> Saltwater Injection	
<input type="checkbox"/> Stratigraphic Test	<input type="checkbox"/> Gas Storage	<input type="checkbox"/> Other (explain): _____	
<input type="checkbox"/> Solution Mining*	<input type="checkbox"/> Enhanced Recovery* (*if checked, select appropriate box below)	<input type="checkbox"/> Observation	<input type="checkbox"/> Production/Extraction
<input type="checkbox"/> Input/Injection	<input type="checkbox"/> Water Supply		
4. IS THE WELL LOCATION OR PRODUCTION FACILITY(S) WITHIN AN URBANIZED AREA AS DEFINED BY 1509.01 (Y)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		19. TYPE OF TOOLS:	
		<input type="checkbox"/> Cable <input checked="" type="checkbox"/> Rotary (<input checked="" type="checkbox"/> Air <input type="checkbox"/> Fluid)	
		<input type="checkbox"/> Cable/Rotary <input type="checkbox"/> Service Rig	
5. MAIL PERMIT TO: <u>same as above</u>		20. SOURCE(S) OF GROUND AND/OR SURFACE WATER USED IN PRODUCTION OPERATION: <u>city water</u>	
6. COUNTY: <u>Trumbull</u>		Watershed: <input type="checkbox"/> Lake Erie <input checked="" type="checkbox"/> Ohio River	
7. CIVIL TOWNSHIP: <u>Vienna</u>		Estimated Withdrawal Rate (gal/day): _____	
8. SECTION: _____ 9. LOT: <u>29</u>		Estimated Total Volume (gal): _____	
10. FRACTION: _____ 11. QTR TWP: _____		If Recycled Water – Estimated Total Volume (gal): _____	
12. TRACT/ALLOT: _____		21. EMERGENCY TELEPHONE NUMBERS: (closest to well site):	
13. WELL #: <u>1</u>		Fire: <u>911</u>	
14. LEASE NAME: <u>B&J</u>		Medical: <u>911</u>	
15. PROPOSED TOTAL DEPTH: <u>9100</u>		22. MEANS OF INGRESS & EGRESS:	
16. PROPOSED GEOLOGICAL FORMATION(S): <u>Mt. Simon, Newburg, Knox</u>		Road: <u>Sodom Hutchings Rd.</u>	
17. DRILLING UNIT ACRES: <u>5</u>		23. ROAD USE FOR A HORIZONTAL WELL:	
18. IF PERMITTED PREVIOUSLY:		Maintenance Agreement Attached <input type="checkbox"/>	
API #: _____		Non-agreement Affidavit Attached <input type="checkbox"/>	
OWNER: _____		24. ARE THE SURFACE RIGHTS OWNED BY STATE OF OHIO?	
		Agency Name: _____	
		25. ATTACH LANDOWNER ROYALTY LISTING	

26. PROPOSED CASING AND CEMENTING PROGRAM								
Type Casing	Borehole Diameter (in)	Borehole Depth (ft)	Casing Diameter (in)	Casing Depth (ft)	Cement Volume (sacks)	Formation	Zone Tested or produced (✓ if Yes)	Hydraulic Fracturing (✓ if Yes)
Drive Pipe							<input type="checkbox"/>	<input type="checkbox"/>
Conductor	22"	146'	16"	146'	220sks	Sharon Sandstone	<input type="checkbox"/>	<input type="checkbox"/>
Mine String							<input type="checkbox"/>	<input type="checkbox"/>
Surface	14 3/4"	580'	11 3/4"	580'	265sks	Berea	<input type="checkbox"/>	<input type="checkbox"/>
1 st Intermediate	11 3/4"	1000'	8 5/8"	1000'	500sks	Ohio Shale	<input type="checkbox"/>	<input type="checkbox"/>
2 nd Intermediate							<input type="checkbox"/>	<input type="checkbox"/>
Production	7 7/8"	9100'	4 1/2"	8000'	600sks	Mt. Simon	<input type="checkbox"/>	<input type="checkbox"/>
Liner							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

I, the undersigned, being first duly sworn, depose and state under penalties of law, that I am authorized to make this application, that this application was prepared by me or under my supervision and direction, and that the facts stated herein are true, correct, and complete, to the best of my knowledge.

I, the undersigned, further depose and state that I am the person who has the right to drill on the tract or drilling unit and to drill into and produce from a pool and to appropriate the oil or gas that I produce therefrom either for myself or others as described in this application. And furthermore, I the undersigned, being duly sworn, depose and state at this time that I am not liable for any final nonappealable order of a court for damage to streets, roads, highways, bridges, culverts, or drainage ways pursuant to Section 5577.12 of the Ohio Revised Code (ORC). I, the undersigned, further depose and state that all notices required by 1509.06 (A) (9) ORC for this application have been duly provided by me. If applying for a permit to plug and abandon a well, I hereby certify that the written notices, as required in Section 1509.13, ORC, have been given.

That I hereby agree to conform with all provisions of Chapter 1509., ORC, and Chapter 1501., OAC, and all orders and conditions issued by the Chief, Division of Oil and Gas Resources Management.

Signature of Owner/Authorized Agent [Signature]
Name (Type or Print) Robert S. Kleese Title Partner

If signed by Authorized Agent, a certificate of appointment of agent must be on file.

Sworn to and subscribed before me this the 16th day of May, 2013

[Signature]
(Notary Public)
ROBERT F. BURKEY, NOTARY PUBLIC
My Commission Has No Expiration Date
(Date Commission Expires)

1101A

ROBERT E. BURKEY, NOTARY PUBLIC
My Commission Expires On _____



RESTORATION PLAN (Form 4)

Ohio Department of Natural Resources

Division of Oil and Gas Resources Management, 2045 Morse Road, Bldg. F-2, Columbus OH 43229-6693

RECEIVED

MAY 23 2013

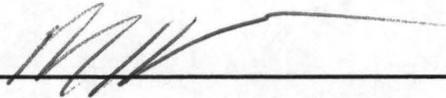
1. DATE OF APPLICATION: 5/17/13		3. API #: _____	
2. OWNER NAME, ADDRESS, & TELEPHONE NO.: Kleese Development Associates 103 West Market Warren, OH 44481 330-392-7899		4. WELL #: 1	
		5. LEASE NAME: B&J #1	
		6. PROPERTY OWNER: James & Robert Kleese	
		7. COUNTY: Trumbull	
		8. CIVIL TOWNSHIP: Vienna	
		9. SECTION: _____ 10. LOT: _____	
11. CURRENT LAND USE: <input type="checkbox"/> Cropland <input type="checkbox"/> Commercial <input type="checkbox"/> Pasture <input checked="" type="checkbox"/> Idle Land <input type="checkbox"/> Wetlands <input type="checkbox"/> Recreational <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Unreclaimed strip mine <input type="checkbox"/> Woodland: <input type="checkbox"/> Broadleaf <input type="checkbox"/> Needlelike		17. TYPE OF WELL: <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Other	
12. SLOPE GRADIENT & LENGTH DETERMINED FROM: <input checked="" type="checkbox"/> Ground Measurement <input type="checkbox"/> U.S. Geological Survey Topographical Maps <input type="checkbox"/> Other: (explain) _____		18. STEEPEST SLOPE GRADIENT CROSSING SITE: <input checked="" type="checkbox"/> 0 to 2% <input type="checkbox"/> 2.1 to 8% <input type="checkbox"/> 8.1 to 10% <input type="checkbox"/> 10.1 to 24% <input type="checkbox"/> greater than 24%	
13. TYPE OF FALL VEGETAL COVER: <input type="checkbox"/> Little or no vegetal cover <input type="checkbox"/> Short grasses <input checked="" type="checkbox"/> Tall weeds or short brush (1 to 2 ft.) <input type="checkbox"/> Brush or bushes (2 to 6 ft.) <input type="checkbox"/> Agricultural crops <input type="checkbox"/> Trees with sparse low brush <input type="checkbox"/> Trees with dense low brush		19. LENGTH OF STEEPEST SLOPE CROSSING SITE: <input checked="" type="checkbox"/> 1 to 100 ft. <input type="checkbox"/> 101 to 200 ft. <input type="checkbox"/> 201 to 400 ft. <input type="checkbox"/> greater than 400 ft.	
14. SOIL & RESOILING MATERIAL AT WELLSITE: <input checked="" type="checkbox"/> Stockpile and protect topsoil to be used when preparing seedbed <input type="checkbox"/> Use of soil additives (e.g., lime, fertilizer) <input type="checkbox"/> No resoiling planned <input type="checkbox"/> Proposed alternative _____		20. RESTORATION OF DRILLING PITS: ** <input checked="" type="checkbox"/> Haul drilling fluids and fill pits <input type="checkbox"/> Use steel circulating tanks <input type="checkbox"/> Proposed alternative _____	
15. DISPOSAL PLAN FOR TREES AND TREE STUMPS: <input checked="" type="checkbox"/> No trees disturbed <input type="checkbox"/> Haul to landfill <input type="checkbox"/> Cut into firewood <input type="checkbox"/> Sell to lumber <input type="checkbox"/> Bury with landowner's approval company <input type="checkbox"/> Mulch small trees and branches, erosion control <input type="checkbox"/> Use for wildlife habitat with landowner approval <input type="checkbox"/> Proposed alternative _____		21. BACKFILLING AND GRADING AT SITE: <input checked="" type="checkbox"/> Construct diversions channeled to naturally established drainage systems <input type="checkbox"/> Construct terraces across slopes <input type="checkbox"/> Grade to approximate original contour <input type="checkbox"/> Grade to minimize erosion & control offsite runoff <input type="checkbox"/> Proposed alternative _____	
16. SURFACE AND SUBSURFACE DRAINAGE FACILITIES: <input checked="" type="checkbox"/> No existing drainage facilities for removal of surface and/or subsurface water <input type="checkbox"/> Tile drainage system underlying land to be disturbed <input type="checkbox"/> Drain pipe(s) underlying land to be disturbed <input type="checkbox"/> Surface drainage facilities on land to be disturbed		22. VEGETATIVE COVER TO BE ESTABLISHED AT SITE: <input checked="" type="checkbox"/> Seeding plan <input type="checkbox"/> Sod <input type="checkbox"/> Agricultural crops <input type="checkbox"/> Trees and/or Bushes <input type="checkbox"/> Proposed alternative _____	
		23. ADDITIONAL HOLES: <input checked="" type="checkbox"/> Rat/Mouse, if used, will be plugged	
		24. PROPOSED OR CURRENT LENGTH OF ACCESS ROAD: <input checked="" type="checkbox"/> 100 ft. or less <input type="checkbox"/> 101 to 500 ft. <input type="checkbox"/> 501 to 1500 ft. <input type="checkbox"/> greater than 1500 ft.	
		25. CURRENT LAND USE OF PATH OF ACCESS ROAD: <input type="checkbox"/> Cropland <input type="checkbox"/> Pasture <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Idle land <input type="checkbox"/> Wetlands <input type="checkbox"/> Recreational <input type="checkbox"/> Industrial <input type="checkbox"/> Residential <input type="checkbox"/> Unreclaimed strip mine <input type="checkbox"/> Woodland: <input type="checkbox"/> Broadleaf <input type="checkbox"/> Needlelike	

****PITS MUST BE FILLED WITHIN TWO MONTHS AFTER COMMENCEMENT OF THE WELL AND WITHIN FOURTEEN DAYS AFTER COMMENCEMENT OF THE WELL IN AN URBANIZED AREA.**

REQUIRED BY SECTION 1509.06 (A)(10), OHIO REVISED CODE - FAILED TO SUBMIT MAY RESULT IN AN ASSESSMENT OF CRIMINAL FINES NOT LESS THAN \$100.00 NOR MORE THAN \$2,000.00 OR CIVIL PENALTIES NOT LESS THAN \$4,000.00.

<p>26. SURFACING MATERIAL FOR ACCESS ROAD:</p> <p><input type="checkbox"/> Gravel <input type="checkbox"/> Brick and/or tile waste</p> <p><input checked="" type="checkbox"/> Slag <input type="checkbox"/> Crushed stone</p> <p><input type="checkbox"/> No surfacing material to be used</p> <p><input type="checkbox"/> Proposed alternative _____</p>	<p>29. STEEPEST SLOPE GRADIENT ON ACCESS ROAD:</p> <p><input checked="" type="checkbox"/> 0 to 5%</p> <p><input type="checkbox"/> 6 to 10%</p> <p><input type="checkbox"/> greater than 10%</p>
<p>27. PATH OF ACCESS ROAD TO BE DETERMINED BY:</p> <p><input type="checkbox"/> Landowner <input type="checkbox"/> Contractor</p> <p><input type="checkbox"/> Existing access road <input type="checkbox"/> Operator</p>	<p>30. APPROXIMATE LENGTH OF STEEPEST SLOPE ON ROAD:</p> <p><input checked="" type="checkbox"/> 0 to 100 ft. <input type="checkbox"/> 101 to 200 ft.</p> <p><input type="checkbox"/> 201 to 400 ft. <input type="checkbox"/> greater than 400 ft.</p>
<p>28. GRADING AND EROSION CONTROL PRACTICE ON ROAD:</p> <p><input checked="" type="checkbox"/> Diversions <input type="checkbox"/> Filter strips</p> <p><input checked="" type="checkbox"/> Drains <input type="checkbox"/> Riprap</p> <p><input type="checkbox"/> Open top culverts <input type="checkbox"/> Water breaks</p> <p><input checked="" type="checkbox"/> Outsloping of road</p> <p><input checked="" type="checkbox"/> Pipe culverts</p> <p><input type="checkbox"/> Proposed alternative _____</p>	<p>31. HAS LANDOWNER RECEIVED A COPY OF THIS RESTORATION PLAN?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>

The undersigned hereby agrees to implement all restoration operations identified on this form, and conform to all provisions of Section 1509.072 of the Ohio Revised Code, and to all Orders and rules issued by the Chief, Division of Oil and Gas Resources Management.

Signature of Owner/Authorized Agent 

Name (Typed or Printed) Robert S. Kleese Date 5/17/13

RESTORATION PLAN MUST BE SUBMITTED TO THE DIVISION IN DUPLICATE.