

North Carolina Department of Environment and Natural Resources

Division of Energy, Mineral, and Land Resources

Energy Section - Oil and Gas Program

Form 20

Rev 03/2015

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Oil & Gas Program Use Only	
Date:	<input type="text"/>
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Confidential Information Claim

15A NCAC 05H .0707

Entity Requesting Confidential Information Status:

Authorized Representative Name: Phone:

Company Name: Fax:

Address: Email:

City: State: Zip:

Select the Type of Entity Requesting Confidential Information Status:

Type of Entity: Permittee Vendor Service Provider * Other

* Describe Other Type of Entity:

Provide a description of the information to be afforded confidential treatment:

Provide a statement of whether an oral presentation is desired, and, if so, the reason(s) for requesting such an oral presentation:

Provide a statement that the State Geologist has reviewed the confidential information and transmitted the certification to the requester, if required by G.S. 113-391.1:

Attach an affidavit with all the information outlined in 15A NCAC 05H .0707(d)(4):

Check to indicate documentation is attached by hardcopy or email.

Provide file name if attached by email:

This form must be signed.

Print Name: Title:

Signature: Date: