

For NDOM Use Only

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By: _____ Date: _____

STATE OF NEVADA
 COMMISSION ON MINERAL RESOURCES
DIVISION OF MINERALS
 400 W. King Street, Suite 106
 Carson City, Nevada 89703
 (775) 684-7040 | Fax (775) 684-7052
<http://minerals.nv.gov>

Date Received _____

API # _____

County _____

Permit Number _____
FOR DIVISION USE ONLY

GEOHERMAL RESOURCE DEVELOPMENT PERMIT APPLICATION

Name or Corporate/Business Name _____

Nevada SOS Business ID Number _____

Street Address _____

City _____ State _____ Zip Code _____

hereby makes application for a geothermal development permit, State of Nevada, Division of Minerals.

(If applicant is a corporation, show state and date of incorporation; if a partnership, list names of partners.)

This application is for a Domestic well Commercial well Industrial well

Other, specify: Observation well Thermal Gradient well Re-entry

Note: Re-entry includes workover, deepening, or plugging back operations.

Applicant is: Land Owner Lease Holder

Well Name: _____

Lease Name/No: _____ Split Estate? Yes No

Land Type: Federal (BLM, USFS, etc.) Private State

Location of Well:

Domestic: Street: _____

City: _____ County: _____

Commercial and Industrial:

_____ ¼ of, _____ ¼ in Section _____,

Township _____, Range _____,

UTM Northing _____ N; UTM Easting _____ E (NAD83 Datum)

County _____

(If applicable, give street address below.)

Street: _____

City: _____

State: _____ Zip: _____

Operator's Name: _____
Address: _____
City, St Zip: _____

Drilling Contractor's Name: _____
Address: _____
City, St Zip: _____

Rotary Rig Description: _____

Hole Size: _____ Casing Size: _____ Weight/Gauge: _____

Estimated Well Head Temperature: _____

Size of BOP: 2000 psi 3000 psi 5000 psi

Planned Use of Geothermal Resource:

Planned Disposal of Spent Geothermal Fluid:

Type and Amount of Bond: _____
(Exempt for Domestic Class)

Bond Issued by: _____ Serial No. _____
Geothermal Project Area (if applicable) _____

The Source of the Proposed Geothermal Resource is:

(List name of hot spring, geologic formation(s) or other source.)

Total Depth to be drilled: _____

Drilling will commence on or before: _____

Signature of Applicant/Agent: _____
Date: _____

Please attach a detailed drilling program including the following information:

1. Well design schematic; casing and mud programs; potential water supply; drilling rig to be used and pad layout; blow out prevention equipment diagram and testing program; directional drilling information if applicable; map of location and access roads. Additional information may be required upon review.
2. The required fee per NAC 534A 210 or 534A.212.

CONDITIONS OF PERMIT

1. All permittees must comply with appropriate sections of the Geothermal Rules and Regulations of the Division of Minerals and with applicable rules and regulations of other local, state, and federal agencies.
2. During the drilling of domestic geothermal wells, all water strata above the geothermal horizon being used must be sealed or separated in order to prevent their contents from passing into other strata.
3. All fresh water and water of value or possible value for other beneficial uses must be confined to their respective strata and be adequately protected by methods approved by the Division. Precautions must be taken in drilling and abandoning wells to guard against any loss of fresh water from the strata in which it occurs, and the contamination of any fresh water by objectionable water.
4. The operator of any well must shut off and exclude all water from any geothermal resource-bearing stratum to the satisfaction of the Division.
5. See attached Conditions of Approval.
6. Please send daily drilling reports to : Dustin Holcomb.....dholcomb@minerals.nv.gov
and
Crystal Cruson.....fluids@minerals.nv.gov

7. Additional Conditions/Comments

A.	
B.	
C.	

This permit does not extend the permittee the right of ingress and egress on public, private or corporate lands.

The issuance of this permit does not waive the requirements that the permit holder obtain other permits from State, Federal, and local agencies.

PERMIT APPROVAL

Approved _____ with the conditions noted above.
Date

Permit Number _____

Administrator
Division of Minerals