DEPARTMENT of AGRICULTURE and NATURAL RESOURCES
Minerals, Mining, and Superfund Program
221 Mall Drive, Suite #201, Rapid City, SD 57701
Telephone: 605-773-4201, FAX: 605-394-5317

FORM 2

APPLICATION FOR PERMIT TO DRILL

Type of work:
☐ Drill New Well ☐ Reenter Well ☐ Drill Directional Well
☐ Other: _____

Type of well:
☐ Oil Well ☐ Gas Well ☐ Injection
☐ Other: _____

Name and Address of Operator: Telephone:

_____

Name and Address of Surface Owner:

_____

Name and Address of Drilling Contractor and Rig Number:

Surface Location of well: Qtr-Qtr, Sec, Twp, Rge, County, feet from nearest lines of section, and latitude and longitude (if available):

_____

If Directional, top of pay and bottom hole location from nearest lines of section:

_____

Acres in Spacing (Drilling) Unit: Description of Spacing Unit:

Well Name and Number:	Elevation:	Field and Pool, or Wildcat:	Proposed Depth and Formation:

Size of Hole:	Size of Casing:	Weight per Foot:	Depth:	Cementing Program (amount, type, yield, additives)	Top of Cement:
1)					
2)					
3)					
4)					

Describe Proposed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). Use additional page(s) if appropriate.

Pit Liner Specifications:

I hereby certify that the foregoing as to any work or operation performed is a true and correct report of such work or operation.

Signature	Name (Print)	Title	Date

FOR OFFICE USE ONLY

Approved By: _____ Title: _____

Permit No.: _____ API No.: _____ Date Issued: _____

Conditions, if any, on attached page.