

DEPARTMENT of AGRICULTURE and NATURAL RESOURCES Minerals & Mining Program 2050 West Main, Suite #1, Rapid City, SD 57702-2493 Telephone: 605-773-4201, FAX: 605-394-5317

APPLICATION FOR PERMIT TO DRILL

Type of work: Drill New Well Reenter Well Drill Directional Well Other:					oe of well: Oil Well Gas Well Injection Other:			
Name and Addre	ess 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:			
G: CYY 1	La: ca :	****	D 1					
Size of Hole:	Size of Casing:	Weight per Foot:	Depth:	Cementing Program (Program (amount, type, yield, additives) Top of Cement:			
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.								
Signatu	ıre		Name (Prin	t)	Title		Date	
FOR OFFICE USE ONLY								
Approved By: _			Title	:				
Permit No.:		API No.:		Date	Issued:			
Conditions, if an	ny, on attached page.							