



OHIO DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL & GAS RESOURCES MANAGEMENT 2045 Morse Road, F-2 • Columbus, OH 43229-6693 This report must be submitted to DOGRM by April 15 for the preceding calendar year as required by ORC1509.226(F).

Surface Application Annual Report Form 15 Rev. 01/17

For calendar year ending 31-Dec-2018

Name: Max Mercer, Fiscal Officer		cal Officer	County:	Coshocton			
Street Address: 23821 TR 371 City / State / Zip: Walhonding / OH / 438 Phone: (740) 824-3452			Township/ Municipality		Perry		
		H / 43843	Other				
		-3452					
		e Township – Township Roa oad	nd 144 between	Quantities (BBL)	Dates of Application		
1) Rd 373					7/11		
2)							
3)							
4)							
5)							
6)							
7)							
8)							
Brine Haulers				Pogietra	tion Number		
Name 1) Double D We	ell Service	Registration Number 276					
2)							
3)					137		
4)							
5)							
Sources Permit Nur	nher	Well Owner Name	Count	y Towns	Quantiti hip (BBL)		
Lettill Mail	IIDEI	Well Owner Haille	Count) IOWIIS	(001)		

F	Permit Number	Well Owner Name	County	Township	Quantities (BBL)		
				- N - 255-M			
				4.1			
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INSTR	UCTIONS						
Item I	Required. The name for the maintenance	must be supplied by the person(s), of the road(s) to which brine has bee	company or govern en applied.	ment unit that is	responsible		
Item II	Include county, township, and actual point of application of brine. A barrel (BBL) equals 42 U.S. gallons.						
Item III	Hauler's Name and Registration Number must be listed if a hauler delivered or applied brine. If the count township, or municipality used its own vehicles to apply brine, a Registration Number is not needed.						
Item IV	Supply requested information for each point from which brine was collected and eventually used for surface application.						
Addition	nal copies of this form	may be attached if necessary.					
	PRINT	NAME		PRINT TITLE			
	SIGNATURE OF OWNER	R/AUTHORIZED AGENT	DATE SIGNED				

SIGNATURE OF OWNER/AUTHORIZED AGENT