# AREA OF REVIEW LANDOWNER SURVEY (Unconventional Operations Only)

## **GENERAL INFORMATION**

Unconventional operators who are planning to drill a new well are required to submit a questionnaire to landowners in an effort to identify all nearby offset wells pursuant to 25 Pa. Code Section 78a.52a (relating to area of review). As part of this process, the operator must send this questionnaire form to surrounding landowners within 1,000 feet of the proposed new well, which is shown approximately on the attached map.

This questionnaire is designed to solicit information that you may have regarding the location of existing well(s) within 1,000 feet of the proposed well. Although legacy wells may sometimes be apparent in the form of derricks or pump jacks, other evidence may be more prevalent and could include partially buried steel pipes, areas of subsidence, and small-diameter piping at the surface associated with historical gathering systems. While the landowner is not required to complete this form, this information could be useful to the operator and DEP with regard to future drilling plans.

OPERATOR AND WELL INFORMATION							
Operator Name	OGO No.						
Operator Address							
City	State Zip Code						
Operator Contact	Operator Telephone No. Email						
County of Proposed Well Site	Municipality of Proposed Well Site						

PROPERTY INFO	RMATION				
Surface Landowner Name			Surface Property Tax ID No.		
Property Address			Home Address (if different than Property Address)		
City	State	Zip Code	City State Zip Code		
Telephone No. (Home)	Telephone No. (Cell)	Telephone No.	(Other) Best Time of Day to Contact		

## FORM QUESTIONS

1. Are you aware of any active, inactive, abandoned, orphan or plugged oil/gas wells that are within 1,000 feet of the proposed new well (see attached map)? 
Yes No

If no, please proceed to question 4 to complete the questionnaire.

2. a. If yes to question 1, are you able and willing to show an operator representative physical evidence of the well(s) on your property? 
Yes No

b. If possible, please attach photograph(s) of the well(s) to this form submittal.

c. Please list the number of wells on the property: \_\_\_\_\_ No. of wells

#### 8000-FM-OOGM0148U 8/2016

3. a. If there is no physical evidence of oil/gas wells on your property, do you have other information (e.g., historic maps, well records, other documentation, etc.) regarding oil/gas wells within 1,000 feet of the proposed new well that you are willing to share with the operator? □ Yes □ No

**b.** If yes, it would be helpful if you could attach a copy of such documentation to this form.

4. Provided advanced notice is given, will you allow the operator access to your property to inspect wells identified on your property by you or that the operator identified from other sources? 
Yes No

### ADDITIONAL INFORMATION

If there is any additional information about wells on your property you wish to share, or if there is someone else you think might have additional information, please include that information below your signature or as a separate attachment.

Please note that unless you respond "yes" to questions 2a or 3a, and question 4, the operator will likely not contact you for additional information.

## FORM CERTIFICATION AND SIGNATURE

Form Certification: I hereby acknowledge that I have supplied true and correct information to the best of my knowledge. There is no penalty if the surface landowner does not complete this questionnaire.

Signature:			Date:	Date:		
Printed Name:						
Please return thi	s completed form t	o the operator desi	gnated above with	in ten (10) busi	ness days of receipt.	