

1. Does this application include a complete injection fluid analysis? (See OG-04 Guidance 2.1)	<input type="radio"/> YES <input type="radio"/> NO
2. Does this application include a complete well schematic reflecting the present status of the well? Does this application include a complete well schematic of the proposed status of the well? <i>(See OG-04 Guidance 2.2 for item 2) – Note that the top and bottom depths of all perforated intervals in the casing and the geologic name (formation name and reservoir name if different than formation) and the depth of the top and bottom of the (formation and reservoir if different than formation) proposed injection interval need to be included.</i>	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> YES <input type="radio"/> NO
3. Does this application include a map identifying the following: (See OG-04 Guidance 2.3) <ul style="list-style-type: none"> o The proposed well; o boundaries of the leasehold or enhanced oil recovery unit if applicable; and o the location of all wells penetrating the proposed injection interval located within ¼ mile of the proposed well. 	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> YES <input type="radio"/> NO
4. Does this application include cementing, casing, and plugging records for all wells penetrating the injection interval that are located within the ¼ mile area of review? (See OG-04 Guidance 2.4)	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> To Be Supplied Upon Request
5. Is the proposed well located within the limits of any incorporated city, town, or village?	<input type="radio"/> YES <input type="radio"/> NO
6. Is the proposed well located within 200 feet of a potable water well? (See OG-04 Guidance 2.5)	<input type="radio"/> YES <input type="radio"/> NO
7. Is the proposed well located within 2,500 feet of a municipal water supply well? (See OG-04 Guidance 2.5)	<input type="radio"/> YES <input type="radio"/> NO
8. Are any freshwater wells located within ¼ mile of the proposed injection well? (See OG-04 Guidance 2.6) If the answer is "YES," does the application include a standard laboratory analysis of freshwater from 2 or more freshwater wells located within ¼ mile of the proposed well or a statement explaining why the analysis could not be obtained?	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> YES <input type="radio"/> NO
9. Is a copy of the Certification of Publication included with this application? (See OG-04 Guidance 2.7A)	<input type="radio"/> YES <input type="radio"/> NO
10. Does this application contain a list identifying each permittee of a producing leasehold located within ¼ mile of the proposed well and each surface owner on which the proposed well is to be located? (See OG-04 Guidance 2.7B) If the permittee is the surface owner or there are no other permittees of a producing leasehold located within ¼ mile of the proposed well, include a statement to that effect.	<input type="radio"/> YES <input type="radio"/> NO
11. Does this application include evidence that each permittee or surface owner from question #10 was provided notice containing, at minimum, the same information as the published notice, along with the original or a copy of each certified mail receipt card? (See OG-04 Guidance 2.7B)	<input type="radio"/> YES <input type="radio"/> NO
12. An application fee of \$400 is required for an amendment of the injection interval. Does your application include payment of the required fee? (A fee is only required for an amendment of the injection interval.)	<input type="radio"/> YES <input type="radio"/> NO
13. Has the applicant ever had a well bond forfeited to the Department?	<input type="radio"/> YES <input type="radio"/> NO
14. Is the well located within the limits of an underground gas storage field, or within any protective boundary shown on the gas storage operators map? (See OG-04 Guidance 2.8) If the answer is "YES," is a copy of an agreement with the gas storage operator included with this application?	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> YES <input type="radio"/> NO
15. Provide the proposed Maximum Injection Rate (MIR) in barrels/day.	_____ B/D
16. Is the applicant requesting the MIR to be validated by using a static fluid level measurement? (See OG-04 Guidance 2.9) If "YES," is the necessary documentation included in the application?	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> YES <input type="radio"/> NO
17. Provide the proposed Maximum Injection Pressure (MIP) in PSI.	_____ PSI
18. Is the applicant requesting the MIP to be validated by using a treatment or step rate test? (See OG-04 Guidance 2.10) If "YES," is the necessary documentation included in the application?	<input type="radio"/> YES <input type="radio"/> NO <input type="radio"/> YES <input type="radio"/> NO

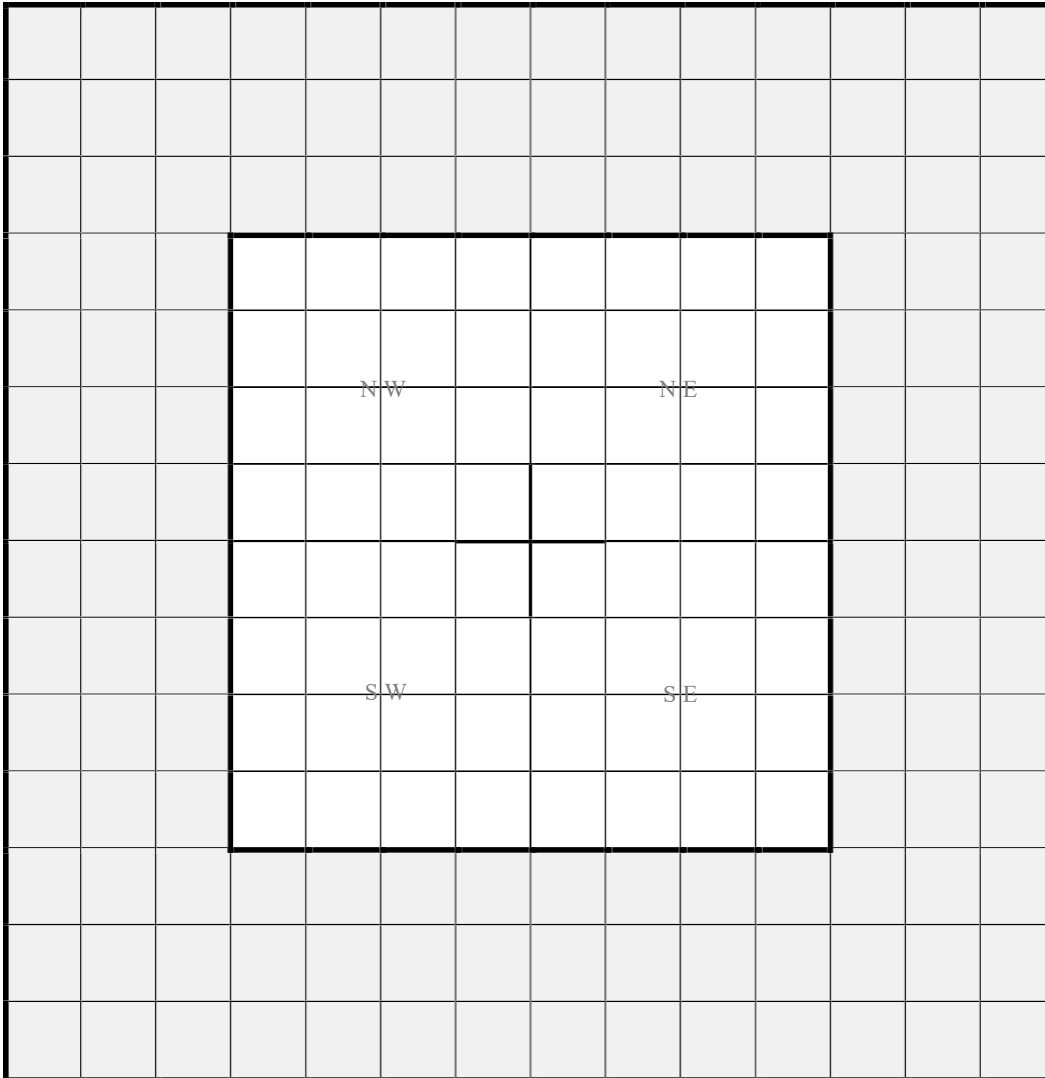
WELL LOCATION

Ground Elevation of the proposed well _____ feet

PLSS: _____ feet NORTH and _____ feet EAST of the _____ CORNER of the
 SOUTH WEST
_____ QUARTER of the _____ QUARTER of the _____ QUARTER of
SECTION _____ of TOWNSHIP _____ and RANGE _____ in _____ COUNTY.

GPS: Latitude _____ Longitude _____

Outline your lease or unit boundaries below and spot the well location and all wells within 1/4 mile.



The smallest squares in the above diagram are 660' X 660' and contain 10 acres each.

I HEREBY CERTIFY THAT, TO THE BEST OF MY KNOWLEDGE, THE LOCATION AND ELEVATION OF THE ABOVE-DESCRIBED WELL, FIXED AS THE RESULT OF AN INSTRUMENT SURVEY MADE BY ME, IN COMPLIANCE WITH THE ILLINOIS OIL AND GAS ACT, IS TRUE AND CORRECT, AND I HAVE SET A STAKE AT THE EXACT LOCATION DESIGNATED ABOVE.

SIGNATURE OF REGISTERED ILLINOIS LAND SURVEYOR OR REGISTERED ILLINOIS PROFESSIONAL ENGINEER

STREET ADDRESS

CITY

STATE

ZIP

Permittee Information

Name: _____ Permittee #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Technical Contact for Application

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

UNDER PENALTIES OF PERJURY, I CERTIFY THAT:

- 1) THE PERMITTEE HAS THE RIGHT, PURSUANT TO VALID AND SUBSISTING OIL AND GAS LEASES, DOCUMENTS, OR MEMORANDA OF PUBLIC RECORD, AND/OR STATUTE OR REGULATION, TO DRILL AND OPERATE THE WELL(S) DESCRIBED HEREIN; AND
- 2) THE PERMITTEE HAS REVIEWED THIS APPLICATION TOGETHER WITH ANY ACCOMPANYING STATEMENTS AND DOCUMENTS AND STATES THAT TO THE BEST OF THE PERMITTEE'S KNOWLEDGE, THE REQUEST, STATEMENTS, AND DOCUMENTS ARE TRUE AND CORRECT.

NAME OF PERSON AUTHORIZED TO SIGN (Print)

TITLE

SIGNATURE

62 Ill. Adm. Code 240.230

DATE

This State agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined in 225 ILCS 725/1 et seq. Failure to disclose this information will result in this form not being processed. This form has been approved by the Forms Management Center.