



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. Name of entity that owns or has a legal right or obligation to maintain road:

| | | | |
|---------------------|-----------------------|----------------------------|--------------------|
| Name: | Seneca Township | County: | Monroe |
| Street Address: | 49537 | Township/ Municipality: | Seneca Township |
| City / State / Zip: | Lewisville Ohio 43754 | Other | |
| Phone: | 740 838-4503 | | |

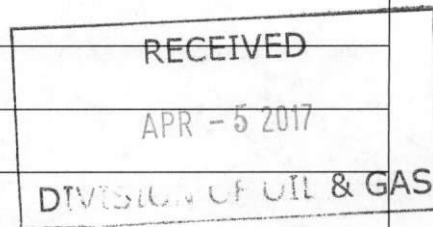
II. Application Points

EXAMPLE: Clark County – Wayne Township – Township Road 144 between
 Township Road 166 and David Road

| | Quantities (BBL) | Dates of Application |
|----|---------------------|-------------------------|
| 1) | | |
| 2) | | |
| 3) | | |
| 4) | | |
| 5) | | |
| 6) | | |
| 7) | | |
| 8) | | |

III. Brine Haulers

| Name | Registration Number |
|------|---------------------|
| 1) | |
| 2) | |
| 3) | |
| 4) | |
| 5) | |



IV. Sources

| Permit Number | Well Owner Name | County | Township | Quantities (BBL) |
|---------------|-----------------|--------|----------|---------------------|
| | | | | |
| | | | | |

| 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.

Amy D Carpenter

PRINT NAME

Amy D Carpenter

SIGNATURE OF OWNER/AUTHORIZED AGENT

Ⓟ Fiscal officer

PRINT TITLE

04-02-17

DATE SIGNED