

DEPARTMENT USE ONLY

The Department of Environmental Conservation hereby approves this request for transfer of well responsibilities

BY \_\_\_\_\_  
Signature Date



**Department of Environmental Conservation**

DIVISION OF MINERAL RESOURCES

**REQUEST FOR TRANSFER OF WELL RESPONSIBILITIES**

Submit One Original

TRANSFEROR (Current Operator):	
NAME OF TRANSFEROR	CONTACT NAME
STREET ADDRESS, CITY, STATE, ZIP CODE	TELEPHONE NUMBER (Daytime) ( )
TRANSFeree (Proposed New Operator):	
NAME OF TRANSFeree	CONTACT NAME
STREET ADDRESS, CITY, STATE, ZIP CODE	TELEPHONE NUMBER (Daytime) ( )

The Transferor acknowledges that, until Department approval of this request for transfer of well responsibilities for the well(s) listed below, Transferor remains legally responsible for complying with all legal requirements for **each well**, including, but not limited to, the Environmental Conservation Law (ECL) and the Department’s regulations. As part of the Department’s evaluation of this transfer request, a well inspection may be conducted for each well. Any and all deficiencies found must be remediated to the Department’s satisfaction before the transfer can be approved. The Transferor hereby acknowledges that the Department’s approval of this transfer request may not eliminate all of its liability and obligations with respect to each well.

The Transferee acknowledges that upon Department approval of this request for transfer of well responsibilities for the well(s) listed below it is legally responsible for complying with all legal requirements for **each well**, including, but not limited to, the ECL and the Department’s regulations. If the current operator of each well, as indicated in Department records, is unknown or unresponsive, the Transferee affirms by checking the following box and signing this form that it has exercised due diligence in attempting to locate the current operator of record to obtain its signature on this transfer request. In such case, no signature from the Transferor is required on this form.

In all other cases, both the Transferor and the Transferee acknowledge that all holders of interests affected by this transfer have been or will be properly notified. Furthermore, both parties agree to furnish records and reports, including, but not limited to, lease and/or deed documentation, at the request of the Department. By signing this form, the Transferor certifies that it is not aware of any fact that would preclude Transferee’s lawful operation of the well(s). By signing this form, the Transferee certifies that it, as the acquiring party (**check appropriate box**):

owns the mineral interest       holds a valid and effective lease       holds a valid and effective operating contract

which gives the Transferee the right to operate the well(s) listed below. The Department’s approval of this transfer request does not confer, modify or extinguish property rights and recognizes only: a) the transfer of authority to operate the well(s) listed below; and b) that the Transferee has regulatory compliance responsibilities.

I hereby affirm under penalty of perjury that the information provided in this form is true to the best of my knowledge and belief. I am aware that false statements made in this report are punishable pursuant to Section 210.45 of the Penal Law.

TYPE OR PRINT NAME OF AUTHORIZED PERSON – TRANSFEROR		TYPE OR PRINT NAME OF AUTHORIZED PERSON – TRANSFeree	
SIGNATURE OF TRANSFEROR	DATE	SIGNATURE OF TRANSFeree	DATE
SWORN TO AND SUBSCRIBED BEFORE ME, THIS DAY OF 20 NOTARY PUBLIC		SWORN TO AND SUBSCRIBED BEFORE ME, THIS DAY OF 20 NOTARY PUBLIC	

**Note for Well(s) Transferred to Landowners:** The well(s) you are acquiring for personal use may require periodic servicing to maintain compliance with the ECL and all Department Regulations. At such time as the well is no longer capable of providing gas for the landowner's domestic use, it must be properly plugged and abandoned in accordance with 6 NYCRR 555.5.

**WELL(S) TO BE TRANSFERRED** (ATTACH ADDITIONAL SHEETS WHEN NECESSARY)

WELL NAME AND NUMBER	API IDENTIFICATION NUMBER																				
1.	31	-																			
2.	31	-																			
3.	31	-																			
4.	31	-																			
5.	31	-																			
6.	31	-																			
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30.	31	-																			