

**GAS WELL PERMIT APPLICATION
CITY OF COLLEYVILLE, TEXAS**

Operator Titan Operating, LLC

Mailing Address 111 W. Fourth Street, Ste 300
City Fort Worth

Telephone 817-698-8000
State TX

Fax 817-698-8343
Zip Code 76102

Individual designated to receive notice Chris Hammack

Mailing Address 111 W. Fourth Street, Ste 300
City Fort Worth
Email [REDACTED]

Telephone 817-698-8000
State TX
Mobile Phone 817-253-7248

Fax 817-698-8343
Zip Code 76102

Emergency 24-Hour Contact Person Tom Strother

Mailing Address 111 W. Fourth Street, Ste 300
City Fort Worth
Email [REDACTED]

Telephone 817-698-8000
State TX
Mobile Phone 972-533-6004

Fax 817-698-8343
Zip Code 76102

Surface Owner Trinity Broadcast Network
c/o John Casoria

Mailing Address 2442 Michelle Drive
City Tustin
Email [REDACTED]

Telephone 714-665-2102
State CA

Fax 714-665-2168
Zip Code 92780

Type of Gas Well Permit Requested:

New **Amend Existing Permit** **Operator Transfer** on all or a portion of an existing gas well permit lease

Well Information:

PROPOSED WELL NAME(S): Trinity C Unit No. 1H

PROPERTY DESCRIPTION: 13.241 acres out of the W.E. Crooks Survey, A-295

Lot 1, Block 1, Park Place Estates and Tract 1D of the W.E. Crooks Survey, A-295

ADDRESS: 7504 Pleasant Run Road

PARCEL AND PRODUCTION UNIT: Trinity C Unit

RRC PERMIT NUMBER: 707623

Gas Well Application Checklist

Applicant must complete the attached checklist at the time of filing this permit application.

Signature of Applicant or Applicant Representative.: _____

Date: 01/04/2011

Please Print Name: _____

Aric A. Head

THIS SECTION RESERVED FOR STAFF REVIEW				
Department	Approved	Approved As Noted	Denied	Date
Gas Well Inspector				
Planning and Zoning				
Landscape Administrator				
Engineering				
Environmental				
Fire Department				
COMMENTS:				
Fee	Receipt No.	Check No.	Date	Case No. GW#