## Electronically received on 06/06/2025

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

| Form |   |
|------|---|
|      | Pennsylvania Department of Environmental Protection |

| NOTICE OF INTENTION BY   |   |   |  |               |                         |  |  |
|--|---|---|--|---------------|-------------------------|--|--|
|  | WEL                                     | L OPERATOR                                  | TO PLUG A WE   | ELL           |                         |  |  |
| ☑ Well Operator ☐ Coal Operator  |   | OGO No.                                     | OGO No. U.S. Well No. (Permit / Reg)<br>68607 37-063-29820   |               | Date Drilled (If known) |  |  |
|  |   | 68607                                       |  |               | 9/28/1989               |  |  |
| Name   |   | Well Farm Name                              |  |               |                         |  |  |
| Roulette Oil and Gas LLC   |   | Penelec Homer City Power                    | er Plant   |               |                         |  |  |
| Address Telephone No.  |   |   | Well No. Well Serial No.   |               |                         |  |  |
| 1034 Route 44  |   | 716-378-4653                                | 20   |               |                         |  |  |
| Dity State   |   | Zip Code                                    | County   |               |                         |  |  |
| Shinglehouse PA  |   | 16748                                       | Indiana  |               |                         |  |  |
| Agent (contractor) acting on behalf of the   | operato                                 | r named above.                              | Municipality   |               |                         |  |  |
|  | *************************************** |   | Center Twp   |               |                         |  |  |
| Address  |   | Telephone No.                               | Latitude (DD) Longitude (DD)   |               |                         |  |  |
| A  | 101.4-                                  | 7: 0.1.                                     | 40.51964 - 79.20628  |               |                         |  |  |
| City   | State                                   | Zip Code                                    | Attach well record if not previously submitted.  |               |                         |  |  |
| Complete this section if applicable. Prior to abandoning any well in an area underlain by a workable coal seam, the well operator or owner sh coal operator, lessee, or owner of the intention to plug and abandon the well, and shall submit a plat showing the location and affix the date and ti the work of plugging will commence.  Coal: Operator Owner Dessee Coal: Operator Owner Name |   |   |  |               |                         |  |  |
| Turno .  |   |   |  |               |                         |  |  |
| Address  |   | Address                                     |  | Address       |                         |  |  |
| City, State, Zip Code  |   | City, State, Zip Code City, State, Zip Code |  |               |                         |  |  |
| Telephone No. Notified?  | 17                                      | Telephone No.                               | Notified?  | Telephone No. | Notified?               |  |  |
| □Yes   | □No                                     |   | □Yes □No   |               | □Yes □No                |  |  |
|  |   |   |  |               |                         |  |  |
| Scheduled Date and Time of Plugging Plugging is scheduled to begin on (date) 6/18/2025 at (time) 8:00 AM   |   |   | CHECK BLOCK IF THIS WELL IS BEING PLUGGED PERSUANT TO MINE THROUGH STANDARDS OF ACT 214 of 1984 (REVISED 2011) AND the 2012 Oil & Gas Act. |               |                         |  |  |
| Checklist and Additional Attached Informa  | ation                                   |   | Signature of Applicant (Operator or Agent)   |               |                         |  |  |
| Location Plat     Current Well Record     Available Well Record     Application for Approval of Alternate Method of Plugging   |   |   | Signature  Date  6-6-25  Print or type Signer's Name and Title  James Reynolds, Managing Partner   |               |                         |  |  |
| ☐ Mine - Through   |   |   |  |               |                         |  |  |
| Other, describe:   |   |   |  |               |                         |  |  |
| Carlot, accombs.   |   |   |  |               |                         |  |  |
|  |   |   |  |               |                         |  |  |
|  |   |   |  |               |                         |  |  |
|  |   |   |  |               |                         |  |  |
|  |   |   |  |               | -                       |  |  |