

Form 1000S  
Application for seismic operations  
OAC 165:5-3-1(b)(1)(v); OAC 165:10-1-7(b)(3); OAC 165:10-7-32 (b)  
**PAYMENT REQUIRED**

**INSTRUCTIONS**

1. Required Payment: \$100.00
2. The Applicant must post a \$50,000 bond or an amount approved by the Commission for small projects with the Oil and Gas Division, Surety Department. **Note: Financial Statements or Letters of Credit cannot be accepted.**
3. A plat of the project area shall be attached. The plat must be provided on a Topographic map or a map with similar information and at the very least delineate the section or sections the line is to be run.
4. All seismic holes shall be filled within 4 to 10 feet from the surface with cement grout, native cuttings, or an appropriate substitute. The remainder of the hole shall be filled with native cuttings or soil.
5. All seismic holes shall be plugged as soon as possible and shall not remain unplugged for a period of more than 10 days after the drilling of the hole.
6. Within 30 days after completing a seismic operation, the applicant shall submit a copy of approved Form 1000S certifying the plugging of all seismic or stratigraphic test holes and a post plat showing actual location of all seismic shot holes.
7. No seismic shot hole blasting shall be conducted within two hundred (200) feet of any habitable dwelling, building, or water well without written permission from the owner of the property or within five hundred (500) feet of any Super Fund site or hazardous waste facility.

|   |       |     |                 |                         |         |
|---|-------|-----|-----------------|-------------------------|---------|
| Applicant   |       |     |                 | OCC No. (If Applicable) |         |
| Permanent Address   |       |     | Phone No.       |                         | FAX No. |
| City  | State | Zip | Email           |                         |         |
| Field Address (if applicable)   |       |     |                 | Phone No.               |         |
| City  | State | Zip | FAX No.         |                         |         |
| Contractor  |       |     |                 | OCC No.                 |         |
| Permanent Address   |       |     | Phone No.       |                         | FAX No. |
| City  | State | Zip | Email           |                         |         |
| Field Address (if applicable)   |       |     |                 | Phone No.               |         |
| City  | State | Zip | FAX No.         |                         |         |
| COUNTY OR COUNTIES  |       |     | NAME OF PROJECT |                         |         |
| FOR OCC USE ONLY  |       |     |                 |                         |         |
| <input type="checkbox"/> 2D SEISMIC <input type="checkbox"/> 3D SEISMIC <input type="checkbox"/> NCRS <input type="checkbox"/> SUPERFUND <input type="checkbox"/> HAZARDOUS WASTE |       |     |                 |                         |         |

☐ 2D SEISMIC   ☐ 3D SEISMIC

☐ PLAT OF SEISMIC LINE ATTACHED   ☐ PLAT OF SURFACE ENERGY SOURCE AREA

SURFACE ENERGY SOURCE \_\_\_\_\_

DRILLING SEISMIC SHOT HOLES? ☐ YES   ☐ NO   (IF YES PLEASE FILL IN INFORMATION BELOW)

APPROX. DEPTH OF HOLES TO BE DRILLED: \_\_\_\_\_

APPROX. NUMBER OF HOLES: \_\_\_\_\_

SIZE OF CHARGE TO BE USED: \_\_\_\_\_

EST. DATE OPERATIONS BEGIN: \_\_\_\_\_

☐ FINANCIAL SECURITY GUARANTEE

DISTRICT OFFICE NOTIFIED:   ☐ DISTRICT I   ☐ DISTRICT II   ☐ DISTRICT III   ☐ DISTRICT IV

I hereby certify that I am authorized to submit this application prepared by me or under my supervision. The facts and proposal made herein are true, correct, and complete to the best of my knowledge and belief.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Signature of Affiant

Name (Typed or Printed)

Phone Number

OCC APPROVAL:

Signature

Date

*This permit shall expire within one year of date of issuance unless seismic operations commence*