

North Carolina Department of Environment and Natural Resources

Division of Energy, Mineral, and Land Resources

Energy Section - Oil and Gas Program

**Form
19**

Rev 03/2015

1612 Mail Service Center, Raleigh, NC 27699-1612

Phone: (919) 707-9220

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Email: DEMLRoilandgas@ncdenr.gov

Oil & Gas Program Use Only	
Date:	<input type="text"/>
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Document ID:	<input type="text"/>

Chemical Disclosure Report

15A NCAC 05H .1702

Permittee Name:

Company Name:

Address:

City:

Phone:

Fax:

Email:

State: Zip:

Attachments:

	Permittee	DEMLR-OGP
FracFocus Report	<input type="checkbox"/>	<input type="checkbox"/>
Wellbore Survey	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

API Number: County:

Lease/Well Name: Nearest Town/City:

Well Number: Well Site Ingress/Egress Location:

Type of Well:

Oil

Gas

Dry

Strat.

* Other

Measured Depth (feet):

True Vertical Depth (feet):

Date the well stimulation operations began:

Date the well stimulation operations ceased:

Longitude of the wellhead (decimal degrees):

Latitude of the wellhead (decimal degrees):

* Describe Other Type of Well:

Describe the overall well stimulation mixture:

The permittee may also attach any reports, logs, or other documentation from the well service company in addition to the information required on this form.

For all horizontal wells a certified directional survey of the horizontal portion of the well bore must be attached to with this form by hard copy or by email.

Check to indicate the required documentation is attached.
Provide file name if attached by email.

This form must be signed by the permittee or an authorized agent of the permittee.

Print Name: _____

Title: _____

Signature: _____

Date: _____