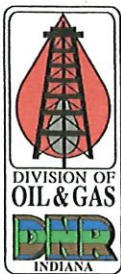


#53925



APPLICATION FOR WELL PERMIT

State Form 21096 (R3 / 3-18) / Form A1
Approved by State Board of Accounts, 2018

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
Internet: <http://www.in.gov/dnr/dnroil>

Application number 057014	Permit number 53925
Date received (month, day, year) 1/10/23	Date approved (month, day, year)
IGS Identification Number	Approved by
IGS Samples <input type="checkbox"/> Yes <input type="checkbox"/> No	IGS Pool Name

FOR STATE USE ONLY

PART I

GENERAL INFORMATION

Name of operator Jack W Racer	Telephone number (765) 289 - 8264	FAX number () -
----------------------------------	--	---------------------

Address of operator (Street or PO Box) (Check here if this is a new address.)
5900 S County Rd 575 E

City Selma	State IN	ZIP code 47383-
---------------	-------------	--------------------

Send permit to (Enter name and address)	Telephone number () -	FAX number () -
---	---------------------------	---------------------

Check here if you would like the permit sent via FAX or e-mail. E-mail address: RandSDrillingInc@gmail.com

Expedite: Please check here and submit a total permit fee of \$750 to request two (2) day processing.
NOTE: Expediting not available for Class II and Noncommercial gas applications.

Applicant is (Check one only.)

<input checked="" type="checkbox"/> Individual	<input type="checkbox"/> Partnership	<input type="checkbox"/> Public corporation
<input type="checkbox"/> Limited liability company	<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited partnership

NOTE: Corporations, Limited Partnerships, and Limited Liability Companies must register with the Secretary of State. For information about registration, contact the Corporations Division, Secretary of State at (317) 232-6576.

Type of bond (Check one only.)

<input type="checkbox"/> Surety bond	<input type="checkbox"/> Check
<input type="checkbox"/> Blanket bond	<input type="checkbox"/> Personal surety bond (Valid for non-commercial gas wells only)
<input type="checkbox"/> Certificate of deposit	<input checked="" type="checkbox"/> Bond not required per IC 14-37-6-1

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 CDs. 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.)

- Oil (Complete PARTS I thru IVa, VI and VII.)
- Gas (Complete PARTS I thru IVa, VI and VII.)
- Class II Enhanced Recovery (Complete PARTS I, II, III, IVb, V, VI, and VII.)
- Class II Saltwater Disposal (Complete PARTS I, II, III, IVb, V, VI, and VII.)
- Noncommercial gas (Complete PARTS I thru IVa, VI, and VII.)
- Geologic / Structure test (Complete PARTS I thru IVa, VI, and VII.)
- Gas storage or observation (Complete PARTS I thru IVa, IVc, VI, and VII.)
- Nonpotable water supply (Complete PARTS I thru IVa, IVd, VI, and VII.)
- Dual completion for Oil and Class II injection only (Complete PARTS I thru IVb, V, VI, and VII.)
- Dual completion for Gas and Class II injection only (Complete PARTS I thru IVb, V, VI, and VII.)

Application type (Check no more than two (2).)	<input type="checkbox"/> Change of operator (Complete PARTS I, II, III, IV, VI and VII indicating lease lines and drilling unit boundaries, only unless another application type is also checked.) <input type="checkbox"/> Permit renewal (Complete PARTS I, II and VI only unless another application type is also checked.)
<input type="checkbox"/> New well <input type="checkbox"/> Old well workover <input type="checkbox"/> Old well deepening <input type="checkbox"/> Horizontal well sidetracking <input checked="" type="checkbox"/> Conversion <input type="checkbox"/> Change of location	

NOTE: A \$250 permit fee is required except for expedited permits, which require a \$750 fee. If paying by check, please make payment to the Indiana Department of Natural Resources.

Fee Payment Method: Check Credit Card (Attach credit card information on separate page or provide contact number.) () -

Former operator (If applicable)	Former Permit number (If applicable) 53925
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Continued on next page.

#53925

PART II SURFACE LOCATION AND LEASE INFORMATION								
Name of lease Chalfant Farms					Well number 1		Elevation (G.L.) 1,024.00	
Township 20 N	Range 12 E	Land Type Section Land Number: 10	¼ NW	¼ SW	¼ SW	Footages: 284 ft. from <input type="checkbox"/> N, <input checked="" type="checkbox"/> S, <input type="checkbox"/> NW, <input type="checkbox"/> SE line 12 ft. from <input type="checkbox"/> E, <input checked="" type="checkbox"/> W, <input type="checkbox"/> NE, <input type="checkbox"/> SW line		
County Randolph			Distance to the nearest well capable of production from the same zone in which this well will be completed: 330 feet					
Drilling unit acreage (Check one only.) <input type="checkbox"/> Five (5) acres <input type="checkbox"/> Twenty (20) acres <input type="checkbox"/> Ten (10) acres <input type="checkbox"/> Forty (40) acres <input type="checkbox"/> Waterflood or voluntary pooling unit _____ acres (Include map of waterflood or voluntary pooling unit.) <input type="checkbox"/> Other _____ acres (Attach unit exception or petition for exception and supporting documentation.)					<input type="checkbox"/> Check here if acreage is communitized (pooled). NOTE: Attach a copy of the unit agreement or declaration of pooling. If previously submitted identify the permit number under which it was submitted. Permit Number: _____			
Lease acreage <u>200</u> Acres		Does operator own or control the rights to drill and produce oil and/or natural gas or coal bed methane in and under all land(s) within the drilling unit boundary and the lease acreage herein indicated and shown on the attached Survey? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If No, explain the basis upon which the operator claims the right to drill and produce oil and/or natural gas and/or coal bed methane under this permit: _____						
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is the well location more than 200 feet from an existing house, barn, building, or other structure? If no, provide a copy of the written consent to the well location from the surface owner(s) and structure owner(s), if they are different.						
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is this an application for a new well permit? If yes, include a Notice of Intent to Survey and proof of delivery to the surface owner. Name of surface owner: _____						
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Does this well location fall within an incorporated town boundary? If yes, provide a copy of the document authorizing drilling within the incorporated area.						
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Does this well location fall within the permitted boundary of an active or inactive underground coal mine? If yes, provide proof of notice to the coal company of your intent to drill. Please note the Division may require additional notice of intent to drill if deemed necessary.						
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Does this well location fall within one-half mile of the boundary of a gas storage field or petroleum storage field? If yes, provide proof of notice to the operator of the storage field of your intent to drill.						
PART III PROPOSED WELL CONSTRUCTION								
<input type="checkbox"/> Check here and go to PART IV if the well presently exists and the construction will not change.								
Enter casing strings from largest to smallest and enter the cement information on successive rows for a casing string that will be set using multiple cement stages.								
Casing Information					Cementing Information			
Casing Size (OD)	Casing Type	Casing Bottom	Casing Top	Hole Size	Cement Type	Cement Volume	Volume Type	Cement Yield
8.625	Surface	99 ft.	1 ft.	12.25	Class A	41	Cubic Feet	1.35
6.625	Intermediate	361 ft.	1 ft.	8.0	Class A	40	Cubic Feet	1.35
4.5	Long String	980 ft.	1 ft.	6.125	Class A	95	Cubic Feet	1.35
		ft.	ft.					
Packer setting depth <u>930</u> ft.			Centralizers at _____ ft. _____ ft. _____ ft. _____ ft. _____ ft. _____ ft. _____ ft.					
Packer setting depth _____ ft.			_____ ft. _____ ft. _____ ft. _____ ft. _____ ft. _____ ft. _____ ft. _____ ft.					
Packer setting depth _____ ft.			Casing perforated From _____ ft. to _____ ft.					
For existing wells:			From _____ ft. to _____ ft.					
CIBP setting depth _____ ft.			From _____ ft. to _____ ft.					

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Plugback depth _____ ft.
 Plugback type (Check all that apply.)
 CIBP
 Cement
 Other (Explain below.)

From _____ ft. to _____ ft.

Notes:
 centralizers per code

Continued on next page.

PART IV DRILLING AND OPERATIONAL INFORMATION	
Section a All Wells	
Declination type (Check one only.) <input checked="" type="checkbox"/> Vertical <input type="checkbox"/> Directional <input type="checkbox"/> Horizontal	
Proposed total vertical depth <u>1425</u> feet (All wells)	Proposed measured length _____ feet (Horizontal wells only)
Name of deepest formation to be drilled:	
<input type="checkbox"/> Pool (Name): _____	Or <input type="checkbox"/> Wildcat
Section b Injection Wells	
Proposed Maximum Injection Pressure (MIP) measured in PSI at the wellhead: <u>0</u>	Proposed Maximum Injection Rate (MIR) measured in barrels of water per day: <u>2000</u>
NOTE: Calculated Maximum Injection Pressure (MIP) is based on the formula (0.8 psi/ft.-(0.433 psi/ft. (specific gravity)))depth. If you are applying for a MIP that is greater than the calculated MIP you must submit the results of: 1. A service company acid or fracture job that shows an instantaneous shut in pressure (ISIP), or 2. A service company step rate test that has a minimum of three (3) steps and a breakdown pressure. The data must be for the uppermost injection formation, come from a well that is located in the same field as the injection well, and be less than ten (10) years old to be considered.	
Section c Gas Storage / Observation Wells	
Injection / withdrawal interval From: _____ ft. to _____ ft.	Injection / withdrawal formation
Observation interval From: _____ ft. to _____ ft.	Observation formation
Section d Nonpotable Water Supply Wells	
Water withdrawal interval From: _____ ft. to _____ ft.	Withdrawal amount (Gallons per day)
	Withdrawal formation

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PART V

PROPOSED WELL DIAGRAM

NOTE: This diagram is required only for Class II injection and Dual Completion wells.

WELL CONSTRUCTION

Surface casing
Setting depth 99 feet
Size (OD) 8.62 in.
Hole size 12.25 in.
Cement top 0 feet
Cubic feet 41

Intermediate casing
Setting depth 361.4 feet
Size (OD) 6.62 in.
Hole size 8.0 in.
Cement top 0 feet
Cubic feet 40

Long string
Setting depth 980 feet
Size (OD) 4.5 in.
Hole size 6.125 in.
Cement top 0 feet
Cubic feet 95

Liner
Setting depth feet
Size (OD) in.
Hole size in.
Cement top feet
Cubic feet

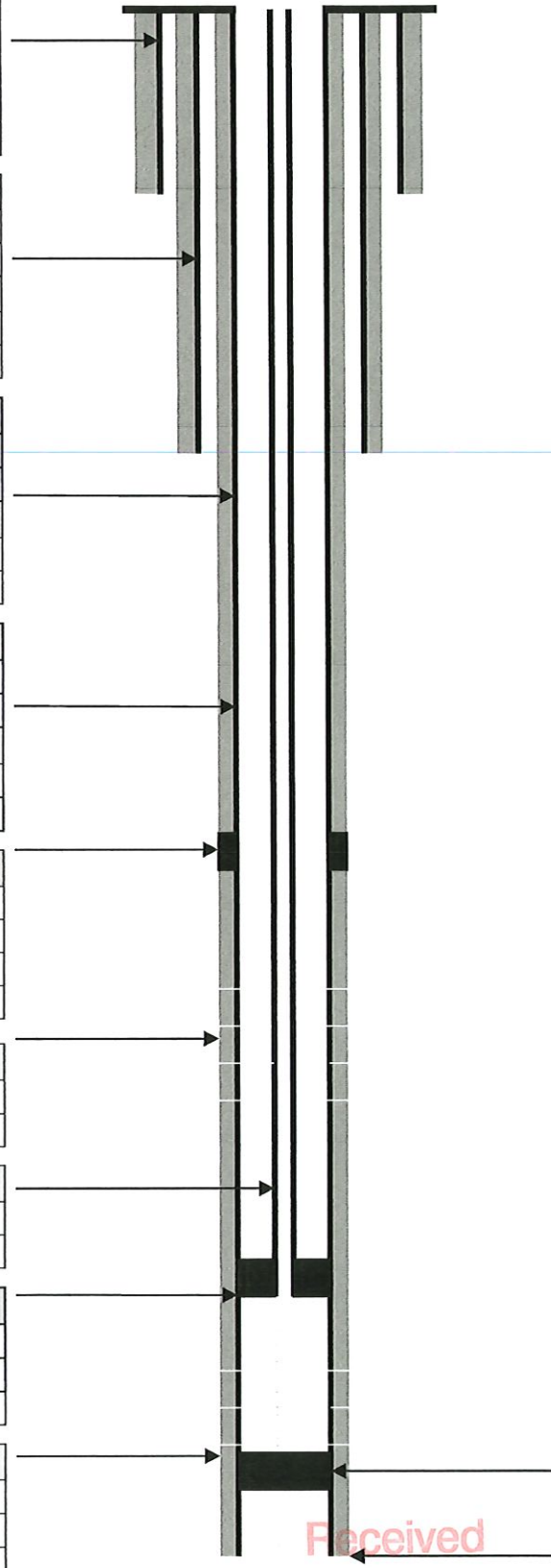
Centralizers
250 ft.
500 ft.
960 ft.
ft.

Cement squeeze
Perf. From ft. to ft.
Cubic feet

Tubing
Setting depth 930 feet
Size (OD) 2.375 in.

Packers
Setting depth 930 feet
Setting depth feet
Setting depth feet

Perforations
From ft. to ft.
From ft. to ft.
From ft. to ft.
From ft. to ft.



GEOLOGIC INFORMATION

Confining zone
Name Maquoketa
Intervals From 264 to 979 ft.
Primary lithology (Check one.)
<input checked="" type="checkbox"/> Shale <input type="checkbox"/> Limestone

Injection zones (Top to bottom)
Name Trenton
Intervals From 979 to 1105 ft.
Primary lithology (Check one.)
<input type="checkbox"/> Sandstone <input checked="" type="checkbox"/> Limestone
Name Black River
Intervals From 1105 to 1405 ft. <i>1364</i>
Primary lithology (Check one.)
<input type="checkbox"/> Sandstone <input checked="" type="checkbox"/> Limestone
Name
Intervals From to ft.
Primary lithology (Check one.)
<input type="checkbox"/> Sandstone <input type="checkbox"/> Limestone
Name
Intervals From to ft.
Primary lithology (Check one.)
<input type="checkbox"/> Sandstone <input type="checkbox"/> Limestone

NOTE: Only fill in production zone information for Dual Completion wells.

Production zones (Top to bottom)
Name
Intervals From to ft.
Primary lithology (Check one.)
<input type="checkbox"/> Sandstone <input type="checkbox"/> Limestone
Name
Intervals From to ft.
Primary lithology (Check one.)
<input type="checkbox"/> Sandstone <input type="checkbox"/> Limestone
Name
Intervals From to ft.
Primary lithology (Check one.)
<input type="checkbox"/> Sandstone <input type="checkbox"/> Limestone

Plugback depth <i>1364</i> ^{per operation} <i>5/13/2024</i>
Plugback type (Check all that apply.)
<input type="checkbox"/> CIBP
<input checked="" type="checkbox"/> Cement
<input type="checkbox"/> Other (Explain below.)

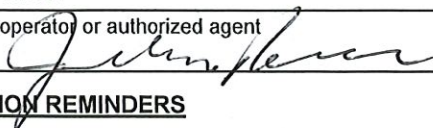
Total depth <i>1425</i> feet

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Continued on next page.

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PART VI AFFIRMATION	
I affirm under penalty of perjury that the information provided in this application is true to the best of my knowledge and belief.	
Typed or printed name of operator or authorized agent Jack W Racer	
Signature of operator or authorized agent 	Date signed (month, day, year) 1/3/2023

APPLICATION REMINDERS**PART I:**

- Enter the name of the operator exactly as it appears on the Organizational Report.
- Register with the Indiana Secretary of State if you will operate as a Corporation, Limited Partnership, or Limited Liability Company.
- If a Certificate of Deposit is selected as the Bond Type, attach the original CD and original Verification of Certificate form.
- The name of the operator on this application and the name of the principal on the bond **must** be identical.
- 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.
- In accordance with 312 IAC 29-4-2 (d) attach the \$250 permit fee (\$750 for expedited permit). If paying by check, please make payment to the Indiana Department of Natural Resources and send the check along with the completed application to the Division's address shown at the top of the form.

PART II

- If the well will be an oil or gas well, indicate the distance to the nearest well capable of production from the same formation as proposed in this application. Refer to the rules on minimum well spacing requirements to ensure the well will be placed a sufficient distance from existing wells.
- If the well will be drilled on property that is part of a waterflood or has been voluntarily pooled, you must enter the number of acres in the unit and provide a separate map showing the boundaries of the entire unit.
- If you check the Other box under the Drilling Unit section, attach a copy of the exception.
- If acreage is communitized, 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.
- You must indicate that you own or control all of the oil and gas within the proposed drilling unit before a permit can be issued. If you do not own or control all of the oil and gas within the proposed drilling unit you must describe the basis upon which you claim the right to drill and operate a well for oil and gas purposes.
- If the well location is less than 200 feet from a house, barn, building, or other structure, you must provide a copy of the written consent to the proposed well location from the surface owner(s) and the structure owner(s), if different.
- If you are applying for a new well permit, 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.
- If the well will be located within an incorporated city or town, you must enclose a copy of the official consent from the municipality to drill the well.
- If the well location falls within the boundaries of a coal mine permit, you must provide a copy of the correspondence or notice to the coal operator of your intent to drill that specifies the well location.
- If the well location falls within one-half mile of an underground gas storage field or an underground petroleum storage field, you must provide a copy of the correspondence or notice to the operator of the storage field of your intent to drill.

PART III

- Enter all proposed construction information so that the Division can determine if the construction meets rule requirements.
- For directional or horizontal wells, you must provide a proposed directional survey.
- For horizontal wells, provide a cross section and indicate the UTMs for the proposed surface location, kickoff point, point at which the well enters the target formation, and termination point of each planned lateral.
- If you have additional information on well construction, please include it under Notes.

PART IV

- For all wells, specify a proposed total vertical depth, deepest formation name, and pool name.
- For horizontal wells, specify the proposed measured length.
- For Class II wells, attach documentation to support the proposed maximum allowable injection pressure and injection rate.

PART V

- The well diagram must be completed for all Class II well applications.
- Proof of cement is required for all Class II wells in the form of cement tickets or a cement bond log.

PART VI

- Applications that do not contain an original signature cannot be processed, and the signature **must** match a signature shown in Part V of the 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.

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.

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Division of Oil & Gas

#53925

PART VII

SURVEY

General Instructions

Use a 1"=1000' scale

Surveyor must complete the following

- Clearly indicate the section township, and range on the survey, spot the well and show the footages from the lines
- Use the surveyor's notes to explain deviations from a standard location such as topography and irregular sections

Operator or authorized agent must complete the following

- For oil or gas wells, separately outline the boundary of both of the following:
 - the leased or communitized area; AND
 - the drilling unit allotment
- For all Directional and Horizontal wells show the surface location AND termination point of the well.
- For all Horizontal wells identify the points where each horizontal drainhole enters and departs the target zone.
- For Enhanced Recovery and Saltwater Disposal wells, draw a 1/4 mile radius circle around the proposed well, spot all other wells (plugged or unplugged) that intersect the proposed injection zone(s), and put the permit number of each well over the spot.

NOTE: Please show the entire 1/4 mile radius circle around proposed Class II wells

SURVEYORS' NOTES:

Well Coordinates:

Chalfant Farms #1

N (y): 4,451,068 m

E (X): 654,488 m

UTM, NAD (83), Z 16 N

Randolph Co., Indiana

 = Lease Area

Total Lease Acres= 729.25

Acres Pertinent to Chalfant

Farms #1 = 200

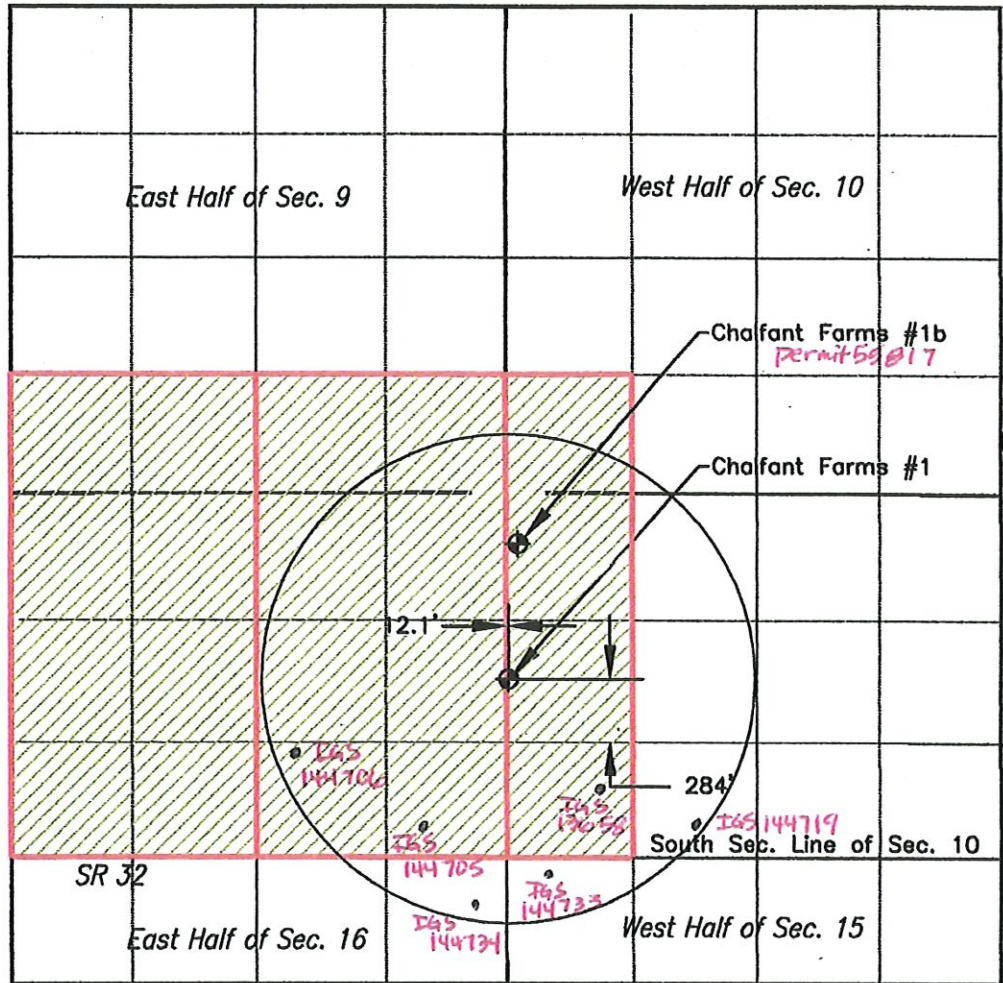
SURVEYORS' SEAL:



NAD 1983 UTM Zone 16N

UTMx: 654,488 m

UTMy: 4,451,068 m



R 12 (E) or W

CERTIFICATION

I hereby certify that to the best of my knowledge and belief, the proposed location of the above described well, fixed as the result of an instrument survey made by me in compliance with the requirements of the laws of Indiana, is truly and correctly set forth hereon.

Signature of registered Indiana land surveyor

Date signed (mm,dd,yyyy)

04/08/2022

Address (Street or PO, City, State, Zip)

10554 Misty Cove Lane, Fishers, In. 46040

Telephone number

(317) 307 - 0400

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)
- This form **must** contain an original signature and original seal.
- Coordinates should be based upon NAD 1983 Datum, Universal Transverse Mercator (UTM) Coordinate System, Zone 16N.

JN# 2019-026 #1

JAN 10 2023

Division of Oil & Gas

#53925
DN 1st

List of persons who Direct Notification was attempted:

- (K) James and Phyllis Shoptaw *del. version* 9/14/2023 (N) George Boggs *delivered on* 12/22/2023
 10982 W South St 1947 Tree St
 Parker City, IN 47368 Parker City, IN 47368
- (L) Tisha Jones 12/22/2023 (F) Tim & Linda McKelvey 5/20/2022
 1947 N Co Rd 1100 W 1975 N Tree Street
 Parker City, IN 47368 Parker City, IN 47368
- (A) Roslyn Gourley 5/16/2022 (G) Robert & Rhonda Main 5/17/2022
 1971 N Co Rd 1100 W 10871 W SR 32
 Parker City, IN 47368 Parker City, IN 47368
- (B) Danny & Melissa Baker 5/20/2022 (H) LMCC Real Estate 5/25/2022
 1974 N Tree St 1206 S Meeker
 Parker City, IN 47368 Muncie, IN 47302
- (C) Chalfant Farms, Inc 5/16/2022 (O) All Care Investments *LMCC Real Estate* 12/22/2023
 11169 W SR 32 2280 W Kilgore *Same as (H)*
 Parker City, IN 47368 Muncie, IN 47304
- (M) Glenn & Marilyn Ferguson 12/22/2023 (I) Greg Cassel Land Corp 5/16/2022
 1944 Tree St 12415 W Co Rd 300 N
 Parker City, IN 47368 Parker City, IN 47368
- (D) Clyde & Jane Lockard 5/16/2022 (J) Todd Orme 5/18/2022
 1930 N Tree St 10794 W SR 32
 Parker City, IN 47368 Parker City, IN 47368
- (E) Adam Morrow & Tabitha Whitsitt 5/16/2022
 1935 N Tree St
 Parker City, IN 47368

Received
JAN 10 2023
Division of Oil & Gas

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Roslyn Gourley
 1971 N 1100W
 Parker City, IN 47368



9590 9403 0397 5163 7131 94

2. Article Number (Transfer from service label)
 7015 0640 0001 2973 9389

COMPLETE THIS SECTION ON DELIVERY

A. Signature MS C-19R-1 Agent Addressee

B. Received by (Printed Name) *Gourley* C. Date of Delivery

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:
 JAN 10 2023

Division of Oil & Gas
 #53925 DN (A)

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

#53925
 DN Pack

(A) ✓

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Danny Melissa Baker
 1974 N Tree St
 Parker City, IN 47368



9590 9403 0397 5163 7132 17

2. Article Number (Transfer from service label)
 7015 0640 0001 2973 9396

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] Agent Addressee

B. Received by (Printed Name) *Danny Baker* C. Date of Delivery *5-20-23*

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

JAN 10 2023
 #53925 DN (B)
 Division of Oil & Gas

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

(B) ✓

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Chalfant Farms Inc
 1169 W SR32
 Parker City, IN 47368



9590 9403 0397 5163 7132 31

2. Article Number (Transfer from service label)
 7015 0640 0001 2973 9358

COMPLETE THIS SECTION ON DELIVERY

A. Signature MS C-19R-1 Agent Addressee

B. Received by (Printed Name) *Chalfant* C. Date of Delivery

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

JAN 10 2023
 #53925 DN
 Division of Oil & Gas


3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

(C) ✓


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> MS C-19 R-1 <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Clyde & Jane Lockard 1930 N Tree St Parker City, IN 47368	B. Received by (Printed Name) Lockard	C. Date of Delivery JAN 10 2023
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No #53925 DN (D)	
 9590 9403 0397 5163 7131 70	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery	
2. Article Number (Transfer from service label) 7015 0640 0001 2973 9419	PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt	

#53925
DN proof

(D)

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> Sabrina Whitsett <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Adam Morrow & Tabitha Whitsett 1935 N Tree St Parker City, IN 47368	B. Received by (Printed Name)	C. Date of Delivery JAN 10 2023
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No #53925 DN (E)	
 9590 9403 0397 5163 7131 63	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery	
2. Article Number (Transfer from service label) 7015 0640 0001 2973 9426	PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt	

(E)

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> MS C-19 R-1 <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Tim & Linda McKelvey 1975 N Tree Lane Parker City, IN 47368	B. Received by (Printed Name) McKelvey	C. Date of Delivery JAN 10 2023
	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No #53925 DN (F)	
 9590 9403 0397 5163 7131 49	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery	
2. Article Number (Transfer from service label) 7015 0640 0001 2973 9440	PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt	

(F)


#53925
DN part


SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> <i>Khonda S. Main</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
	B. Received by (Printed Name) Received #53925 JAN 10 2023 Division of Oil & Gas DN (G)	C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes if YES, enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: Robert & Khonda Main 10871 W SR 32 Parker City, IN 47368	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery	
2. Article Number (Transfer from service label) 7015 0640 0001 2973 9457	Mail Restricted Delivery (0)	
PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature <input checked="" type="checkbox"/> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
	B. Received by (Printed Name) BKK Number #53925 JAN 10 2023 Division of Oil & Gas DN (H)	C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes if YES, enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: LMCC Real Estate 1206 S Mecker Muncie, IN 47302	3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery	
2. Article Number (Transfer from service label) 7015 0640 0001 2973 9464	Mail Restricted Delivery (0)	
PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt		

#53925

DN proof

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Mary Cassel</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><i>#53925</i> JAN 10 2023 <i>DN</i> <input checked="" type="checkbox"/> Division of Oil & Gas <input type="checkbox"/></p>												
<p>1. Article Addressed to: <i>Greg Cassel Land Corp</i> <i>12415 W Word 300N</i> <i>Parker City, IN 47368</i></p>  <p>9590 9403 0397 5163 7131 01</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®												
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™												
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery												
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise												
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™												
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
<p>2. Article Number (Transfer from service label) 7015 0640 0001 2973 9488</p>	<p>Mail Mail Restricted Delivery (0)</p>												
PS Form 3811, April 2015 PSN 7530-02-000-9053	Domestic Return Receipt												

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Todd Orme</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p><i>#53925</i> JAN 10 2023 <i>DN</i> <input checked="" type="checkbox"/> Division of Oil & Gas <input type="checkbox"/></p>												
<p>1. Article Addressed to: <i>Todd Orme</i> <i>10794 W SR 32</i> <i>Parker City, IN 47368</i></p>  <p>9590 9403 0397 5163 7130 95</p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®												
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™												
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery												
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise												
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™												
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
<p>2. Article Number (Transfer from service label) 7015 0640 0001 2973 9495</p>	<p>Mail Mail Restricted Delivery (0)</p>												
PS Form 3811, April 2015 PSN 7530-02-000-9053	Domestic Return Receipt												

Product Tracking & Reporting



Home Search Reports Manual Entry Rates/Commitments PDR/BDW USPS Corporate Accounts

USPS Tracking Intranet

Delivery Signature and Address

Tracking Number: 7015 0640 0001 2973 9365

This item was delivered on 06/16/2022 at 10:59:00

[Return to Tracking Number View](#)

#53925

DN proof
(K)

MS-19R-1
Shop-gw
12982 South

Address

Enter up to 35 items separated by commas.

SENDER: COMPLETE THIS SECTION

- Complete Items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

James A. Phyllis Shipton
10982 W South St
Parker City, IN 47368



9590 9403 0397 5163 7132 24

2. Article Number (Transfer from service label)

7015 0640 0001 2973 9365

COMPLETE THIS SECTION

- A. Signature
X
- B. Received by
- D. Is delivery accepted? If YES, enter

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Mail Restricted Delivery
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at www.usps.com.

Parker City, IN 47368

Certified Mail Fee	\$3.75
Extra Services & Fees (check box, add fee)	\$3.05
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.58
Total Postage and Fees	\$7.38

MA, INDIAN
Postmark Here
MAY 13 2022
05/13/2022
47368-9998 USPS

7015 0640 0001 2973 9365

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Tracking Number:

9505511667963354176735

 Copy  Add to Informed Delivery

Jones

#53925
UN prot
(L)

Latest Update

Your item was delivered in or at the mailbox at 10:15 am on December 22, 2023 in PARKER CITY, IN 47368.

Get More Out of USPS Tracking:

 USPS Tracking Plus®

Received
JAN 03 2024
Division of Oil & Gas

Delivered

Delivered, In/At Mailbox
PARKER CITY, IN 47368
December 22, 2023, 10:15 am

Out for Delivery

PARKER CITY, IN 47368
December 22, 2023, 7:38 am

Arrived at Post Office

PARKER CITY, IN 47368
December 22, 2023, 7:27 am

Departed USPS Regional Facility

MUNCIE IN DISTRIBUTION CENTER
December 22, 2023, 5:38 am

Arrived at USPS Regional Facility

MUNCIE IN DISTRIBUTION CENTER
December 22, 2023, 3:35 am

In Transit to Next Facility

December 22, 2023, 2:51 am

Departed USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER ANNEX
December 22, 2023, 2:18 am

Arrived at USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER ANNEX
December 21, 2023, 1:05 am

Departed Post Office

SELMA, IN 47383
December 20, 2023, 4:02 pm

USPS in possession of item

#53925
DN permit (L)

PUBLIC NOTICE

Jack W. Racer, 5900 S County Rd 575 E, Selma, IN 47383 has submitted to the Division of Oil and Gas a request to convert an existing well to a Class II Saltwater Disposal well to be used for the injection of produced brine. This well is located in Section 10, Twp. 20N, Rng. 12E in Randolph County, Indiana.

The subject well – Chalfant Farms #1, permit #53925 - will be injecting fluid into the Trenton Limestone within the depth interval of 979 feet to 1105 feet and the Black River Limestone within a depth interval of 1105 feet to 1405 feet at a maximum injection pressure not to exceed zero pounds per square inch. The maximum injection rate for this well will not exceed 2000 barrels per day.

Written comments and objections, a request for a copy of this application or a request for an informal hearing concerning this application must be submitted to the Division of Oil and Gas within 15 days from the receipt date of this notice and should be mailed to:

Department of Natural Resources
Division of Oil & Gas
Attn: Technical Section
402 W Washington St
Rm 293
Indianapolis, IN 46204-2748

Received

JAN 03 2024

Division of Oil & Gas

Attn: Jisha Jones
1947 N 1100 W
Parker City, IN
47368

USPS 9505511667963354176735



#53925
 DN print
 (L)

Type notes here	Printed 12/20/2023	The purpose of this map is to display the geographic location of a variety of data sources frequently updated from local government and other agencies. Neither WTH Technology nor the agencies providing this data make any warranty concerning its accuracy or merchantability. And no part of it should be used as a legal description of document.
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68-07-15-211-038.000-007

- General
- Bills
- Payments
- Deductions
- Assessments

Owner and General Parcel Information

Property Card	Show Property Card
	NOTE: Property Record Cards will be updated following the next assessment certification date (late spring each year).
Images	Show Images(2)
OwnerName	Jones, Tisha L
StateParcelNumber	68-07-15-211-038.000-007
PropertyNumber	005-00129-00
MapNumber	
LegalDescription	Meeks Second Sub Div Lot 4
Acreage	0.5600

Received

JAN 03 2024

Division of Oil & Gas

InstrumentNumber	20204427
BookNumber	
PageNumber	
LocationAddress	1947 N 1100 W Parker City, IN 47368
OwnerAddress	1947 N 1100 W Parker City, IN 47368
NeighborhoodNumber	50101-007
NeighborhoodName	Monroe Res/AG
MarketArea	50101-007 - Residential
PropertyClass	1 Family Dwell - Platted Lot
PropertyClassNumber	510
LocalParcelNumber	005-00129-00
RoutingNumber	007 017 002.00

Tax Bill History
Information

Tax Year	Spring	Fall
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Tracking Number:

9505511667963354176698

 Copy  Add to Informed Delivery

Fergusons

#53925

DN pref

(M)

Latest Update

Your item was delivered in or at the mailbox at 10:16 am on December 22, 2023 in PARKER CITY, IN 47368.

Get More Out of USPS Tracking:

 USPS Tracking Plus[®]

Delivered

Delivered, In/At Mailbox
PARKER CITY, IN 47368
December 22, 2023, 10:16 am

Out for Delivery

PARKER CITY, IN 47368
December 22, 2023, 7:38 am

Arrived at Post Office

PARKER CITY, IN 47368
December 22, 2023, 7:27 am

Departed USPS Regional Facility

MUNCIE IN DISTRIBUTION CENTER
December 22, 2023, 5:38 am

Arrived at USPS Regional Facility

MUNCIE IN DISTRIBUTION CENTER
December 21, 2023, 4:55 pm

Departed USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER ANNEX
December 21, 2023, 4:09 pm

Arrived at USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER ANNEX
December 21, 2023, 12:49 am

Departed Post Office

SELMA, IN 47383
December 20, 2023, 4:02 pm

USPS in possession of item

Received

JAN 03 2024

Division of Oil & Gas

#53925

DN proof

(M)

PUBLIC NOTICE

Jack W. Racer, 5900 S County Rd 575 E, Selma, IN 47383 has submitted to the Division of Oil and Gas a request to convert an existing well to a Class II Saltwater Disposal well to be used for the injection of produced brine. This well is located in Section 10, Twp. 20N, Rng. 12E in Randolph County, Indiana.

The subject well – Chalfant Farms #1, permit #53925 - will be injecting fluid into the Trenton Limestone within the depth interval of 979 feet to 1105 feet and the Black River Limestone within a depth interval of 1105 feet to 1405 feet at a maximum injection pressure not to exceed zero pounds per square inch. The maximum injection rate for this well will not exceed 2000 barrels per day.

Written comments and objections, a request for a copy of this application or a request for an informal hearing concerning this application must be submitted to the Division of Oil and Gas within 15 days from the receipt date of this notice and should be mailed to:

Department of Natural Resources
Division of Oil & Gas
Attn: Technical Section
402 W Washington St
Rm 293
Indianapolis, IN 46204-2748

Received

JAN 03 2024

Division of Oil & Gas

Attn: Glenn & Marilyn Ferguson
1944 N Tree St
Parker City, IN 47368

USPS 9505511667963354176698



#153925
 DW pro &
 (M)

Type notes here	Printed 12/20/2023	The purpose of this map is to display the geographic location of a variety of data sources frequently updated from local government and other agencies. Neither WTH Technology nor the agencies providing this data make any warranty concerning its accuracy or merchantability. And no part of it should be used as a legal description or document.
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68-07-15-211-039.000-007

- General
- Bills
- Payments
- Deductions
- Assessments

Owner and General Parcel Information

Property Card	Show Property Card
	NOTE: Property Record Cards will be updated following the next assessment certification date (late spring each year).
Images	Show Images(1)
OwnerName	Ferguson, Glenn E & Marilyn K
StateParcelNumber	68-07-15-211-039.000-007
PropertyNumber	005-00158-00
MapNumber	
LegalDescription	Meeks 2nd Sub Div Lot 5
Acreage	0.4100

Received
 JAN 03 2024
 Division of Oil & Gas

InstrumentNumber	20075012
BookNumber	
PageNumber	
LocationAddress	1944 N Tree St Parker City, IN 47368
OwnerAddress	1944 N Tree St Parker City, IN 47368
NeighborhoodNumber	50101-007
NeighborhoodName	Monroe Res/AG
MarketArea	50101-007 - Residential
PropertyClass	1 Family Dwell - Platted Lot
PropertyClassNumber	510
LocalParcelNumber	005-00158-00
RoutingNumber	007 017 050.00

TaxBill History
 Information

Year Status Fee

Tracking Number:

9505511667963354176711

 Copy  Add to Informed Delivery

Boggs

#53925

DN proof

(N)

Latest Update

Your item was delivered in or at the mailbox at 10:16 am on December 22, 2023 in PARKER CITY, IN 47368.

Get More Out of USPS Tracking:

 USPS Tracking Plus®

Delivered

Delivered, In/At Mailbox
PARKER CITY, IN 47368
December 22, 2023, 10:16 am

Out for Delivery

PARKER CITY, IN 47368
December 22, 2023, 7:38 am

Arrived at Post Office

PARKER CITY, IN 47368
December 22, 2023, 7:27 am

Departed USPS Regional Facility

MUNCIE IN DISTRIBUTION CENTER
December 22, 2023, 5:38 am

Arrived at USPS Regional Facility

MUNCIE IN DISTRIBUTION CENTER
December 21, 2023, 4:55 pm

Departed USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER ANNEX
December 21, 2023, 4:09 pm

Arrived at USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER ANNEX
December 21, 2023, 12:48 am

Departed Post Office

SELMA, IN 47383
December 20, 2023, 4:02 pm

USPS in possession of item

Received

JAN 03 2024

Division of Oil & Gas

#53925

DN permit
(N)

PUBLIC NOTICE

Jack W. Racer, 5900 S County Rd 575 E, Selma, IN 47383 has submitted to the Division of Oil and Gas a request to convert an existing well to a Class II Saltwater Disposal well to be used for the injection of produced brine. This well is located in Section 10, Twp. 20N, Rng. 12E in Randolph County, Indiana.

The subject well – Chalfant Farms #1, permit #53925 - will be injecting fluid into the Trenton Limestone within the depth interval of 979 feet to 1105 feet and the Black River Limestone within a depth interval of 1105 feet to 1405 feet at a maximum injection pressure not to exceed zero pounds per square inch. The maximum injection rate for this well will not exceed 2000 barrels per day.

Written comments and objections, a request for a copy of this application or a request for an informal hearing concerning this application must be submitted to the Division of Oil and Gas within 15 days from the receipt date of this notice and should be mailed to:

Department of Natural Resources
Division of Oil & Gas
Attn: Technical Section
402 W Washington St
Rm 293
Indianapolis, IN 46204-2748

Attn: Georg Ryan Boggs
1947 N Free St
Parker City, IN
47368

Received
JAN 03 2024
Division of Oil & Gas

USPS 9505511667963354176711

#53925
 DW proof
 (N)



Type notes here	Printed 12/20/2023	The purpose of this map is to display the geographic location of a variety of data sources frequently updated from local government and other agencies. Neither WTH Technology nor the agencies providing this data make any warranty concerning its accuracy or merchantability. And no part of it should be used as a legal description or document.
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68-07-15-211-040.000-007

- General
- Bills
- Payments
- Deductions
- Assessments

Owner and General Parcel Information

Property Card	Show Property Card
	NOTE: Property Record Cards will be updated following the next assessment certification date (into spring each year).
Images	Show Images(1)
OwnerName	Boggs, Georg Ryan
StateParcelNumber	68-07-15-211-040.000-007
PropertyNumber	005-00350-00
MapNumber	
LegalDescription	Meeks 2nd Add Lot 6 & Lot No 2 Nw 15-20-12 .227 A
Acreage	0.5400

Received
 JAN 03 2024
 Division of Oil & Gas

InstrumentNumber	20120449
BookNumber	
PageNumber	
LocationAddress	1947 N Tree St Parker City, IN 47368
OwnerAddress	1947 N Tree St Parker City, IN 47368
NeighborhoodNumber	50101-007
NeighborhoodName	Monroe Res/AG
MarketArea	50101-007 - Residential
PropertyClass	1 Family Dwell - Platted Lot
PropertyClassNumber	510
LocalParcelNumber	005-00350-00
RoutingNumber	007 017 041.00

Tax Bill History
 Information

Tax Year	Spring	Fall
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Tracking Number:

9505511667963354176674

Copy Add to Informed Delivery

LMCC Real Estate

#53925

DN proof ①

Latest Update

Your item was delivered in or at the mailbox at 12:50 pm on December 22, 2023 in MUNCIE, IN 47302.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Delivered

Delivered, In/At Mailbox
MUNCIE, IN 47302
December 22, 2023, 12:50 pm

Out for Delivery

MUNCIE, IN 47302
December 22, 2023, 6:10 am

Arrived at Post Office

MUNCIE, IN 47302
December 22, 2023, 4:17 am

Departed USPS Regional Facility

MUNCIE IN DISTRIBUTION CENTER
December 22, 2023, 3:18 am

Arrived at USPS Regional Facility

MUNCIE IN DISTRIBUTION CENTER
December 21, 2023, 5:09 pm

Arrived at USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER
December 21, 2023, 3:16 pm

Departed USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER ANNEX
December 21, 2023, 3:10 pm

Arrived at USPS Regional Facility

INDIANAPOLIS IN DISTRIBUTION CENTER ANNEX
December 21, 2023, 1:09 am

Departed Post Office

Received

JAN 03 2024

Division of Oil & Gas

#53925

dw proof (0)

PUBLIC NOTICE

Jack W. Racer, 5900 S County Rd 575 E, Selma, IN 47383 has submitted to the Division of Oil and Gas a request to convert an existing well to a Class II Saltwater Disposal well to be used for the injection of produced brine. This well is located in Section 10, Twp. 20N, Rng. 12E in Randolph County, Indiana.

The subject well – Chalfant Farms #1, permit #53925 - will be injecting fluid into the Trenton Limestone within the depth interval of 979 feet to 1105 feet and the Black River Limestone within a depth interval of 1105 feet to 1405 feet at a maximum injection pressure not to exceed zero pounds per square inch. The maximum injection rate for this well will not exceed 2000 barrels per day.

Written comments and objections, a request for a copy of this application or a request for an informal hearing concerning this application must be submitted to the Division of Oil and Gas within 15 days from the receipt date of this notice and should be mailed to:

Department of Natural Resources
Division of Oil & Gas
Attn: Technical Section
402 W Washington St.
Rm 293
Indianapolis, IN 46204-27

Attn: LMCC Real Estate
1206 S Meeker Ave
Muncie, IN
47302

QSPS 9505511667963354176674

Previously
"all Care Investments"

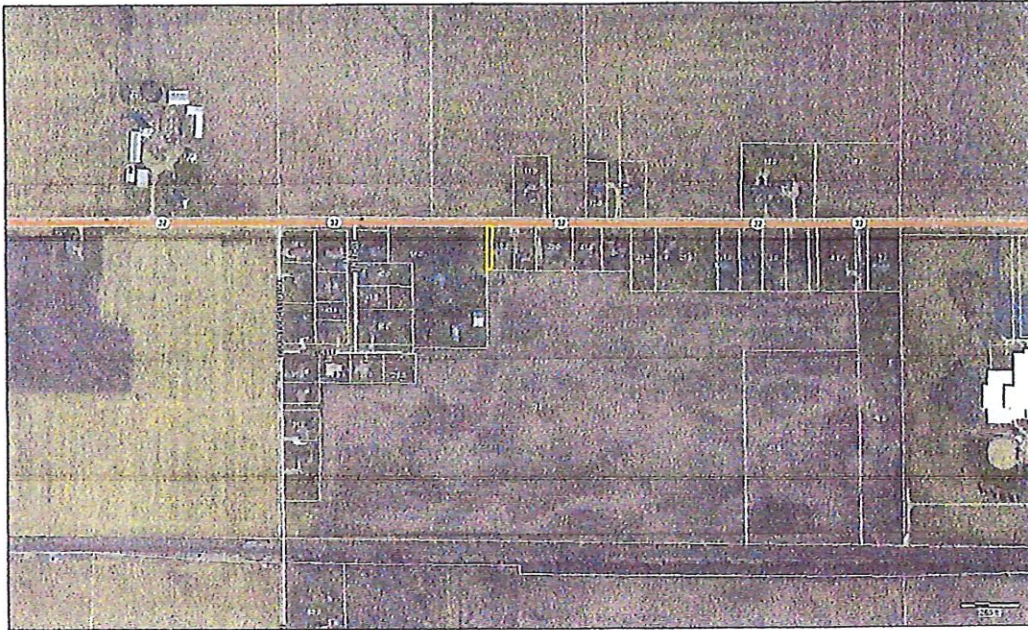
Received

JAN 03 2024

Division of Oil & Gas

#53925

JN proof



Type notes here	Printed 12/20/2023	The purpose of this map is to display the geographic location of a variety of data sources frequently updated from local government and other agencies. Neither WTH Technology nor the agencies providing this data make any warranty concerning its accuracy or merchantability. And no part of it should be used as a legal description or document.
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68-07-15-200-017.000-007

- General
- Bills
- Payments
- Deductions
- Assessments

Owner and General Parcel Information

Property Card	Show Property Card
	NOTE: Property Record Cards will be updated following the next assessment certification date (late spring each year).
OwnerName	LMCC Real Estate LLC
StateParcelNumber	68-07-15-200-017.000-007
PropertyNumber	005-00073-00
MapNumber	
LegalDescription	Lot No 2 Pt Nw 15-20-12 .132 A
Acreage	0.1320
InstrumentNumber	20135276

BookNumber	
PageNumber	
LocationAddress	W St Rd 32 Parker City, IN 47368
OwnerAddress	1206 S Meeker Ave Muncie, IN 47302
NeighborhoodNumber	50101-007
NeighborhoodName	Monroe Res/AG
MarketArea	50101-007 - Residential
PropertyClass	Vacant - Unplatted (0 to 9.99 Acres)
PropertyClassNumber	501
LocalParcelNumber	005-00073-00
RoutingNumber	007 017 037.00

Received
JAN 03 2024
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Tax Bill History Information

Tax Year	Spring	Fall
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SELMA
 211 S ALBANY ST
 SELMA, IN 47383-9998
 (800)275-8777

12/20/2023 09:52 AM

Product	Qty	Unit Price	Price
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Priority Mail® Flat Rate Env Muncie, IN 47302 Flat Rate Expected Delivery Date - Thu 12/21/2023 Tracking #: 9505 5116 6796 3354 1766 74 Insurance Up to \$100.00 included	1		\$9.65 \$0.00
Total			\$9.65

Priority Mail® Flat Rate Env Parker City, IN 47368 Flat Rate Expected Delivery Date - Fri 12/22/2023 Tracking #: 9505 5116 6796 3354 1766 98 Insurance Up to \$100.00 included	1		\$9.65 \$0.00
Total			\$9.65

Priority Mail® Flat Rate Env Parker City, IN 47368 Flat Rate Expected Delivery Date Fri 12/22/2023 Tracking #: 9505 5116 6796 3354 1767 11 Insurance Up to \$100.00 included	1		\$9.65 \$0.00
Total			\$9.65

Priority Mail® Flat Rate Env Parker City, IN 47368 Flat Rate Expected Delivery Date Fri 12/22/2023 Tracking #: 9505 5116 6796 3354 1767 35 Insurance Up to \$100.00 included	1		\$9.65 \$0.00
Total			\$9.65

Grand Total: \$38.60

Credit Card Remit \$38.60

Card Name: VISA
 Account #: XXXXXXXXXXXX6581
 Approval #: 07458D
 Transaction #: 968
 AID: A0000000031010 Chip
 AL: VISA CREDIT
 PIN: Not Required CHASE VISA

#53925

DN proof

LMN & Co

Received

JAN 03 2024

Division of Oil & Gas

#53925
PN

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Attn: Technical Section
402 W Washington St
Rm 293
Indianapolis, IN 46204-2748

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JAN 10 2023
Division of Oil & Gas

#53925
PN
Proof

R & S Drilling, Inc

To: The News Gazette
224 W Franklin St
Winchester IN 47394
Ad# 15264

Randolph County IN

ATTACH
COPY OF
ADVERTISEMENT
HERE

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LEGALS

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Indianapolis, IN 46204-2748

15264 1T 5/24/2022

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----- 28
----- 30

1.008

\$60.48

nt

\$60.48

Size of type 7 point

Pursuant to the provisions and penalties of IC 5-11-10-1, I hereby certify that the foregoing account is just and correct, that the amount claimed is legally due, after allowing all just credits, and that no part of the same has been paid.

I also certify that the printed matter attached hereto is a true copy, of the same column width and type size, which was duly published in said paper 1 time(s). The dates of publication being as follows:

May 24, 2022

Additionally, the statement checked below is true and correct:

- Newspaper does not have a Web site.
- Newspaper has a Web site and this public notice was posted on the same day as it was published in the newspaper.
- Newspaper has a Web site, but due to technical problem or error, public notice was posted on
- Newspaper has a Web site but refuses to post the public notice.

Date 24-May-22

Debbie Clay
Title: Legal Manager

Received

JAN 10 2023

Division of Oil & Gas