

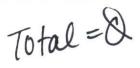
OHIO DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL & GAS RESOURCES MANAGEMENT 2045 Morse Road, F-2 • Columbus, OH 43229-6693 This report must be submitted to DOGRM by April 15 for the preceding calendar year as required by ORC1509.226(F).

## Surface Application Annual Report Form 15 Rev. 01/17

For calendar year ending 31-Dec-20

I. N	lame of entity th	at owns	or has	s a legal right or ob	oligation	n to mai	ntain roa	d:			
Name:		Licking County Engineers			County:		-	Licking			
Street Address:		Licking County Engineers 20 South Second St				Township/ Municipality:					
City / State / Zip:		Newalk	OH	t 43055		Oth	er				
F	Phone:	( )	740-	-670-5280							
11. /	Application Poin										
	EXAMPLE: Cla Township Road			ne Township – Towns Road	ship Road	1 144 betv	veen	1000	antities (BBL)		Dates of pplication
	2)	•									
	3)										
	4)		[	RECEIVE	-D]						
	5)			JUN 18 20	Į.						
	6)			Division of Oil &	ŧ.						
	7)			Columbus							
	8)										
III.	Brine Haulers										
Name Registration Number											
	1) Non	e									
	2)										
	3)										
	4)										
	5)										
IV.	Sources										2000
	Permit Num	ber		Well Owner N	ame		Coun	ty	Towns	nip	Quantities (BBL)

Surface Application Annual Report Form 15 DNR DOGRM 01/17



Permit Number	Well Owner Name	County	Township	Quantities (BBL)
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## **INSTRUCTIONS**

- Item I Required. The name must be supplied by the person(s), company or government unit that is responsible for the maintenance of the road(s) to which brine has been applied.
- 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 county, 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.

Additional copies of this form may be attached if necessary.

Loren Dabbins Jr.	Highway Superintendent				
PRINT NAME	PRINT TITLE 4/12/18				
Form Bohn De					
SIGNATURE OF OWNER/AUTHORIZED AGENT	DATE SIGNED				