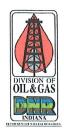


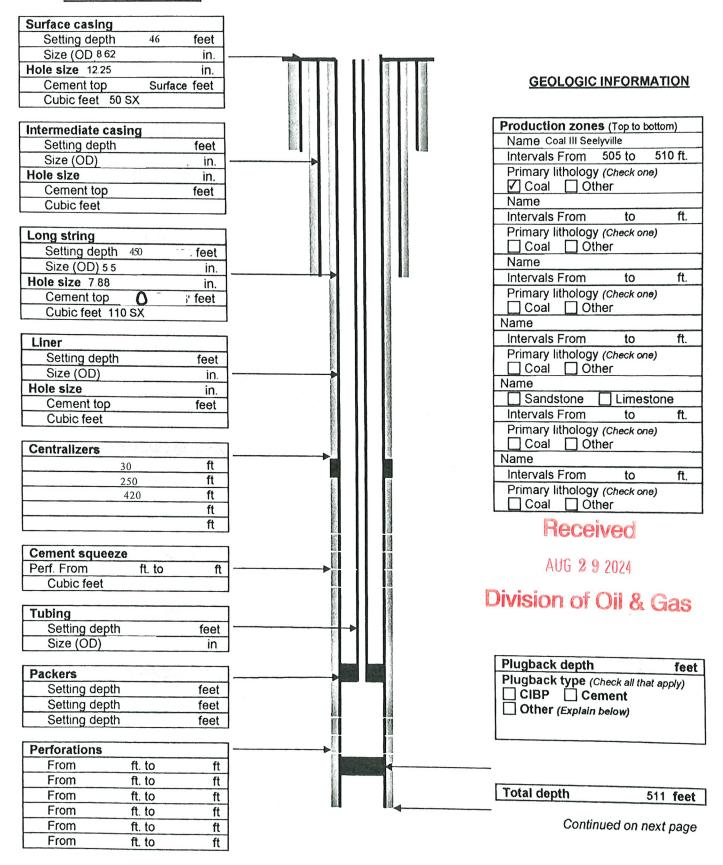
INDIANA DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL AND GAS
402 W. Washington St., Rm. 293
Indianapolis, IN 46204
Telephone number: (317) 232-4055
Fax number: (317) 232-1550
http://www.in.gov/dnr/dnroil



	FOR STATE USE ONI	LY				
Application number 050935	Permit number 51948	1	Date received (month	n, day, year) 3/4 (2024		
Date approved (month, day, year)	Approved by			originally recieve	d	
IGS identification number IGS sar 162692	nples Yes 🔀 No	IGS pool name	Sandfor	rd		
PART I	GENERAL INFORMAT	ION				
Name of operator Keyrock Energy, LLC			ne number 3 ) 443 -8753	Fax number		
Address of operator (number and street or PO Box) 207 E. Main St., Suite 2-D, PO Box 2223	) ( ☐ Check here if this is a new addre		)			
City Johnson City		State TN		ZIP code 37605 _		
Send permit to (Enter name and address) Keyrock Energy: PO Box 2223, Johnson City,	TN, 37605	( 618	ne number ) 443 -8753	Fax number ( ) -		
Check here if you would like to have	e the permit sent via FAX or	email. Ema	il address	MG . @ Keytocken	2194.60	
Applicant is (Check one only)	iduai <u> </u>	tnership poration		corporation partnership	,, 00	
NOTE: Corporations, limited partnership further information about registration, c	s and limited liability compani	es must reg	ister with the Se	cretary of State. For		
☐ Blanket bond ☐ F	Check Personal surety bond (Valid for	Non-comme	ercial gas wells or	nly)		
	Bond not required per IC 14-37-					
NOTES: A bond must accompany this application unless the operator has a valid blanket bond on file with the division or is exempt from bonding under IC 14-37-6-1. All bonds must be originals and an original Verification of Certificate of Deposit form must accompany CD's. Checks must be certified. The bond amount for individual						
wells is \$2,500 and for blanket bonds is \$45,000.  Well type (Check one only)  ✓ Coal Bed Methane - Check the boxes below beside items that are attached to the application:  ☐ Non-Commercial Coal Bed Methane - Check the boxes below beside items that are attached to the application:  ☐ Form A12 - Coal Owner's and Coal Lessee's Consent Forms (Coal is leased),  ✓ Form A14 - Coal Owner's Consent Form (Coal is not leased),						
<ul> <li>Notices of Intent to Apply for a CBM permit and Affidavit of No Waste of Coal Resources or Miner Endangerment with Proof of Service to Coal Owner and Coal Lessee if no Consent Forms are attached (See Application Reminders),</li> <li>Notice of Intent to Survey with Proof of Service to Surface Owner (Required for every application),</li> <li>Well Stimulation Plan; OR</li></ul>						
Application type (Check no more than two)				// /- //		
☐ New well ☐ Old well workover						
☐ Old well deepening ☐ Horizontal well sidetracking ☐ Conversion ☐ Permit renewal (Complete PARTS I, II and VI only unless another application type is also checked)						
☐ Change of location  Fee Payment Method: ☑ Check	☐ Credit Card (Attach credit of		tion on separate	page or provide		
contact number: ( ) -						
Former operator (If applicable)			Former Permit numb	ber (If applicable)		

PART II			SURFA	CE LO	CAT	ION A	ND LE	ASE INFOR	MATION			
Name of leas								Well number			Elevation (	GL)
Ray-Carlso		γ			r	1,		1-10			589.5	
Township	Range		Select One« Sect	ion 1/4		1/4	1/4	Footages:				√W, □SE line
12N	10W	Land numb				SE	NW		THE RESERVE AND ADDRESS OF THE PARTY OF THE	The state of the s		NE, SW line
County Vi	igo			ce to th				ble of producti >990 feet				
Drilling unit		(Check one	only) *Well	to be cor	nplete	d in Min	e Void.	☐ Check	here if acr	reage is comm	munitized (p	ooled)
✓ Othe		Exempt acre	es					NOTE: Att	lach a cop	y of the unit a	agreement o	or
(Atta	nch unit e	xception or p	etition for exc	eption	and s	upporti	ng			g. If previous		
documentation) identify the permit number under which it was submitted: Permit No.							•					
Lease acre	age	Does opera	ator own or co	ontrol th	ne righ	nts to di	rill and	oroduce coal b	ed methar	e in and und	er all land(s	) within the
		drilling unit	boundary an	d the le	ase a	creage	herein	indicated and	shown on	the attached	Survey?	Yes 🗌 No
39.75	Acres	If No, expla	in the basis (	upon w	hich tl	he oper	ator cla	ims the right to	drill and	oroduce coal	bed methar	e under this
	71				-	-	Contract of the last of the la	thts by type an				
☐ Yes [	✓ No	Does this a	ipplication inc	lude a	Notic	e of Inte	ent to S	urvey and prod	of delive	ry to the surf	ace owner?	
PART III		3 19 W.		PROF	POSE	D WE	LL CC	NSTRUCTIO	N			
	V	Check here a	and go to PA	RT IV i	if the	well p	resentl	y exists and th	ne constri	uction will n	ot change	
Enter casin cement sta		from largest t	o smallest and	d enter	the ce	ment in	formati	on on successiv	ve rows for	a casing strii	ng that will b	e set using multi
Cement sta	yes.	Casing	Informatio	n	1 311	Marchael C	1 1 1 1 2	1571 35.12	Cem	enting Info	rmation	2. 其名 1. 1. <b>2%</b>
Casing		Casing	Casing	Casi	ng	Hole	,	Cement Ty	/pe	Cement	Volume	Cement
Size (OD	)	Туре	Bottom	Тор		Size				Volume	Type	Yield
			ft.		ft.							
			ft.		ft.							
			ft.		ft.							
			ft.		ft.							
Packer se	etting de	pth	ft.	Cen	traliz	ers at		ft	f	t	ft	ft.
		oth		Cas	ina n	erfora	ted F	rom	f	t to	1	+
		pth		1000	, 19 F							
								rom				
								rom				
							F	rom	1	t. to		t.
PART IV	la de la constantina		DR	ILLING	3 AN			ONAL INFOR	MATION			
Section							Wells			. 46		
		heck one onl						ional & Horizo				
		Directional [	J Horizontal					the well mus				N.COO.
Proposed			Lilled Con	IIII Seel		All well	s)   Pi	oposed measu	irea lengtr		reet (Hanzor	ital wells only)
		ormation to be	0 011110 11	I III Seel	-						ALIC' O	2.0004
		oal seam targ	jeted Coa	1111 0001	yville		Oi	Wild	deat		AUG 2	2024
	lame):									Divisi	on of	Oil & Ga
			RESSES C	)F THE	SU	KFAC	E OWI	NER, COAL	City	o), CUALL	State	Zip code
Type Red		Name				ress	c Sand	ord Road		erre Haute	IN	47885
Surface O		James R. Ca									FL	33604
Coal Own		Charles B. L N/A	.66		130	2 East I	Lambri	il ir	Tampa			1 00004
Coal Own			.ee / EYRL LI	C	1301	2 East I	amhri	oht	Tampa	-	FL	33604
Coal Own		·						J111	<del></del>	erre Haute		47885
Coar Own	<u> </u>	Charles Ray	JI.		165	0 Darw	ın Ka		West 10	LI C HAULE	IN	77003
									-	***************************************		
I		l .							1			L

#### WELL CONSTRUCTION



#51948

PART VI AFFIRMATION	Mary to a state of the second second second second second
I affirm under penalty of perjury that the information provided in t	this application is true to the best of my
knowledge and belief.	
Typed or printed name of operator or authorized agent	
Bruce Horman	
Signature of operator or authorized agent	Date signed (month, day, year) 2/8/2024

#### SPECIAL REQUIREMENTS

1. Incomplete applications will be returned to the operator without being processed.

2. Only those individuals whose signatures appear in PARTS V and VI of the Organizational Report may sign this form

3. The name of the operator on this application and the name of the principal on the bond **must** be identical.

4. If you are applying for a Change of Operator permit you are certifying that you have conducted a good faith search for the current operator and said operator could not be located.

5. If you are applying for a new well permit, do not forget to include the **Notice of Intent to Survey** and proof of service required under IC 32-23-7-6.5 that must be sent to the surface owner at least five (5) days prior to entering onto the property for the purpose of surveying the well location. An example of the notice is available on the division's website under Publications/Notices and Examples.

#### APPLICATION REMINDERS

#### PART I:

• Enter the name of the operator exactly as it appears on the Organizational Report.

• If you want to have a copy of the permit certificate faxed to you please check the appropriate box.

• Don't forget to register with the Indiana Secretary of State if you will operate as a Corporation, Limited Liability Company or Limited Partnership.

Don't forget to attach the \$250 permit fee.

• If a Certificate of Deposit is selected as the Bond Type, don't forget to attach the original CD and original Verification of Certificate form.

• Check all of the appropriate boxes under Well Type to indicate which attachments are being submitted with this application. Required attachments MUST be included with the application or it will not be processed.

- If no Coal Owner and Coal Lessee (if coal is leased) consent forms are attached and if there is no copy of a written agreement that specifies other terms of notification of the operator's intent to drill a well for coal bed methane, the operator must send a **Notice of Intent to Apply for a CBM Permit** to the Coal Owner and Coal Lessee and submit a copy of the notice along with proof of service and an Affidavit of No Waste of Coal Resources or Miner Endangerment must accompany the application. An example of the Notice of Intent is available on the division's website under Publications/Notices and Examples.
- The Horizontal Drilling Plan and Plugging Plan for Horizontal Well must be submitted only if the proposd well declination is horizontal.
- If the proposed well will be stimulated, a Well Stimulation Plan must be submitted. Otherwise, check the box indicating that the well will not be stimulated.
- The Statement of Protection of Coal for Future Underground Mining must demonstrate that commercially minable coal outside of the coal bed methane production area is adequately protected for future underground mining.
- Examples of the required notices and affidavits may be found on the division's website under Publications Notices and Examples.

#### **PART II**

- For this proposed coal bed methane well, be sure to indicate the distance to the nearest well capable of production from the same formation for which this permit is to be issued and make sure you check the rule requirements on well spacing to avoid placing the well an insufficient distance from an existing well.
- If you check the communitized box you must attach a copy of the pooling agreement or specify the permit number for the well under which the pooling agreement was previously submitted.
- If you check the Other box under the Drilling Unit section make sure to attach a copy of the exception.
- You must indicate that you own or control all of the coal bed methane within the proposed drilling unit before a permit can be issued. If you do not own or control all of the coal bed methane within the proposed drilling unit you must describe the basis upon which you claim the right to drill and operate a well for coal bed methane production.

#### PART III

This part is used by the division to determine if your proposed well construction will meet the rule requirements.
 Please be sure to enter all information about the proposed construction so that it can be evaluated accurately.

MAR 0 4 2024

#51948

#### **ART IV**

- F r al we s, be sure to specify the proposed total vertic depth, name f the deepest formation to be drill ed, lowest coal seam to be targeted and the pool name.
- For horizontal wells, be sure to specify the proposed measured length.
- Include the names and addresses of the surface owner, coal owner(s) and coal lessee(s).

#### **PART V**

- The well diagram must be completed for all Coal Bed Methane well applications.
- Indicate the proposed depths of all centralizers. Proof of cement should be submitted with the completion report and Form R12–Verification of Coal Seam Protection Report in the form of cement tickets or a cement bond log.

#### **PART VI**

- Applications that do not contain an original signature cannot be processed.
- The signature must match a signature shown in Parts VI or VII of the operator's Organizational Report.
- If this application is for a Change of Operator your signature in PART VI certifies that you could not obtain this permit through the permit transfer process **ONLY** because the former operator could not be located.

#### **PART VII**

• If a coal bed methane well is intended to be hydraulically fractured, on either the well survey plat or a separate map, plot the location of the proposed coal bed methane well, labeling the distances to the closest quarter-quarter section (or other land type) lines. Draw a 500 foot (or the estimated half length of the proposed hydraulic fracture plane) radius circle around the well location. Inside the circle, plot all known water wells and all oil or gas wells that are deep enough to intersect the coal seams and label the oil and gas wells with the assigned permit number.

Important: A permit issued as a result of this application is a license to conduct an activity and does not convey any property rights to the permittee. Consequently, the permittee is solely responsible for acquiring any and all property rights necessary to use the permit for its stated purpose.

Received

MAR **0 4 2**024

PART VII	The second of the	SURVEY	。2016年1月20日 1000年1月21日 1000年1月21日				i de la la	100	
General Instructions									
Use a 1"=1000' scale	##								
<ul> <li>Surveyor must complete the fo</li> <li>Clearly indicate the section town</li> </ul>		a nuntour anat	the well and	chow the	footages fro	m the lines			
<ul> <li>Clearly indicate the section towr</li> <li>Use the surveyor's notes to expl</li> </ul>									
Operator or authorized agent n			וטוו טעטוו עט גע	opograpin	and integur	ar occitorio			
For oil or gas wells, outline the l	eased or communitize	ed area and the	e drilling unit	allotment					
<ul> <li>For all Directional and Horizonta</li> </ul>									
<ul> <li>For Enhanced recovery and Sal</li> </ul>								lls	
(whether plugged or unplugged) spot.	that intersect the prop	posed injection	r zone(s), and	put the p	ermit numb	er of the we	II over the		
NOTE: Please show the en	tire ¼ mile radius	circle aroun	d proposed	Class II	wells				
SURVEYORS' NOTES		111111111111111111111111111111111111111						A	
								NII	
41-10 RAY-								INI	
0 1 0 (0 00)		1		- Per				7   4	
CARLSON)			l	and the second second			1		
Elev. 589.50		Anakhusin		To Carrie Man		and a second	•		
N.A.V.D. 83								'	
			A	1			l	1	
							İ		
The state of the s								T	
	-		-660'-					12	
7		330,	_					4	
		33						T/2(N)	
		1	10					or	
								or	
		in a second				4 1			
								.	
		A STATE OF THE STA	1			-			
SURVEYORS' SEAL				1					
		x .							
William William						11-20	u (1		
SCISTED SOLL	***					Hec	eived	1	
E A. Storens W. H.									
No. S-0225 STATE OF MININA						AUG 2	9 2024		
STATE OF							0 202.		
					Divis	ion o	FOIL 8	G	20
WOIANA					DIAIO		WIII C	L UI	LO
SURVE		1	₹ 10 E 0	r(W)					
		•	Name and Associated Street, or other Persons.						
								4 1 2 1 1	
I hereby certify that to the best of m	the state of the s	CERTIFICAT	The second section is not the second section of the second section is not the second section of the second section is not the second section of the second section is not the second section of the second section is not the second section of the	ale de la companya de	described u	all fixed as	the regult	of an	
instrument survey made by me in com	pliance with the require							or all	
Signature of registered lydiana la				Date	e signed (m				
150 3/1/2/	7	~~~			0/2/01				
Address (Street of PO, City, State, Zip)	LOW			Tele	phone nun	nber			
1420 W. Co. Rd. 280 S., Greencastle, IN 46135 765-653-7771									

### **Special PART VII Requirements**

- You should adjust the location of the center of the section on the diagram so that the entire set of information in the General Instructions shows on a single survey plat. (Example: If a horizontal well will begin in one section but terminate in another you should move the section center point so that portions of both sections appear on the plat)
- 2 This form must contain an original signature and original seal



# Received



## INDIANA DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL AND GAS

402 W. Washington St., Rm. 293 Indianapolis, IN 46204 Telephone number: (317) 232-4055 Fax number: (317) 232-1550 http://www.in.qov/dnr/dnroil



		FOR S	TATE USE ONL	Y			
Date received (month, day, year) Date approved (month, day			nth, day, year)		Approved	d by:	
PART I		COAL O	WNER INFORMA	NOITA			
	Charles Lee Manager						Telephone number  ( ) -
Address of 1302 East La	coal owner <i>(number and s</i> ambright Street	street or PO Box)				ì	
City Tampa				State	FL		ZIP code 33604_
PART II			ND COAL SEAN	INFOR	MATION		
Parcel num	ber 84-05-10-100-006.000-	021	oal seam(s): Seely	ville		Acres	39.75
Township 12N	Range 10W		and survey type and survey number:	Sec	tion 10	Coun	Vigo
Parcel num	nber 84-01-33-200-001.000-	- · ·	oal seam(s): Seely	ville		Acres	80
Township 13N	Range 10W	La	and survey type and survey number:	Sec	tion 33	Coun	ty Vigo
Parcel num	nber		oal seam(s):			Acres	3
Township	Range		and survey type and survey number:			Coun	ty
PART III		AFFIRN	ATION AND SIG	SNATUR			
given my c	rsigned, affirm that I an consent to the extraction leased the coal for the aste of the commerciall	n of the coal bed met purpose of coal minir	hane from said co ng and I acknowle	oal by Energ	rock y LLC •		
Signature o	of coal owner		Date sign	ed (mont	h, day, yea	ar)	
CL	walky						
Name (prir	nted or typed) Charles	B. Lee					

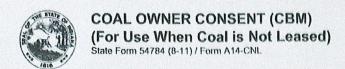
original with #51760

Received

JUL 2 9 2024

Form A14





Name (printed or typed)

Charles B. Lee

## INDIANA DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL AND GAS

402 W. Washington St., Rm. 293 Indianapolis, IN 46204 Telephone number: (317) 232-4055 Fax number: (317) 232-1550 http://www.in.gov/dnr/dnroil



		FOR STATE	USE ONLY				
Date receive	ed (month, day, year)	Date approved (month, d	ay, year)	Approved	d by:		
PARTI		COAL OWNER	RINFORMAT	ION			
Name of co	al owner				Telephone number		
Address of 0 1302 East La	coal owner (number and s mbright Street	street or PO Box)					
City Tampa			S	State FL	ZIP code 33604_		
PART II		PROPERTY AND C	OAL SEAM IN	NFORMATION			
Parcel numl	oer 84-05-10-100-006.000-	Coal se	am(s): Seelyvill	le	Acres 39.75		
Township 12N	Range 10W	Land sur Land sur	vey type vey number:	Section 10	County Vigo		
Parcel numi	oer 84-01-33-200-001.000-	Coal se	am(s): Seelyvill	le	Acres 80		
Township 13N	Range 10W	Land sur Land sur	vey type vey number:	Section 33	County Vigo		
Parcel numl	per	Coal se	am(s):		Acres		
Township	Range	Land sur Land sur	vey type vey number:		County		
PART III		AFFIRMATIO	N AND SIGNA	ATURE			
I, the under given my co I have not le	onsent to the extraction eased the coal for the p	n the owner of the right to the of the coal bed methane fourpose of coal mining and minable coal resources.	rom said coal	by Keyrock .	parcel(s) and that I have		
Clanatura	f and auman		Data signed	(month day year	w)		
	f coal owner	9.	Date signed (month, day, year)  APVLIL 2 7.0 7.3				

Received

MAR .0 4 2024



## INDIANA DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL AND GAS

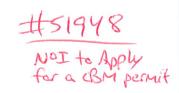
402 W. Washington St., Rm. 293 Indianapolis, IN 46204 Telephone number: (317) 232-4055 Fax number: (317) 232-1550 http://www.in.gov/dnr/dnroil



		FOI	R STATE USE ONL	<b>Y</b>			
Date receive	ed (month, day, year)	Date approved (	month, day, year)		Approved b	y:	-
PARTI	0845	COAL	LOWNER INFORMA	ATION			
Name of coa Charles H Ra	al owner ly Jr					Т	elephone number ( ) -
Address of o	coal owner <i>(number and s</i> Rd.	street or PO Box)				'	
City West Terre H	aute			State	Indiana		ZIP code 47885_
PART II		PROPERT	Y AND COAL SEAN	INFORM	MATION	\$ 25	110000000000000000000000000000000000000
Parcel numb	oer 84-05-10-100-006.000-		Coal seam(s): Seely			cres	39.75
Township 12N	Range 10W		Land survey type Land survey number:	Sect	ion 10	County	Vigo
Parcel numb	ber 84-01-33-200-001.000-	025	Coal seam(s): Seely	ville	A	cres	80
Township 13N	Range 10W		Land survey type Land survey number:	Sect	ion 33	County	, Vigo
Parcel numl	ber		Coal seam(s):		Α	cres	×
Township	Range		Land survey type Land survey number:		C	County	,
PART III		A E E	IDMATION AND SIG	NATUD			3530
I, the undersigned, affirm that I am the owner of the right to the coal on the above described parcel(s) and that I have given my consent to the extraction of the coal bed methane from said coal by Energy, LLC.  I have not leased the coal for the purpose of coal mining and I acknowledge that the recovery of coal bed methane may result in waste of the commercially minable coal resources.							
Signature of coal owner  Charles H. Jan H.  Name (printed or typed)  Date signed (month, day, year)							
Name (printed or typed) Charles VI. Ray Jr.							

Received

JUL 2 9 2024



### NOTICE OF INTENT TO APPLY FOR A Coal Bed Methane Well Permit

Keyrock Energy, LLC, 207 E. Main St., PO Box 2223, Johnson City, TN 37605, intends to submit to the Division of Oil and Gas an application for a permit to drill and construct a well to be used for the production of Coal Bed Methane. The well will be located 330 feet from the S line, 660 feet from the E line, SE quarter, NW quarter, in Section 10, Twp. 12N, Rng. 10W, Vigo County, Indiana.

The subject well, Ray Carlson #1-10, is intended to produce coal bed methane from the Seelyville Coal Seam at an approximate depth of 505 feet.

Written comments and objections to the issuance of a permit for this well based on the premise that the well will result in waste of a commercially minable coal or that the well will endanger the health and safety of miners must be submitted to the Division of Oil and Gas within thirty (30) days of the receipt of this notice and should be mailed to:

Division of Oil and Gas
Department of Natural Resources
Attn: Technical Services Section
402 W. Washington Street, Rm. W293
Indianapolis, IN 46204-2748

After the application is submitted, you may obtain a copy of or further information about the application by contacting the division at (317) 232-4055. The submitted application will be made available for review at the above address from 8 A.M. to 4:30 A.M. EST, Monday through Friday, or on the division's website at: <a href="https://www.in.gov/dnr/dnroil">www.in.gov/dnr/dnroil</a>.

Optional: I acknowledge that I have repermit.	received this notice of intent to apply for a coal bed methane w	ell
Drint Name	-	
Print Name		
Signature	Date -	
Address	-	
City, IN Zipcode		

Received
MAR .0 4 2024

#51948 Afficianit

#### **AFFIDAVIT**

In accordance with IC 14-37-4-8.5(d), Keyrock Energy, LLC, 207 E. Main St., PO Box 2223, Johnson City, TN 37605, hereby certifies that the proposed well – Ray Carlson #1-10– located in Section 10, Twp. 12N, Rng. 10W, Vigo County, Indiana is intended to produce coal bed methane from the Seelyville coal which has an average thickness of five feet at an approximate depth of 505 feet. The proposed well is located approximately within the original permitted boundary of the Green Valley Coal Mine, an existing, abandoned, and reclaimed, underground coal mine operation. The owner of the coal, EYRL, LLC, does not have experience in the underground mining of coal. The existing well was previously used for Coal Bed Methane Production. No horizontal drilling, no acidizing, and no fracturing of any kind will take place at the Ray Carlson #1-10 well. Keyrock Energy, LLC hereby states that this existing well enters the works of an abandoned coal mine. There are no miners underground, and no possibility of miners going underground. The coal was extracted via room and pillar mining, thus Keyrock Energy's activities will have no impact on the commercially minable coal resource.

inis affidavit accompanies the notice of int	ent to apply for a Coal Bed Methane Well Permit.
For Keyrock Energy, LLC:	
Murgan Pate	
Print Name	9/9/2022
Signature	Date

Received

APR 01 2024

#### STATEMENT OF PROTECTION OF COAL FOR FUTURE UNDERGROUND MINING

In accordance with IC 14-37-4-8(d)(4), Keyrock Energy LLC declares that commercially minable coal outside of the coal bed methane production area that contains the proposed coal bed methane well, Ray Carlson #1-10, is protected for future underground mining for the following reasons:

No hydraulic fracturing will be performed on the Seelyville coal that will be used for coal bed methane production.

The proposed well is at least 500 feet (or the estimated or calculated fracture half length) inside of the outside boundary of the coal bed methane production area.

The proposed well is not being drilled horizontally within the coal seam.

Other: The Seelyville Coal has already been removed as a minable resource. No actions on behalf of Keyrock Energy will physically alter the remaining portions of the Seelyville Coal Seam

Print Name

Signature

8-28-2024

Date

Received

SEP 05 7024

## **KEYROCK ENERGY LLC**

August 27, 2024

Via Email: ARosales@dnr.lN.gov Indiana Department of Natural Resources Division of Oil & Gas Attn: Alicia M. Rosales 402 West Washington St., Room 293 Indianapolis, IN 46204

Re: Ray Carlson Well Vigo County, IN

Dear Ms. Rosales:

This letter supplements Keyrock Energy's Application for Coal Bed Methane Well Permit.

Our objective is to drill and complete the well as outlined in the application to access methane in the mine void, after accessing testing of the gas flow and quality will take place. The review of these results will help guide us in its use. The gas volume, purity and economic feasibility will guide us as to whether it can be sold into the pipeline, used to make electricity, or flared.

The gas will be monitored through our metering instrumentation unit, tracking flow and composition. Also, A PLC based SCADA system will give us 24/7 monitoring capabilities, connected to a call center that will alert our staff 24/7 if any issues arise. For security and safety, a 24-hour live view surveillance camera system will also be present to monitor the site.

This gives us the information needed to pay the mineral owner their royalty and the State of Indiana severance tax. Allowing the current stranded gas in the mine void to be commercialized, so no waste of Indiana's natural resources will take place.

Respectfully,

Joe Lane

Permitting Compliance Mgr. Keyrock Energy, LLC 207 E Main St., Suite 2-D Johnson City, TN 37604

Received

SEP 05 2024

