US Well No. (API No.) of Hydraulically Fractured Well	US Well No. (API No.)/ID of Well where Communication Incident was Observed	Adjacent Operator	Start Date	End Date	Environmental/ Safety Incident	Communication Type	Adjacent Lateral Effects

Latitude of Stage Midpoint for Well Undergoing Hydraulic Fracturing (DD)	Longitude of Stage Midpoint for Well Undergoing Hydraulic Fracturing (DD)	Latitude of Receiving Well (DD)	Longitude of Receiving Well (DD)	Bottomhole/Bit Location Latitude of Receiving Well (DD)	Bottomhole/Bit Location Longitude of Receiving Well (DD)	Landing Point Latitude of Receiving Well (DD)	Landing Point Longitude of Receiving Well (DD)	Kick Volume (bbls)	Frac Stage Fluid Volume (bbls)
							-		

Max Treatment Pressure (psi)	Average Treatment Pressure	Abnormal Treatment Volumes Noted	Abnormal Treatment Pressures Noted	Faults Present or Geologic Anomalies Noted	Orientation of Fault/Geologic Anomaly in Horizontal Plane	Brief Description	

PROTECTION

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

AREA OF REVIEW HYDRAULIC FRACTURING COMMUNICATION INCIDENT REPORT INSTRUCTIONS (Unconventional Operations Only)

GENERAL INFORMATION

The following instructions are designed to assist the applicant in properly completing the *Area of Review Hydraulic Fracturing Communication Incident Report (unconventional operations only)* form. Pursuant to 25 Pa. Code Section 78a.73 (relating to general provision for well construction and operation), unconventional operators who are stimulating wells by way of hydraulic fracturing are required to notify the Department of Environmental Protection (DEP) upon confirmation of a hydraulic fracturing communication incident. Following notification, an incident report must be provided to DEP.

To complete the *Area of Review Hydraulic Fracturing Communication Incident Report (unconventional operations only)*, unconventional operators must download the electronic form from the DEP website and use it to compile incident information. Upon completion of the incident report, the operator must submit the information electronically through the DEP website. In certain cases, operators may be required to complete additional activities to resolve the communication incident. When completing the form, please note that a separate line must be used for each unique well that was communicated with.

INSTRUCTIONS

API No. of Hydraulically Fractured Well

Enter the API No. assigned to the well that was undergoing hydraulic fracturing at the time of the communication incident. Use 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 API No. must be separated by a dash (-).

API No./ID of Well Where Communication Incident was Observed

Enter the API No., if known, or ID from Area of Review Report Summary Table of well that was communicated with. If the well was not identified as part of area of review survey and does not have API No., use the following nomenclature: (C1, C2, C3, etc.). If multiple wells were communicated with, use as many lines as are necessary.

Adjacent Operator

If an adjacent operator's well was involved in the communication incident, provide the OGO No. for that operator. Leave blank if it is the same as the operator who was conducting hydraulic fracturing activities. Indicate "No RP" if well does not have an operator associated with it.

Start Date

Enter the date that the communication incident was first confirmed in MM/DD/YYYY format.

End Date

Enter the date incident control was established at the well where the communication incident was observed, i.e., environmental or safety concerns mitigated. Leave blank if the incident is ongoing when the report is submitted. Use MM/DD/YYYY format.

Environmental/Safety Incident

Indicate "Y" if a surface release, water supply impact, other environmental impacts, or a well control or other safety incident has occurred, otherwise indicate "N."

8000-FM-OOGM0145U 8/2016 Instructions Communication Type

Please choose the type of hydraulic fracturing communication incident from the list of available options: Stimulation to Operating Well, Stimulation to Well Being Drilled, Stimulation to Abandoned/Orphan Well, Stimulation to Inactive Well, Stimulation to Plugged Well, or Other.

Adjacent Lateral Effects

Indicate "Y" if communication originated at horizontal well and intervening horizontal wells fall between the source of the communication and the well where the communication incident was observed, otherwise indicate "N."

Latitude of Stage Midpoint for Well Undergoing Hydraulic Fracturing (DD)

Provide the stage midpoint latitude, in decimal degrees, of the stage being hydraulically fractured when the communication incident was observed. If a vertical well was being hydraulically fractured, indicate the tophole location. This should be North American Datum of 1983 (NAD 83) and must meet the current DEP policy regarding locational accuracy (+/- 10 m).

Longitude of Stage Midpoint for Well Undergoing Hydraulic Fracturing (DD)

Provide the stage midpoint longitude, in decimal degrees, of the stage being hydraulically fractured when the communication incident was observed. If a vertical well was being hydraulically fractured, indicate the tophole location. This should be North American Datum of 1983 (NAD 83) and must meet the current DEP policy regarding locational accuracy (+/- 10 m).

Latitude of Receiving Well (DD)

Provide the latitude, in decimal degrees, representing the surface hole location of the well where the communication incident was observed. This applies for vertical wells or when the vertical section of an intentionally deviated is the point of entry for pressure/fluids associated with the well undergoing hydraulic fracturing. This should be North American Datum of 1983 (NAD 83) and must meet the current DEP policy regarding locational accuracy (+/- 10 m).

Longitude of Receiving Well (DD)

Provide the longitude, in decimal degrees, representing the surface hole location of the well where the communication incident was observed. This applies for vertical wells or when the vertical section of an intentionally deviated well is the point of entry for pressure/fluids associated with the well undergoing hydraulic fracturing. This should be North American Datum of 1983 (NAD 83) and must meet the current DEP policy regarding locational accuracy (+/- 10 m).

Bottomhole/Bit Location Latitude of Receiving Well (DD)

Provide the latitude, in decimal degrees, of the well where the communication incident was observed. If being drilled, indicate the bit location, otherwise indicate bottomhole location. This field applies for intentionally deviated wells only. This should be North American Datum of 1983 (NAD 83) and must meet the current DEP policy regarding locational accuracy (+/- 10 m).

Bottomhole/Bit Location Longitude DD of Receiving Well

Provide the longitude, in decimal degrees, of the well where the communication incident was observed. If being drilled, indicate the bit location, otherwise indicate bottomhole location. This field applies for intentionally deviated wells only. This should be North American Datum of 1983 (NAD 83) and must meet the current DEP policy regarding locational accuracy (+/- 10 m).

Landing Point Latitude of Receiving Well (DD)

Provide the landing point latitude, in decimal degrees, of the well where the communication incident was observed. This field applies for intentionally deviated wells only. This should be North American Datum of 1983 (NAD 83) and must meet the current DEP policy regarding locational accuracy (+/- 10 m).

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Landing Point Longitude of Receiving Well (DD)

Provide the landing point longitude, in decimal degrees, of the well where the communication incident was observed. This field applies for intentionally deviated wells only. This should be North American Datum of 1983 (NAD 83) and must meet the current DEP policy regarding locational accuracy (+/- 10 m).

Kick Volume (bbls)

Provide the volume of the kick, in barrels (bbls), circulated out of the well where the communication incident was observed. This field only applies to offset drilling scenarios when a kick was detected in association with the hydraulic fracturing communication incident.

Stage Fluid Volume (bbls)

Provide the volume of fluid pumped, in bbls, at the stage that was being hydraulically fractured during the time of the communication incident.

Maximum Treatment Pressure (psi)

Provide the maximum treatment pressure, in pounds per square inch (psi), at the stage that was being hydraulically fractured during the time of the communication incident.

Average Treatment Pressure (psi)

Provide the average treatment pressure, in psi, at the stage that was being hydraulically fractured during the time of the communication incident.

Abnormal Treatment Volumes Noted

Indicate "Y" if the treatment volume of the stage being hydraulically fractured at the time of the communication incident was significantly higher compared to adjacent stages; otherwise indicate "N."

Abnormal Treatment Pressures Noted

Indicate "Y" if the treatment pressure of the stage being hydraulically fractured at the time of the communication incident was significantly higher compared to adjacent stages; otherwise indicate "N."

Faults Present or Geologic Anomalies Noted

Indicate "Y" if the presence of faults or other geologic anomalies were observed, otherwise indicate "N."

Orientation of Fault/Geologic Anomaly in Horizontal Plane (degrees)

If any faults are present, provide azimuth in 0 to 360 degrees.

Brief Description

Provide additional details related to incident, as needed. Limit description to 255 characters or less.