# **Instructions for the On-line Application**

The Orphan Oil and Gas Well Plugging Grant Program application must be submitted online through the Electronic Single Application (ESA) website. **Paper and faxed copies will not be accepted**. This change allows DEP to expedite the review process. The link to the ESA website is: <a href="https://www.esa.dced.state.pa.us/Login.aspx">https://www.esa.dced.state.pa.us/Login.aspx</a>

### No documentation should be mailed to DEP.

### User Tips

- Electronic Single Application works best when accessed through Microsoft Edge or Google Chrome
- If you allow your screen to sit idle for 30 minutes or more, you will lose the data entered since your last save and will have to re-enter it.
- Save frequently.
- When completing the application, fields with a "•" are required fields. If a required field is skipped, you will be notified later in the application to return to the affected section to complete the field.
- Do not use special characters such as \,/,\*,&,\%,#, etc.
- If you have questions completing the application, please contact Enterprise eGrants Customer Service Center at 1-833-448-0647 or email at <a href="mailto:egrantshelp@pa.gov">egrantshelp@pa.gov</a>. Operating hours are Monday through Friday from 8:00 am to 6:00 pm EST.

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*Reminder*: If you have questions completing the application, please contact Enterprise eGrants Customer Service Center at 1-833-448-0647 or email at <a href="mailto:egrantshelp@pa.gov">egrantshelp@pa.gov</a>. Operating hours are Monday through Friday from 8:00 am to 6:00 pm EST.

# 1. Registration and Login

- Go to ESA login page <a href="https://www.esa.dced.state.pa.us/Login.aspx">https://www.esa.dced.state.pa.us/Login.aspx</a> and follow the instructions for creating a new account, or login with your existing account.
- Write down and save the <u>Username</u> and <u>Password</u> you have chosen. You will need this for later your grant documents.

#### **General Facts**

- Create a New Keystone Login Account Registration
  - Click Register and enter all of the information into the fields with a red asterisk (\*) next to them
    - · You will be asked to create your profile, login information and security questions.
  - If you have already created an account with another agency whose application uses the Keystone Login Service, you do not need to register another account with us.
  - If you create a Keystone Login account with us, you will be able to use this account with other agencies that use Keystone Login.
    - · Some additional information may be required for those agencies.
- · Keystone Login Services
  - There are many account options that can be configured for your Keystone Login account.
     Please see the help documents provided by the <u>Keystone Login Service</u>
  - Keystone Login account assistance or password resets, please contact the Keystone Global Help Desk at 877-328-0995
- For technical assistance with an application, please contact the appropriate resource center listed helow
  - DCED customers: Please contact the DCED Customer Service Center. Representatives are available Monday through Friday, from 8:30 AM until 5:00 PM, at 800-379-7448. Email inquiries can also be sent to ra-dcedcs@pa.gov.
  - Customers of all other agencies: Please contact the Enterprise eGrants Customer Service
    Center. Representatives are available Monday through Friday, from 8:00 AM until 6:00 PM, at
    833-448-0647. Email inquiries can also be sent to egrantshelp@pa.gov.

### Login

#### What's New?

For an overview of the changes in the new Single Application, please read <u>Help</u>.

Username	
Password	





#### Register

NOTE: If registering for the first time with Keystone Login, please include an email address with your account. It will be needed to successfully complete grant applications and grant processing.

Forgot Password
Forgot Username
Learn more about Keystone Login
Having Trouble Registering

# 2. Begin a New Application

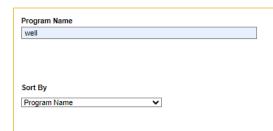
- Project Name Choose and enter a name for your project (have well in the project name).
- Do you need help selecting your program Select "No"
- Are you applying for assistance as outlined in a signed and accepted offer letter from the Governor's Action Team (GAT)? Select "No"
- Click on "Create a New Application"

Begin a New Application  To begin a new Single Application For Assistance, enter a brief name for the project (up to sixty characters) and answer whether you need	help selecting your program. If you already know the name of the program you want to apply for, answer "No".
Project Name	
well  Do you need help selecting your program?	
No V	
Are you applying for assistance as outlined in a signed and accepted offer letter from the Governor's Action Team (GAT)?	
No 🗸	
	CREATE A NEW APPLICATION

# 3. Select Program

- For Program Name enter "well"
- Scroll down and click "Search"

Select Program
To search for programs based on your organization and/or project, click the Program Finder button below





# 4. Apply

Scroll down through the various grant offerings, locate the "Orphan Oil and Gas Well Plugging Grant Program and click on "Apply."

# Orphan Oil and Gas Well Plugging Grant Program <u>Apply</u> Pennsylvania Department of Environmental Protection Act 136 of 2022 (Act of November 3, 2022 (P.L. 87, No. 136) (58 Pa.C.S. §§2811-2826)) establishes the Orphan Oil and Gas Well Plugging Grant Program and allocates federal funds to the Department of Environmental Protection (Department) for providing grants to help cover costs for orphan well plugging projects. Pennsylvania has hundreds of thousands of oil and gas wells drilled since 1859. This program provides a mechanism to clean out and plug orphaned wells that have the potential to cause health, safety or environmental concerns.

# 5. Requirements

- Enter the number of wells that you are applying for. The number of Orphan Wells you are applying for cannot exceed 5.
- Click "Continue"

### Requirements

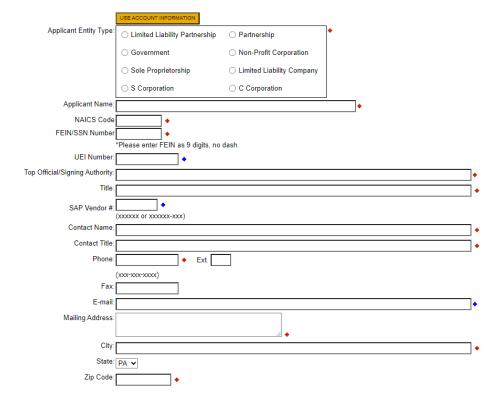
How may wells are you applying for? ♦

# 6. Applicant Information

- The Applicant Information section requires data related to the entity for which the application is being submitted.
- Applicant Entity Type select the appropriate type for your organization
- Applicant Name Enter the legal name, the name under which the entity legally conducts business.
- NAICS Code enter the appropriate code for your organization
- FEIN/SSN Number Enter the Federal Tax ID number for the legal name (no dashes).
- UEI Number Unique Entity Identifier. Enter the applying organization's unique, 12-character alphanumeric identifier which is assigned to all entities that conduct business with the federal government.
- Top Official/Signing Authority In this block, enter the authorized representative of the municipality.
- Title Enter the title of the authorized representative.
- SAP Vendor# Enter, if known.
- Contact Name Enter the primary contact name for this project.
- Contact Title Enter the primary contact title for this project.
- Phone and Fax Enter the phone and fax numbers for the primary contact title for this project.
- E-mail Enter the e-mail for the primary contact title for this project.
- Mailing address, City, State and Zip Code Enter this information for the primary contact for this project.
- Enterprise Type Select.
- Click "Continue"

### **Applicant Information**

To copy your Registration information into the application, click the "Use Account Information" button below.



# **Enterprise Type**

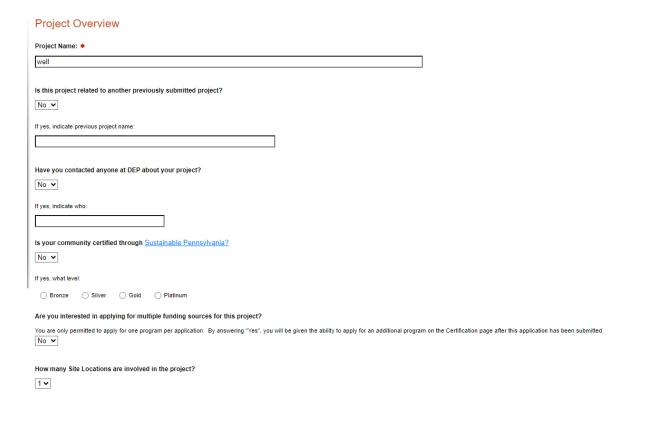
ndicate the types of enterprises that describe the organization listed above. You may select more than one type. 🔷 Agri-Processor Authority Biotechnology / Life Sciences Business Financial Services Call Center Child Care Center Commercial Community Dev. Provider Computer & Clerical Operators Defense Related Economic Dev. Provider Educational Facility Emergency Responder Exempt Facility Food Processing Government Healthcare Hospitality Industrial Manufacturing Mining Other Professional Services Recycling Regional & National Headquarters Research & Development Retail Social Services Provider Tourism Promotion Warehouse & Terminal



# 7. Project Overview

• Project Name – The project name will auto-populate. If you would like to change the name of the project, you can on this screen

The rest of the information in the Project Overview section is not required and does not need to be filled out.



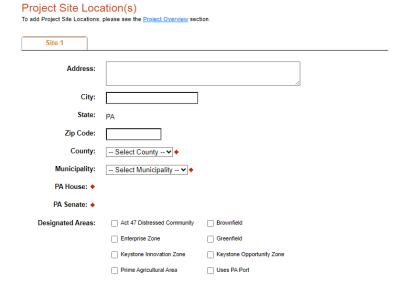
Click on "Continue"



Continue

# 8. Project Site

- Address Enter the address of the project **P.O. Boxes are not acceptable.**
- City, State and Zip Code Enter this information.
- County Select county from the dropdown box.
- Municipality Select municipality from the dropdown box.
- PA House and PA Senate These fields will be auto-populate based on the information entered above.
- Designated Areas Leave blank.



Click on "Continue"

Continue

# 9. Project Narrative

• This area does not need to be completed, please do not enter any information in the Project Narrative box. All relevant information for your application will be uploaded on the addendatab.

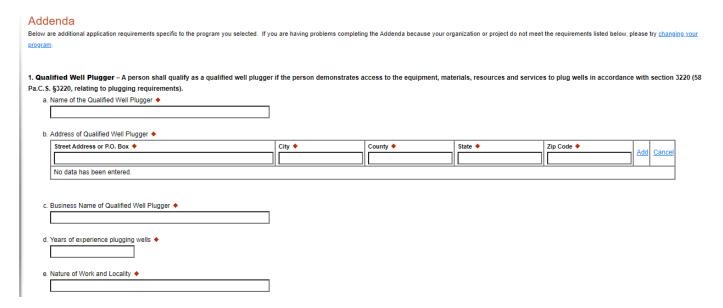


Click on "Continue"



# 10. Program Addenda

• Complete all fields in this section.



f.	Is the Qualified Well Plugger, th	ne person who is legally responsible for plugging the orphan well ? $lacktriangle$			
	If yes, Please explain				
	Character Count: 0 characters.				
g.	administered by the Departmer  If yes, Please explain	ugger, or a parent or subsidiary business entity of the Qualified Well P nt or a plan approval, permit or order of the Department? ◆	lugger, in continuing violation of any statute administered by the t	Department, a regulation	promulgated under a statute
	Character Count: 0 characters.		6		
	ell is considered eligible if it it 1. Be classified as an orpha 2. Has not been previously i 3. No amount of a bond und		58 Pa.C.S. §3220, relating to plugging requirements) prio illable to pay for the plugging of the orphan well.	or to Department appro	val of an applicant's application.
Plea	ase provide the following info 1. List eligible wells to be pli 2. Identify eligible wells with 3. Provide levels of methans	ugged; obvious or suspected contamination;			
Pe	rmit Number 🔶	Is obvious or suspected contamination to soil, groundwater, surface water or water supplies present at this well ? ◆	Please identify if methane emissions are detected at this was selecting the appropriate emission level.	Mell by Add Cancel	
No	data has been entered.				
A qua A "qu indivi weat spec type in #4 dilute quali	ialified measurement specialist idual can make measurements ther variables, etc., to maintain pialists should be aware of the keof legacy infrastructure. Therefor, particularly those relevant to the methane concentrations; therefied measurement specialist should be assurement specialist should be methane concentrations; therefied measurement specialist should be a sure of the sure of	efers to the contractor, partner, or agency employee who will be condu- will have training and field experience with the specific equipment and that meet the data quality objectives of these protocols. The measurer tersonal safety. Ideally the measurement specialist will have 20+ hours by variables affecting emission measurements from orphaned wells. Eure, detection and measurement at orphaned wells requires specific known in the specific measurement instrumentation they are using. The specialist fore, the qualified measurement specialist should be experienced with bould be prepared to submit data and results in a format that can be ea-	d methods that have been proposed and approved by the agency ment instrumentation, but also able to recognize and avoid/mitiga s of training and experience with the specific equipment type and missions from orphaned wells are typically lower than those of pri nowledge and training. Measurement specialists should be familia st should understand how the above factors affect methane detect the performance of the measuring instrument used and the rang sily incorporated into the relevant agency database tool to assure	y for use at the targeted vate safety hazards related d/or methods used to quai roducing wells and differ i ar with the reference docuction and measurement. Fige of wind conditions ove	vell sites. "Sufficient" means that the to the oil and gas well, field conditions, nitify methane emissions. Measurement n other ways such as age, condition, an arments provided in these guidelines belt- for example, high wind speeds can quic
Pleas	se provide initials for the above	acknowldgement. •			
the prelease	orotocol contained in the docu used by Department of the Inte surement guidelines are avail	ethane emissions were "Detected" or "Detected + may be high", a ument titled "Assessing Methane Emission from Orphaned Wells erior's Orphaned Wells Program Office on July 24, 2023 (Methane able on the Department of Interior's website at: <u>Orphaned Wells h</u> e methane assessment shall be conducted by a Qualified I	to Meet Reporting Requirements of the 2021 Infrastructure I Guidance) will be required to be submitted prior to receiving Methane Measurement Guidelines	Investment and Jobs Ac ng any approved reimbu	t: Methane Measurement Guidelines"
Pleas	se provide initials for the above	acknowldgement. •			

# 08/08/2024

5. The qualified well plugger has legal authority to access and perform the activities needed to plug each eligible well and will secure the necessary planning and permit approvals for the project prior to beginning we plugging activities.
☐ The applicant attests to the above. ◆
Please provide initials for the above acknowldgement. ◆
6. Is the Qualified Well Plugger also the landowner? ◆
Download Well plugging and restoration agreement.docx
Upload Files Use the control below to select your file. Each file can be no larger than 30MB.
File 1 Choose File No file chosen
7. The qualified well plugger will provide the documentation necessary for the department to comply with the provisions of section 2811(b) (relating to allocation of funding).  ☐ The applicant attests to the above. ◆
Please provide initials for the above acknowldgement. ◆
8. Each well plugged by the qualified well plugger will be plugged in accordance with section 3220 (relating to plugging requirements).  ☐ The applicant attests to the above. ◆
Please provide initials for the above acknowldgement. ◆
9. The qualified well plugger acknowledges the Davis-Bacon Act requirements for the award or project and confirms that all laborers and mechanics performing construction, alteration, or repair work on projects in excess of \$2,000 funded directly by or assisted in whole or in part by funding under the grant award are paid or will be paid wages at rates not less than those prevailing on projects of a character similar in the locality as determined by the Secretary of Labor in accordance with Subchapter IV of Chapter 31 of Title 40, United States Code.
Please provide initials for the above acknowldgement. ◆
10. Pennsylvania DEP identifies an EJ area where 20 percent or more individuals live at or below the federal poverty line, and/or 30 percent more of the population identify as non-white minority, based on data from the U.S. Census Bureau and the federal guidelines for poverty. DEP has created an interactive mapping tool called EJ Areas Viewer to determine the location of all EJ areas throughout the Commonwealth.  Are any eligible wells that the Qualified Well Plugger intends to plug in the next 12 months, if approved for a grant, located in an area designated as an Environmental Justice Community? Link to EJ Areas Viewer - PennEnviroScreen(pa.gov) •  PennEnviroScreen(pa.gov) •

### Budget for Orphan Oil and Gas Well Plugging Grant Program ◆

- Grant applications are limited to a 5 well maximum per applicant. Applicants are able to re-apply after a previously approved application's wells have been plugged in accordance with the requirements of the 2012 Oil and Gas Act, and other applicable measures as specified in the Technical Specifications, and the Grant Agreement, subject to availability of funds.
- Grant amounts are limited to \$40,000 for each eligible well plugged that is an orphan well of a depth of 3,000 feet or less or the actual cost of the qualified well plugger to plug the well, whichever is less.
- Grant amounts are limited to \$70,000 for each eligible well plugged that is an orphan well of a depth greater than 3,000 feet or the actual cost of the qualified well plugger to plug the well, whichever is less.

Orphan Well Type	Number Of Wells	Total Grant Amount
Orphan well of a depth of 3,000 feet or Less (Grant amounts limited to \$40,000 per well)	•	\$0.00
Orphan well of a depth greater than 3,000 feet (Grant amounts limited to \$70,000 per well)	•	\$0.00
Total	◆Total No. of Wells = 0	◆ Total Grant Amount = \$0.00

Click "Continue"



### 11. Certification and Submission

- If there is any missing information in your application, your screen will look similar to the following example.
- Under the "Application Certification" heading, it will state, "The following sections are incomplete. All required fields marked with a red diamond must be completed before you are able to submit this application".
- To add/correct the information on your application, click on the section heading to return to the page.

### Application Certification

#### The following sections are incomplete.

- All required fields marked with a red diamond (\*) must be completed before you are able to submit this application.
- All conditional fields marked with a blue diamond (\*) may be required to be completed before you are able to submit this application.

#### Applicant

- · UEI should be 12 characters
- · Entity Type is required.
- · Applicant Name is required.
- · NAICS Code is not a valid four digit code.
- · FEIN Number is required.
- · Top Official/Signing Authority is required.
- Title is required.
- · Contact Name is required.
- · Contact Title is required.
- Phone Number is required.
- Mailing Address is required.
- · City is required.
- · Zip Code is required.
- Enterprise Type is required.
- · Applicant Information has not saved correctly

#### Project Site Location(s)

- · Project Site 1: County is required.
- · Project Site 1: Municipality is required.
- Project Site 1: PA House District is required.
- · Project Site 1: PA Senate District is required.

#### Addenda

- Name Qualified Well Plugger is required.
- Address Well Plugger is required.
- · Business Name Well Plugger is required.
- · Years Experience is required.
- Nature of Work is required.
- · Legally Responsible is required.
- · Continuing Violation is required.
- Eligible Wells is required.
- · Methane Measurement Acknowledgement Initials is required.
- Methane Measurement Guidelines Initials is required.
- Legal Authority Acknowledgement Initials is required.
- Is Qualified Well Plugger also the Landowner is required.
- Well Plugging Restoration Agreement has not been uploaded.

### 12. Complete the following fields:

- Indicate certification of application information by checking the related checkbox under the Electronic Signature Agreement.
- Indicate identity as one of the following:
  - o I am the applicant.
  - o I am an authorized representative of the company, organization or local government.
  - o I am a "Certified" Partner representative.
- Type your name in the "Type Name Here" block. This will serve as your official e-signature and authorizes your application.
- Check the "Electronic Attachment Agreement" box.
- Click on "Submit Application."

### **Application Certification**

All of the required sections of the web application have been completed. If you have reviewed the application, you may submit it for processing. After submitting, you will no longer be able to make changes.

#### Electronic Signature Agreement:

O I am the applicant.

□By checking this box and typing your name in the below textbox, I hereby certify that all information contained in the single application and supporting materials submitted via the Internet and its attachments are true and correct and accurately represent the status and economic condition of the Applicant, and I also certify that, if applying on behalf of the applicant, I have verified with an authorized representative of the Applicant that such information is true and correct and accurately represents the status and economic condition of the Applicant. I also understand that if I knowingly make a false statement or overvalue a security to obtain a grant and/or loan from the Commonwealth of Pennsylvania, I may be subject to criminal prosecution in accordance with 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) and 31 U.S.C. §§ 3729 and 3802 (relating to false claims and statements).

$\bigcirc$ I am an authorized representative of the company, organization or local government	ent
○ I am a "Certified" Partner representative.	
Type Name Here:	

#### Electronic Attachment Agreement:

□Along with the web application, if you have been requested or need to send any documentation to DEP please print and send a copy of your E-Signature and mail it to DEP along with any paper supporting documents. You will be given an opportunity to print the signature page along with a copy of the application immediately after you submit.



### 13. Application Receipt Verification

- If you want a copy of your application, click the "Print Entire Applications with Signature Page" link. You will always be able to access your application with the username and password you created at the beginning of the application.
- Make sure to note the Single Application ID#. All future correspondence from the Department will reference this number.
- You do not need to send the signature page and/or any further documentation to the Grants Center. All the information needed is contained in your online submission.

# **Application Certification**

Single Application ID #: 202408016049

The web application has been successfully submitted for processing.

I hereby certify that all information contained in the single application and supporting materials submitted via the Internet, Single Application # 202408016049 and its attachments are true and correct and accurately represent the status and economic condition of the Applicant, and I also certify that, if applying on behalf of the applicant, I have verified with an authorized representative of the Applicant that such information is true and correct and accurately represents the status and economic condition of the Applicant. I also understand that if I knowingly make a false statement or overvalue a security to obtain a grant and/or loan from the Commonwealth of Pennsylvania, I may be subject to criminal prosecution in accordance with 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) and 31 U.S.C. §§ 3729 and 3802 (relating to false claims and statements).

The signature page may also be printed now. You may also print submitted applications from the Home page. Click the link labeled "Submitted Applications" in the top toolbar.

Print Signature Page only

Print Entire Application with Signature Page

• Congratulations! You have completed the online application.