

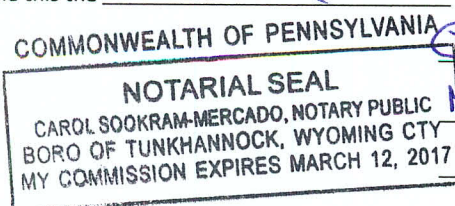
APPLICATION TO OPERATE A FACILITY
OHIO DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL AND GAS RESOURCES MANAGEMENT
2045 MORSE ROAD, BUILDING F-2
COLUMBUS, OHIO 43229-6693
(614) 265-6922

1. Name of Applicant: <u>Somerset Regional Water Resources</u> Phone #: <u>570-965-0929</u>	
Address: <u>60 Teel Road, Springville PA 18844</u>	
Date: <u>December 26, 2013</u> eMail Address: <u>james.kelley@srwr-pa.com</u>	
For an Order or a Permit to Operate: <input type="checkbox"/> Existing Facility <input checked="" type="checkbox"/> New Facility	
2. PURPOSE OF FACILITY: <input type="checkbox"/> Storage <input checked="" type="checkbox"/> Recycling <input type="checkbox"/> Treatment (Check all that Apply) <input type="checkbox"/> Processing <input type="checkbox"/> Disposal	
3. TYPE OF MATERIAL: <input checked="" type="checkbox"/> Brine <input checked="" type="checkbox"/> Drill Cuttings <input checked="" type="checkbox"/> Drilling Mud <input checked="" type="checkbox"/> Other Waste Substance (explain) <u>operations of gas wells and pipelines (See Eng's Report)</u>	
4. If a Business Entity, list the statutory agent and include a certified copy of their appointment: Name: _____ Address: _____	
5. Engineer of Record: Name: <u>James P. Kelley</u> Address: <u>5459 SR29N, Springville, PA 18844</u> Ohio Professional Engineering License Number: <u>Pennsylvania Lic # PE041844E</u>	
6. Address of Facility: Address: <u>43031 Industrial Park Drive, Cadiz, Ohio 43907</u> County: <u>Harrison</u> Township: <u>Cadiz</u> Municipal Corporation: _____ Latitude: <u>40°14'43.8" N</u> Longitude: <u>-81°01'02.3" W</u>	
7. Write a brief description of the facility and operations: <u>The facility will consist of a multi-bay truck offloading station, dissolved air flotation (DAF) unit for general oil/water separation, drip gas storage tank, fracwater storage tanks for holding water prior to treatment, mix tanks for chemical treatment of fluids, water clarification, waterfiltration, treated water storage, multi-bay treated water truck loading, sludge/mud dewatering, chemical feed equipment, pumps</u>	
8. Include all information as set forth in the "Guidelines for Application for Chief's Order". Attach Additional Documents	

I, the undersigned, being first duly sworn, depose and state under penalties of law, that I am authorized to make this application, that this application was prepared by me or under my supervision and direction, and that the facts stated herein are true, correct, and complete, to the best of my knowledge.

I certify that the facility will comply with or is currently in compliance with all provisions of Chapter 1509 ORC, Chapter 1501 OAC, and all terms and conditions of orders and permits issued by the Chief, Division of Oil and Gas Resources Management.

Signature of Authorized Agent James P. Kelley
Name (Type or Print) James P. Kelley, P.E. Title Project Manager, Project Engineer
Sworn to and subscribed before me this the 27th day of December, 2013.



Carol Sookram Mercado
(Notary Public)
March 12th 2017

(Date Commission Expires)