

COMMONWEALTH OF KENTUCKY
 DEPARTMENT FOR NATURAL RESOURCES
 DIVISION OF OIL AND GAS
 http://oilandgas.ky.gov
 300 Sower Blvd
 Frankfort, KY 40601
 Phone: (502) 573-0147 Fax: (502) 564-4245



OPERATIONS AND RECLAMATION PLAN

Operator Name _____ County _____ Well No. _____

Surface Owner _____ Address and Phone No. _____

Complete severance of oil & gas ownership from surface ownership? Yes No; If Yes see bottom of page 2.

Multi-well pad? Yes No If Yes; Identify Permit Numbers: _____

Implementation of Best Management Practices:

Within forty-five (45) days of the initial wellsite boundary disturbance, the following steps will be taken:

1. The well site and access road shall be graded and stabilized to prevent erosion. Culverts will be installed as needed to divert surface water flow and dikes will be constructed if required to control water movement and protect against spills.
2. Pits shall be constructed in stable area (in non-fill areas) of well-site and lined with impermeable liner.
3. After drilling and completion, all drilling supplies and equipment, trash, discarded materials and other refuse not contained shall be removed from well site.
4. Water discharged from all pits shall be properly disposed of in accordance with all state and federal regulations and statutes.
5. Temporary vegetative cover shall be established on all graded areas. As soon as possible, permanent vegetation will be established in accordance with the guidelines established in the Oil & Gas Well Operator's Manual.

Within thirty days (30) after plugging and abandonment of the well, these steps will be taken:

1. All production and storage facilities, supplies and equipment, and any oil, salt water and debris will be removed.
2. Any remaining excavations will be filled, and any remaining disturbed in the wellsite boundary including access roads, will be graded.
3. Pit contents shall be disposed of in accordance all applicable state and federal regulations and statutes, filled and graded.
4. Permanent vegetative cover shall be established on all disturbed areas in accordance with guidelines established in the Oil & Gas Well Operator's Manual.

The operator shall provide written notification to the Division of Oil & Gas of final reclamation.

A narrative description of the location of all areas disturbed, including the location of roads, gathering lines, the well site, tanks and other production facilities: (Must be typed)

Describe steps to be taken to prevent erosion of and sedimentation from the well site and all disturbed areas, including access roads: (Must be typed)

Proposed Revegetation Treatment:

Fertilizer and Soil Amendments

Seed or Tree Planted
(Type and Amount/Acre)

Area 1 _____





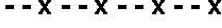

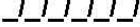
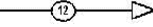














 Area 2 _____

Additional sheets may be attached for your convenience.

(Continued on page 3)

Attach: Drawing(s) of the wellsite boundary including the access road, well-site and proposed area involved, drawn over an enlarged section of the U.S.G.S. 1=24,000' topographic map (enlarged to approximately 1"=400') on an 8"x14" sheet of paper using the applicable symbols from the following legend:

LEGEND

Stream 	Gathering Lines 
Road 	Diversion 
Existing Fence 	Spring 
Planned Fence 	Drain pipe with size in inches 
Open Ditch 	Waterway 
Rock 	Cross Drain 
North Arrow 	Artificial Filter Strip 
Buildings 	Pit: Cut Walls 
Water Wells 	Pit: Compacted Fill Walls 
Tanks 	Area for Land Application of Pit Waste 
Drill Site 	Storage Facilities 

The undersigned hereby swears or affirms that the foregoing information and attachments in this plan to prevent erosion of and sedimentation from the well site and all disturbed areas, including roads, are true to the best of my knowledge and belief.

Date this _____ day of _____, 20 _____.

If a corporation, signatory shall be an officer of the company or provide Power of Attorney to execute documents. If a private individual, signatory shall be the same as the applicant or provide Power of Attorney to execute documents.

Signature of Operator

Title

SWORN TO AND SUBSCRIBED BEFORE ME THIS DATE _____ DAY OF _____, 20 _____

Notary Public

MY COMMISSION EXPIRES: _____

Surface Owner Notice and Agreement
(Surface Owner Signature Below, Shall Be Notarized)

I have reviewed the application and the information submitted with this form, and agree to the well operator's operations and reclamation plan proposed as set forth herein. I understand that the execution of this document in no way affects compensation for surface damages as described in KRS 353.595(6) or other contractual agreement.

If you do not agree with the proposed use of your land by the well operator, the well operator may request mediation of your dispute by the General Counsel's Office of the Department for Natural Resources. If mediation is requested, and you decide to participate, each party to the mediation will be charged one hundred dollars (\$100) to help cover the cost of mediation. You will be notified of the time and place for mediation, if the well operator chooses mediation, and of your right to participate.

Signature of Severed Mineral Surface Owner

Date

Print or Type the Name of Severed Mineral Surface Owner

SWORN TO AND SUBSCRIBED BEFORE ME THIS DATE _____ DAY OF _____, 20 _____

Notary Public

MY COMMISSION EXPIRES: _____

CONTINUATION FOR ADDITIONAL PROPOSED REVEGETATION TREATMENTS

Operator Name _____ County _____ Well No. _____

Surface Owner _____ Address and Phone No. _____

Fertilizer and Soil Amendments	Seed or Tree Planted (Type and Amount/Acre)
Area 3 _____	_____
_____	_____
_____	_____
Area 4 _____	_____
_____	_____
_____	_____
_____	_____
Area 5 _____	_____
_____	_____
_____	_____
_____	_____
Area 6 _____	_____
_____	_____
_____	_____
_____	_____
Area 7 _____	_____
_____	_____
_____	_____
_____	_____
Area 8 _____	_____
_____	_____
_____	_____
_____	_____