

New Permits to Drill – Data Entry, continued – Form MD-10-R-1

(Print on Buff colored paper)

OFFICE USE ONLY		OFFICE USE ONLY	
5		SERIAL NUMBER: 6	
Company Data		DATE OF APPLICATION: 11	
OPERATOR: _____		CODE NO. _____	
ADDRESS: _____			
Well Data			
PARISH: _____		CODE NO. _____	
FIELD: _____		CODE NO. _____	
WELL NAME: 7, 9		Well No.: 8	
LOCATION: Section: _____ Township: _____ Range: _____			
LOCATION DESCRIPTION: _____			
PRODUCT: <input type="checkbox"/> OIL <input type="checkbox"/> GAS <input type="checkbox"/> OTHER		TYPE OF WELL	
Prepared Total Depth: _____ feet - Measured Depth		<input type="checkbox"/> New Well	
(and TWD, if applicable) _____ feet - True Vertical Depth		<input type="checkbox"/> Redrill	
Application Fee: _____ Check No.: _____		<input type="checkbox"/> Dual	
6 Month <input type="checkbox"/> 1 Year <input type="checkbox"/>		<input checked="" type="checkbox"/> Lease	
		<input type="checkbox"/> Unit	
PROPOSED ZONE OF COMPLETION: _____		<input type="checkbox"/> Repermit	
APPLICABLE CONSERVATION ORDERS: _____		<input type="checkbox"/> Straight	
SERIAL NUMBER OF REDRILL OR REPERMIT (if applicable): 1, 2, 3		<input checked="" type="checkbox"/> Directional	
		<input type="checkbox"/> Horizontal	
		<input type="checkbox"/> SPC Plan (on water)	
CONTACT DATA			
SEND PERMIT TO: _____			
ADDRESS: _____			
(if different than above) _____			
FOR ADDITIONAL INFORMATION, CONTACT: _____			
Phone No.: _____			
APPLICANT			
SUBMITTED BY: _____			
TYPED NAME AND TITLE _____			
SIGNATURE: _____			
APPLICANT'S REPRESENTATIVE SIGNATURE _____			
OFFICE USE ONLY		OFFICE USE ONLY	
FINANCIAL SECURITY REQUIRED PRIOR TO PERMITTING: <input type="checkbox"/> Yes <input type="checkbox"/> No			
DISTRICT APPROVAL: _____		DATE: _____	
ISSUED BY: _____		DATE: _____	
API No.: 10		Exp.: _____	

1. Re-entry serial number or null
2. Dual, triple serial number or null
3. Repermit serial number or null
4. Horizontal or directional – select either if not a straight hole
5. Offshore – select if noted at top of form
6. Well Serial Num – primary id of permit
7. Well Name – 30-character limitation
8. Well Number – should be minimum of 3 characters. Use leading zeroes (ie, 001)
9. State Lase Num – key in if well name contains SL (ie, SL 340 – key in 340)
10. API Num – wellbore identifier
11. Application Date
12. Well Type - select one. If not sure, ask signee
 - a) LEASE – no semicolons in name
 - b) UNIT – semicolon in name; SU ends in a letter or number; no ALT in well number
 - c) SUBSTITUTE – will be noted on LT1
 - d) ALTERNATE – semicolon in name; SU ends in a letter or number; ALT in will number
 - e) RESERVOIRWIDE – semicolon in name; SU; no ALT in well number

New Permits to Drill – Data Entry, continued – Form MD-10-R-1 - continued

(Print on Buff color paper)

OFFICE USE ONLY		OFFICE USE ONLY	
15, 16		SERIAL NUMBER: _____	
Company Data		DATE OF APPLICATION: _____	
OPERATOR: _____		CODE NO. 23	
ADDRESS: _____			
Well Data			
PARISH: _____		CODE NO. 24	
FIELD: _____		CODE NO. 22	
WELL NAME: _____		Well No.: 17	
LOCATION: Section: 25 Township: Range:			
LOCATION DESCRIPTION: 27			
PRODUCT: <input type="checkbox"/> OIL 14 <input type="checkbox"/> GAS <input type="checkbox"/> OTHER Prepared Total Depth: 18 feet - Measured Depth (and TVD, if applicable) feet - True Vertical Depth Application Fee: 13, 19 Check No.: _____ 6 Month <input type="checkbox"/> 1 Year <input type="checkbox"/> 15, 21		TYPE OF WELL <input type="checkbox"/> New Well <input type="checkbox"/> Repermit <input type="checkbox"/> Redrill <input type="checkbox"/> Straight <input type="checkbox"/> Dual <input type="checkbox"/> Directional <input type="checkbox"/> Lease <input type="checkbox"/> Horizontal <input type="checkbox"/> Unit <input type="checkbox"/> SPC Plan (on water)	
PROPOSED ZONE OF COMPLETION: _____ APPLICABLE CONSERVATION ORDERS: _____ SERIAL NUMBER OF REDRILL OR REPERMIT (if applicable): _____			
CONTACT DATA			
SEND PERMIT TO: _____ ADDRESS: _____ (if different than above) _____ FOR ADDITIONAL INFORMATION, CONTACT: _____ Phone No.: _____			
APPLICANT			
SUBMITTED BY: _____ TYPED NAME AND TITLE SIGNATURE: _____ APPLICANT'S REPRESENTATIVE SIGNATURE			
OFFICE USE ONLY		OFFICE USE ONLY	
FINANCIAL SECURITY REQUIRED PRIOR TO PERMITTING: <input type="checkbox"/> Yes <input type="checkbox"/> No			
DISTRICT APPROVAL: _____		DATE: _____	
ISSUED BY: _____		DATE: _____	
API No.: _____		Exp.: _____	

13. Permit fee – select if fee submitted (common) – no fee if “found well”
14. Product type
15. 1 Year – select if 1-year. Should be noted at top of form. Fee also reflects 1-year
16. SPC Plan – water location indicator. Select if WL keyed in at top of form.
17. Number of Completions – rare. Utilized for dual or triple completions. 2 if D, 3 if T in well number
18. Proposed Depth – select an option
19. Fee Amount – appropriate fee for well type
20. Check Num – obsolete
21. Invoice Number – on LT1 if not on form
22. Field ID
23. Organization ID
24. Parish – Parish of surface location (SL)
25. Section, Township, Range – STR of SL. Ensure 3 characters (ie, use leading zeroes)
26. Location – description must reference STR or monument. SL and BHL only. Examples:
 SL: 1971' FSL & 1407' FEL OF SEC 23-13N-11W. BHL: 250' FNL & 1707' FEL OF SEC 11-13N-11W or
 SL: N 79 D 38' 01" E 4171' FROM NGS MON. "TOWER" TO LOC, SEC 21-T17S-R24E. BHL: N 75 D 46' 39" E 1496' FROM SL IN SEC 21-T17-R24E.

New Permits to Drill – Data Entry, continued – Form MD-10-R-1 - continued

(Print on Buff color paper)

OFFICE USE ONLY		OFFICE USE ONLY	
27		SERIAL NUMBER: _____	
Company Data		DATE OF APPLICATION: _____	
OPERATOR: _____		CODE NO. _____	
ADDRESS: _____		_____	
Well Data		Well No.: _____	
PARISH: _____		CODE NO. _____	
FIELD: _____		CODE NO. _____	
WELL NAME: _____		Well No.: _____	
LOCATION: Section: _____ Township: _____ Range: _____		Well No.: _____	
LOCATION DESCRIPTION: _____		Well No.: _____	
PRODUCT: <input type="checkbox"/> OIL <input type="checkbox"/> GAS <input type="checkbox"/> OTHER		TYPE OF WELL	
Prepared Total Depth: 35 feet - Measured Depth		<input type="checkbox"/> New Well <input type="checkbox"/> Repermit	
(and TVD, if applicable) _____ feet - True Vertical Depth		<input type="checkbox"/> Redrill <input type="checkbox"/> Straight	
Application Fee: _____ Check No.: _____		<input type="checkbox"/> Dual <input type="checkbox"/> Directional	
6 Month <input type="checkbox"/> 1 Year <input type="checkbox"/>		<input type="checkbox"/> Lease <input type="checkbox"/> Horizontal	
PROPOSED ZONE OF COMPLETION: _____		<input type="checkbox"/> Unit <input type="checkbox"/> SPC Plan (on water)	
APPLICABLE CONSERVATION ORDERS: _____		_____	
SERIAL NUMBER OF REDRILL OR REPERMIT (if applicable): _____		_____	
CONTACT DATA			
SEND PERMIT TO: _____			
ADDRESS: _____			
(if different than above) _____			
FOR ADDITIONAL INFORMATION, CONTACT: _____			
Phone No.: _____			
APPLICANT			
SUBMITTED BY: _____			
TYPED NAME AND TITLE _____			
SIGNATURE: _____			
APPLICANT'S REPRESENTATIVE SIGNATURE _____			
OFFICE USE ONLY		OFFICE USE ONLY	
FINANCIAL SECURITY REQUIRED PRIOR TO PERMITTING: <input type="checkbox"/> Yes <input type="checkbox"/> No		DATE: 29	
DISTRICT APPROVAL: _____		DATE: 31	
ISSUED BY: _____		DATE: 32	
API No.: _____		Exp.: _____	

27. Coastal Permit Num – only for new wells in Coastal Zone. Coastal Permit Term is always 2
28. Receipt Date (District) – District stamp date
29. District Office Approval Date
30. Receipt Date (Baton Rouge) – BR stamp date
31. Approval Date (Baton Rouge)
32. Expiration Date – SONRIS calculates based on type (BR approval date + 364) or 6-month permit (BR approval date + 179). **Add expiration date to form.**
33. Ground Elevation – will be on plat. Leave as null if not depicted (ie, water location)
34. Surface Coordinates – will be on plat. 1927 Lambert X Ys required at this time. X, Y, Zone, and Coordinate System Required. Do not need to enter lat/long
35. Initial Permitted MD – total depth
36. Initial Permitted TVD – true vertical depth. Required for directional/horizontals. Leave null for straight holes.
37. Plugback Total Depth – null
38. Bottom Hole Coordinates – will be on plat for directional/horizontals. Leave null for straight holes. Scroll to the right to select Coordinate Source 02 - Permit

Long Deg	Long Min	Long Sec	Coordinate Source
[]	[]	[]	02 PERMIT

New Permits to Drill – Data Entry – Sands \ Orders \ Transmittals

Conservation (E and G) > wells > Maintain Permit to Drill

Once appropriate data keyed in, select Sands \ Orders \ Transmittals

SRCN2605 - Maintain Permit to Drill 01/05/2023 05:54 PM

Strategic Online Natural Resources Information System

Drilling Permit Evaluation

Re-Entry ☐ Multiple ☐ Repermit ☐ ☒ Horizontal ☐ Directional ☐ Offshore

Well Serial Well Serial Well Serial

Well Serial 253981 Well Name HA RA SUJ;RRB 22&37&27-17-13HC Well Num 004-ALT State Lease Num

API Num 17015252960000 Application Date 12/06/2022 Well Type ALTERNATE UNIT WELL

☒ Permit Fee ☒ Gas ☐ Oil ☐ Other ☐ 1 Year ☐ SPC Plan

Number of Completions Proposed Depth Fee Amount 1264 Check Num Invoice Number 1262159

Field ID 2428 CEDAR GROVE District 6 SHREVEPORT Area 1 ONSHORE

Organization P9646 PALOMA NATURAL GAS, LLC 01 PRODUCER/OPERATOR

Parish 08 BOSSIER Section 037 Township 17N Range 13W Meridian W

Location 2956' FNWL OF IRREG SEC 29, 2279' FEL OF FRAC SEC 22, LOC IN IRREG SEC 37-T17N-R13W. PBHL:4480' FSL OF IRREG SEC 37, 4850' FEL OF FRAC SEC 27, IN IRREG SEC 37-T17N-R13W.

Coastal Permit Num Coastal Permit Date Coastal Permit Term

Receipt Date (District) 12/12/2022 District Office Approval Date 12/16/2022 Receipt Date (Baton Rouge) 12/20/2022 Approval Date 12/21/2022 Expiration Date 06/18/2023

☐ Exclude from Scout

Sands \ Orders \ Transmittals

Surface Coordinates

Ground Elevation 158.8 Lambert X 1,633,091 Lambert Y 652,016 Zone N Coordinate System 01 1927 LAMBERT ... Lat Deg Lat Min Lat Sec Long Deg Long Min Long Sec

Bottom Hole Coordinates

Initial Permitted MD 25,000 Lambert Y 641690 Zone NORTH Coordinate System 01 1927 LAM... Lat Deg Lat Min Lat Sec Long Deg Long Min Long Sec Coordinate Source 02 PERMIT

New Permits to Drill – Data Entry, continued – Form MD-10-R-1 - continued

(Print on Buff color paper)

OFFICE USE ONLY		OFFICE USE ONLY	
42, 43, 44, 45, 46		SERIAL NUMBER: _____	
Company Data		DATE OF APPLICATION: _____	
OPERATOR: _____		CODE NO. _____	
ADDRESS: _____			
Well Data			
PARISH: _____		CODE NO. _____	
FIELD: _____		CODE NO. _____	
WELL NAME: _____		Well No.: _____	
LOCATION: Section: _____ Township: _____ Range: _____			
LOCATION DESCRIPTION: _____			
PRODUCT: <input type="checkbox"/> OIL <input type="checkbox"/> GAS <input type="checkbox"/> OTHER Prepared Total Depth: _____ feet - Measured Depth (and TWD, if applicable) _____ feet - True Vertical Depth Application Fee: _____ Check No.: _____ 6 Month <input type="checkbox"/> 1 Year <input type="checkbox"/>		TYPE OF WELL <input type="checkbox"/> New Well <input type="checkbox"/> Repermit <input type="checkbox"/> Redrill <input type="checkbox"/> Straight <input type="checkbox"/> Dual <input type="checkbox"/> Directional <input type="checkbox"/> Lease <input type="checkbox"/> Horizontal <input type="checkbox"/> Unit <input type="checkbox"/> SPC Plan (on water)	
PROPOSED ZONE OF COMPLETION: <u>39, 40</u>			
APPLICABLE CONSERVATION ORDERS: _____			
SERIAL NUMBER OF REDRILL OR REPERMIT (if applicable): _____			
CONTACT DATA			
SEND PERMIT TO: _____			
ADDRESS: _____			
(if different than above) _____			
FOR ADDITIONAL INFORMATION, CONTACT: _____			
Phone No.: _____			
APPLICANT			
SUBMITTED BY: _____			
TYPED NAME AND TITLE _____			
SIGNATURE: _____			
APPLICANT'S REPRESENTATIVE SIGNATURE _____			
OFFICE USE ONLY		OFFICE USE ONLY	
FINANCIAL SECURITY REQUIRED PRIOR TO PERMITTING: <input type="checkbox"/> Yes <input type="checkbox"/> No			
DISTRICT APPROVAL: _____		DATE: _____	
ISSUED BY: _____		DATE: _____	
API No.: _____		Exp.: _____	

39. Sand
40. Reservoir – could be null
41. Formation and Comments – obsolete
42. 29 B or 29 B-1 – one or the other is required.
43. Bond (30 days), Bond received, No Bond – one is required
44. 29 E or 29 E-U – sometimes neither is listed
45. 29 S, 51 – Haynesville Shale, 52 – TMS/Eagle Ford Shale, 53 – Cross Unit, 48 – CSNG
Well condition codes
46. Order Series – key in for lease wells only if listed on the form (some Fields do not have Order series)
47. Print Letter – link to query to generate Letter. Verify information correct before printing 3 copies for distribution.
48. Print Permit – link to query to generate Permit. Verify information correct before printing for distribution. Once confirmed correct, save record in SONRIS.
49. Special Paragraph – obsolete. Not utilized due to formatting issues.
50. Letter Of Transmittals – obsolete. Never utilized.