

Application for Permit to Divert or Withdraw Surface Water from Waters of the State of Mississippi for Hydraulic Fracturing

DEPARTMENT OF ENVIRONMENTAL QUALITY, OFFICE OF LAND AND WATER RESOURCES
P.O. BOX 2309, JACKSON, MS 39225-2309; Phone (601) 961-5328 or 5269, FAX (601) 961-5228

THIS BOX IS FOR OFFICE USE ONLY:

FORM OLWR-FAP-01 (03/14)

Issued:	Expires:	Agenda:	Permit No.
Lat:	Long:	Quad:	Minimum Flow:
STAC:		HUC8:	AI No.
Remarks:			

LANDOWNER: _____ (Name) _____ (E-mail address)

_____ (Mailing Address)

_____ (City) _____ (State & Zip) _____ (Telephone No.) _____ (Fax No.)

APPLICANT, AGENT OR LESSEE: _____ (Name) _____ (E-mail address)

_____ (Company)

_____ (Mailing Address)

_____ (City) _____ (State & Zip) _____ (Telephone No.) _____ (Fax No.)

LOCATION of diversion or withdrawal point (A suitable **MAP** with location marked **MUST** accompany this application):

COUNTY _____

LEGAL DESCRIPTION: _____ ¼, of the _____ ¼, of Section _____, Township _____, Range _____

LATITUDE/LONGITUDE (Deg-Min-Sec): _____

OIL WELL IDENTIFICATION (Name and API Number): _____

LATITUDE of oil well (Deg-Min-Sec): _____ LONGITUDE of oil well (Deg-Min-Sec): _____

STREET ADDRESS of oil well: _____

LOCATIONS DETERMINED BY: _____ survey _____ handheld GPS _____ map interpolation _____ other

SOURCE of water is from _____ which drains into _____

which drains into _____

(major stream or river)

ANTICIPATED DATE RANGE OF WATER WITHDRAWAL: _____

ANTICIPATED DATES OF HYDRAULIC FRACTURING PHASE: _____

REQUESTED VOLUME AND RATE OF WITHDRAWAL:

_____ gallons at a maximum rate of _____ gallons per minute

REMARKS _____

List below the person to be contacted for additional information, if required.

(Name) _____ (E-mail address) _____

(Company) _____

(Mailing Address) _____

(City) _____ (State & Zip) _____ (Telephone No.) _____ (Fax No.) _____

Application is hereby made for a permit or permits to authorize the work described in this application. I certify that the information in this application is complete and accurate. I further certify that I possess the authority to undertake the work described herein or that I am acting as the duly authorized agent of the applicant. The **ACCOMPANYING MAP** is hereby declared a part of this application. The **TEN DOLLAR (\$10.00) permit fee** is enclosed herewith.

Date

Signature

Printed Name

Title

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APPROVED VOLUME: _____ gallons
APPROVED RATE OF WITHDRAWAL: _____ gallons per minute
APPROVED DURATION: _____