

8000-FM-OOGM0005 Rev. 11/2024
FormPennsylvania
Department of
Environmental ProtectionCOMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
OFFICE OF OIL AND GAS MANAGEMENT**NOTICE OF INTENTION BY
WELL OPERATOR TO PLUG A WELL**

<input checked="" type="checkbox"/> Well Operator <input type="checkbox"/> Coal Operator		OGO No. 68607	U.S. Well No. (Permit / Reg) 37-063-29822	Date Drilled (If known) 9/22/1989
Name Roulette Oil and Gas LLC		Well Farm Name Penelec Homer City Power Plant		
Address 1034 Route 44		Telephone No. 716-378-4653	Well No. 18	Well Serial No.
City Shinglehouse	State PA	Zip Code 16748	County Indiana	
<input type="checkbox"/> Agent (contractor) acting on behalf of the operator named above.		Municipality Center Twp		
Address		Telephone No.	Latitude (DD) 40.51863	Longitude (DD) - 79.189603
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 shall notify the 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 time at which the work of plugging will commence.

Coal: <input type="checkbox"/> Operator <input type="checkbox"/> Owner <input type="checkbox"/> Lessee	Coal: <input type="checkbox"/> Operator <input type="checkbox"/> Owner <input type="checkbox"/> Lessee	Coal: <input type="checkbox"/> Operator <input type="checkbox"/> Owner <input type="checkbox"/> Lessee
Name	Name	Name
Address	Address	Address
City, State, Zip Code	City, State, Zip Code	City, State, Zip Code
Telephone No. Notified? <input type="checkbox"/> Yes <input type="checkbox"/> No	Telephone No. Notified? <input type="checkbox"/> Yes <input type="checkbox"/> No	Telephone No. Notified? <input type="checkbox"/> Yes <input type="checkbox"/> No
This Party hereby waives the rights to be notified of the date and time before plugging work will begin and to be present at the plugging of this well. Signature:	This Party hereby waives the rights to be notified of the date and time before plugging work will begin and to be present at the plugging of this well. Signature:	This Party hereby waives the rights to be notified of the date and time before plugging work will begin and to be present at the plugging of this well. Signature:

Scheduled Date and Time of Plugging Plugging is scheduled to begin on (date) 6/11/2025 at (time) 8:00 AM	<input type="checkbox"/> CHECK BLOCK IF THIS WELL IS BEING PLUGGED PURSUANT TO MINE THROUGH STANDARDS OF ACT 214 of 1984 (REVISED 2011) AND the 2012 Oil & Gas Act.
Checklist and Additional Attached Information <input type="checkbox"/> Location Plat <input type="checkbox"/> Current Well Record <input type="checkbox"/> Available Well Record <input type="checkbox"/> Application for Approval of Alternate Method of Plugging <input type="checkbox"/> Mine - Through <input type="checkbox"/> Other, describe:	Signature of Applicant (Operator or Agent) Signature: <i>James Reynolds</i> Date: 6-6-25 Print or Type Signer's Name and Title James Reynolds, Managing Partner