

Ohio Department of Natural Resources
Division of Mineral Resources Management

AFFIDAVIT -- ENHANCED RECOVERY PROJECT

State of _____, _____ County, ss.

_____ being first duly sworn says

that as principal, or authorized agent, for _____, he or she

has made application for an enhanced recovery injection well in the State of Ohio,

_____ County, _____ Township, section /lot number _____,

on the _____ lease, for well number _____; and further certifies that notice

of application has been delivered to each individual entitled to personal notification in

accordance with paragraph (E) of Rule 1501:9-3-.06 of the Ohio Administrative Code. And

further affiant saith not.

(Affiant Signature)

Sworn to before me and subscribed in my presence this _____ day of

_____, 20____.

Notary Public