

March 27, 2017

Lapp Farms c/o Warren Lapp 44714 US 36 Coshocton, Ohio 43812

Mr. Warren Lapp:

Enclosed is the 2016 Surface Application Annual Report that we have prepared upon your behalf. You should review and sign the report and submit it as soon as possible to the Division of Mineral Resources Management. We have enclosed an addressed envelope for your convenience.

If you have any questions or need any additional information, please feel free to contact our Coshocton Office.

Thank you.

Sincerely,

Courtney Hamilton Administrative Asst. NGO Development Coshocton Office 740-622-9560

CourtneyHamilton

Enclosures (2)

II

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MAR 3 1 2017

Division of Oil and Gas Resources Management

SURFACE APPLICATION ANNUAL REPORT (Form 15)

I.	NAME OF ENTITY WHO OWNS OR HAS A LEGAL RIGHT OR OBLIGATION TO MAINTAIN ROAD: Lapp Farms c/o Warren Lapp							
	ADDRESS:	44714 US 36	Cosh	Coshocton				
		(Street)	(City)	740				
		OH 43812	PHONE NUMBER:					
	(State)	OH 43812 PHONE NUMBER: 622 - 3350 (State) (Zip) (Area Code)						
	COUNTY:	Coshocton TC	OWNSHIP/MUNICIPALITY:					
	OTHER:							
II.	APPLICATION PO	OINTS:	QUANTITIES (Bbls.)	DATES OF APPLICATION				
		rk County - Wayne Township - Township Roa p Road 166 and David Road						
	1)		<u> </u>					
	2)							
	3)							
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	5)							
	6)			A A A				
	7)							
	8)							
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	REQUIRED BY S	SECTION 1509.226, OHIO REVISED CODE - NOT OF CRIMINAL FINES OF NOT LESS THAT LITES NOT MORE THAN \$4,000.00.	FAILURE TO SUBMIT MAY					

1) NGO DE	NAME EVELOPMENT CORPORATION, INC.	REGISTRATION NUMBER UIC-36				
		A CHARLES O				
. SOURCES						
Permit #	Well Owner Name	County/Township	Quantities			
T CHINE #	Well owner runne	County/ Township	(Bbls.)			
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INSTRUC						
Item I.	Supply requested information. The name must unit that is responsible for the maintenance of					
Item II.	Supply county, township, and actual point of	application of brine. A barrel ec	quals 42 U.S. gallons.			
Item III.	Hauler(s) name and registration number(s) mu					
	If the county, township, or municipality uses in numbers; however, if hauler delivers the brine					
The state of	and registration number must be listed.					
Item IV.	Supply requested information for each point from which brine was collected and eventually used for surface application.					
NOTE:	Additional sheets, if necessary, may be attach	ed.				
uthorized by:	Waves Son	Title: peonee	RECEIVED			
	, 04		APR - 6 2017			

SURFACE APPLICATION ANNUAL REPORT (Form 15)

I.	NAME OF ENTITY WHO OWNS OR HAS A LEGAL RIGHT OR OBLIGATION TO MAINTAIN ROAD: Lapp Farms c/o Warren Lapp						
	ADDRESS:				Coshocton		
			(Street)		(City)		
	(64-4-)	ОН	43812	<u> </u>	PHONE NUMBER:		
	(State)	(State) (Zip)			(Area Code)		
	COUNTY:	Coshoc	Coshocton TOWNSHI		P/MUNICIPALITY: _		
	OTHER:						
II.	APPLICATION PO	INTS:			QUANTITIES		
	EXAMPLE: Clark	County - Way	ne Township - Town	ship Road 144	(Bbls.)	APPLICATION	
	between Township						
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	2)			114		4	
	3)						
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		193634	Y 30 Y 30 30 30 30 30 30 30 30 30 30 30 30 30	40,00			
	8)						
	MUST BE SUBMIT	TED BY APRI	L 15TH FOR THE PE	RECEDING CALE	ENDAR YEAR.		
	REQUIRED BY SE	CTION 1509.22	26, OHIO REVISED (CODE - FAILURE	TO SUBMIT MAY R	RESULT IN	
	THE ASSESSMEN	T OF CRIMINA	L FINES OF NOT LE		00 NOR MORE THAN		
	OR CIVIL PENALI	IES NOT MOR	RE THAN \$4,000.00.				

	NAME EVELOPMENT CORPORATION, INC.	REGISTRATION NUMBER UIC-36			
V. SOURCES	S:				
Permit #	Well Owner Name	County/Township	Quantities (Bbls.)		
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INSTRUC					
Item I.	Supply requested information. The name mu unit that is responsible for the maintenance of				
Item II.	Supply county, township, and actual point of				
Item III.	Hauler(s) name and registration number(s) m	ust be listed if a hauler is used to	apply brine to roads.		
	If the county, township, or municipality uses it own vehicles to apply brine, it need not list hauler numbers; however, if hauler delivers the brine to a holding tank prior to application, the hauler's name and registration number must be listed. Supply requested information for each point from which brine was collected and eventually used for surface application.				
Item IV.					
NOTE:	Additional sheets, if necessary, may be attach	ned.			
Authorized by:	Title:				

DNR-744 Form 15 (Rev. 06/2005)