



ASRC ENERGY SERVICES
Alaska, Inc.

Via email: kimberley.maher@alaska.gov

April 18, 2019

15586.7EXT 19-036

State of Alaska
Department of Natural Resources
Division of Mining, Land, and Water
3700 Airport Way
Fairbanks, AK 99709-4699

Attn: Kimberley Maher

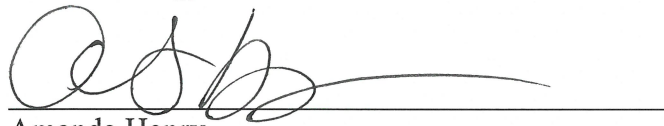
Application for Offroad Travel

Dear Ms. Maher:

ASRC Energy Services Alaska, Inc. (AES Alaska) submits the attached application (Attachment 1: Land Use Permit Application) for the offroad travel on State of Alaska uplands from the Colville to the Canning Rivers on the North Slope of Alaska to conduct commercial activities. The initial proposed work will be in support of land subsidence surveys conducted in the Prudhoe Bay Unit near the Kuparuk 7-11-12 pad.

We respectfully request review of our attached application. Please contact me at (907) 339-5472 or by email at ahenry@asrcenergy.com if you have any questions.

Sincerely,
ASRC Energy Services Alaska, Inc.



Amanda Henry
Senior Project Manager
Regulatory and Technical Services Division

Enclosures: Attachment 1: ADNLR Land Use Application
Attachment 2: Land Subsidence Survey Plan

STATE OF ALASKA DEPARTMENT OF NATURAL RESOURCES
DIVISION OF MINING, LAND AND WATER
LAND USE PERMIT APPLICATION
AS 38.05.850

Receipt Types: 7A – Application for Authorization, except
RR – Application for Authorization on Recreational Rivers System

Applicants must complete all sections of this application. In addition, applicants proposing:

- the use of the uplands and non marine waters must also complete the Supplemental Questionnaire for Use of Uplands and Non Marine Waters accompanying this application;
- off-road travel must also complete the Supplemental Questionnaire for Off-Road Travel accompanying this application; and/or
- the use of tide and submerged lands must also complete the Supplemental Questionnaire for Use of Marine Waters accompanying this application.

Other items that must accompany the completed application are:

- **a (non-refundable) application fee;** see current Director's Fee Order for applicable fees;
- a 1:250,000 or 1:63,360 scale USGS map showing the location of the proposed activity;
- additional items identified and required in any supplemental questionnaire(s) to this application; and
- additional pages if more space is necessary to answer the questions completely.

Completed Land Use Permit Applications should be mailed to one of the following offices:

Public Information Center
550 W. 7th Ave, Suite 1360
Anchorage, AK 99501
(907) 269-8400

Public Information Center
3700 Airport Way
Fairbanks, AK 99709
(907) 451-2705

MLW Information Office
400 Willoughby, #400
P.O. Box 111020
Juneau, AK 99811-1020
(907) 465-3400

LAS # _____

Applicant Information:

Applicant Name		Date of Birth	
Doing Business As		Contact Person	EIN
Mailing Address with City, State and Zip		Email Address	
()	(907) 339-5472	(907) 351-4662	()
Home Phone	Work Phone	Cell Phone	FAX
If you are applying for a corporation, give the following information:			
Name, address and place of incorporation: _____			
Is the corporation qualified to do business in Alaska? Yes [X] No [] . If yes, provide name, address and phone number of resident agent: _____			
Type of User, Select one: [] Private non-commercial (personal use) [] Commercial Recreation or Tourism			
[] Public Non-profit including Federal, State, Municipal Government Agency [X] Other commercial or industrial			

Duration of Project: The proposed activity will require the use of state land for: (Check one)

[] a single term of less than one year. **Beginning month:** _____ **Ending month:** _____

[X] a multi year term for up to 5 years. **Beginning year:** _____ **Ending year:** _____

If multi year and seasonal, circle months of use in each year. **Jan., Feb., Mar., Apr., May, Jun., Jul., Aug., Sept., Oct., Nov., Dec.**

Project Location

Latitude/Longitude or UTM: _____ or

_____ Section: _____, Township: _____, Range: _____, Meridian: _____

(The spaces below are to be used if the boundaries of the proposed project cross section lines.)

_____ Section: _____, Township: _____, Range: _____, Meridian: _____

_____ Section: _____, Township: _____, Range: _____, Meridian: _____

Proposed project will require the use of up to _____ acres. (Add additional sheets as necessary)

Project Description - Describe in detail your intended use of state land. (State land also includes all tide and submerged lands beneath coastal waters and all shorelands beneath other navigable water bodies of the state.) Discuss development and activities. (Attach additional pages as necessary.)

Should a portion of the permitted area be closed to the general public? **Yes** [] **No** [X]. **If yes**, explain which portion and provide justification for exclusive use:

Site Description - Briefly describe the current condition of the proposed site of use, noting any trash, garbage, debris or signs of possible site contamination (If significant, we recommend you provide pictures to establish initial conditions):

Are there improvements or materials on the site now? **Yes** ☐ **No** ☒ **If yes**, briefly describe the improvements, their approximate value, and who owns them (We recommend you provide pictures of improvements):

Site Description continued - Describe the natural vegetation --- ground cover, trees, shrubs --- and any proposed changes. Describe the location of any estuarine, riparian, or wetlands and any noticeable animal use of area.

Site Access - Describe how you plan to access the site, and your mode of transportation.

If your access is by aircraft, specify the type and size of aircraft: _____

To access the site, the aircraft is equipped with **floats** ☐ **wheels** ☐ **skis** ☐.

Number of people

1. Indicate the number of employees and supervisors who will be working on the site. _____

2. Indicate the number of customers who will be using the site per year or season. _____

3. Indicate the number of days the site will be used per year or season. _____
Approximately once per month when tundra is open
and bears may be present.

Environmental Risk / Hazardous Substances - In the course of your proposed activity will you generate, use, store, transport, dispose of, or otherwise come in contact with toxic and/or hazardous materials, and/or hydrocarbons? **Yes**☒ **No**☐ . **If yes**, please describe:

The types and volumes of fuel or other hazardous substances present or proposed: _____

The specific storage location(s): _____

The spill plan and prevention methods: _____

Environmental Risk/Hazardous Substances (continued) - If you plan to use either above or below ground storage containers (like tanks, drums, or other containers) for hazardous material storage, answer the following questions for each container:

Where will the container be located? _____

What will be stored in the container? _____

What will be the container's size in gallons? _____

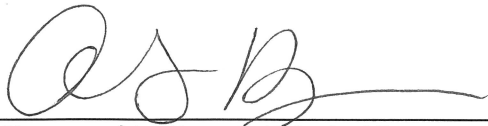
Give a description of any secondary containment structure, including volume in gallons, the type of lining material, and configuration:

Will the container be tested for leaks? **Yes**☐ **No**☐

Will the container be equipped with leak detection devices? **Yes**☐ **No**☐ . **If no**, describe: _____

Do you have any reason to suspect, or do you know if the site may have been previously contaminated? **Yes**☐ **No**☒ **If yes**, please explain:

Date Stamp:



Senior Project Manager

Signature of Applicant or Authorized Representative

Title

AS 38.05.035(a) authorizes the director to decide what information is needed to process an application for the sale or use of state land and resources. This information is made a part of the state public land records and becomes public information under AS 40.25.110 and 40.25.120 (unless the information qualifies for confidentiality under AS 38.05.035(a)(8) and confidentiality is requested, AS 43.05.230, or AS 45.48). Public information is open to inspection by you or any member of the public. A person who is the subject of the information may challenge its accuracy or completeness under AS 44.99.310, by giving a written description of the challenged information, the changes needed to correct it, and a name and address where the person can be reached. False statements made in an application for a benefit are punishable under AS 11.56.210. In submitting this form, the applicant agrees with the Department to use "electronic" means to conduct "transactions" (as those terms are used in the Uniform Electronic Transactions Act, AS 09.80.010 – AS 09.80.195) that relate to this form and that the Department need not retain the original paper form of this record: the department may retain this record as an electronic record and destroy the original.

STATE OF ALASKA DEPARTMENT OF NATURAL RESOURCES
DIVISION OF MINING, LAND AND WATER

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> Contract Administration
550 W 7th Ave., Suite 640
Anchorage, AK 99501-3576
(907) 269-8594 | <input type="checkbox"/> Northern Region
3700 Airport Way
Fairbanks, AK 99709
(907) 451-2740 | <input type="checkbox"/> Southcentral Region
550 W 7th Ave., Suite 900C
Anchorage, AK 99501-3577
(907) 269-8552 | <input type="checkbox"/> Southeast Region
400 Willoughby,
Suite #400
P.O. Box 111020
Juneau, AK 99801
(907) 465-3400 |
|--|--|---|--|

APPLICANT ENVIRONMENTAL RISK QUESTIONNAIRE

The purpose of this questionnaire is to help clarify the types of activities you propose to undertake. The questions are meant to help identify the level of environmental risk that may be associated with the proposed activity. The Division of Mining, Land and Water's evaluation of environmental risk for the proposed activity does not imply that the parcel or the proposed activity is an environmental risk from the presence or use of hazardous substances.

Through this analysis, you may become aware of environmental risks that you did not know about. If so, you may want to consult with an environmental engineer or an attorney.

Applicant's Name	Doing Business As
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Address	City	State	Zip
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()	()		
Message Phone	Work Phone	E-Mail	Contact Person

Describe the proposed activity:

In the course of your proposed activity will you generate, use, store, transport, dispose of, or otherwise come in contact with toxic and/or hazardous materials, and/or hydrocarbons? Yes ☐ No ☐

If yes, please list the substances and the associated quantities. Use a separate sheet of paper, if necessary.

If the proposed activities involve any storage tanks, either above or below ground, address the following questions for each tank. Please use a separate sheet of paper, if necessary, and, where appropriate, include maps or plats:

a. Where will the tank be located? _____

b. What will be stored in the tank? _____

c. What will be the tank's size in gallons? _____

d. What will the tank be used for? (Commercial or residential purposes?) _____

e. Will the tank be tested for leaks? _____

f. Will the tank be equipped with leak detection devices? Yes ☐ No ☐. If yes, describe: _____

Do you know or have any reason to suspect that the site may have been previously contaminated? Yes ☐ No ☐.

If yes, please explain: _____

I certify that due diligence has been exercised and proper inquiries made in completing this questionnaire, and that the foregoing is true and correct to the best of my knowledge.

Applicant

Date

AS 38.05.035(a) authorizes the director to decide what information is needed to process an application for the sale or use of state land and resources. This information is made a part of the state public land records and becomes public information under AS 40.25.110 and 40.25.120 (unless the information qualifies for confidentiality under AS 38.05.035(a)(9) and confidentiality is requested). Public information is open to inspection by you or any member of the public. A person who is the subject of the information may challenge its accuracy or completeness under AS 44.99.310, by giving a written description of the challenged information, the changes needed to correct it, and a name and address where the person can be reached. False statements made in an application for a benefit are punishable under AS 11.56.210.

Land Use Permit Application Supplemental Questionnaire for: Off Road Travel

Answer the following questions if your proposed activity includes off-road travel.

Terrain Factor. Circle the following terrain type(s) that best describes your route of travel:

- Wetlands
- Open, non-tundra or wetland areas.
- Rivers or other water bodies.
- Wooded areas with trees of 6" or greater diameter (at breast height).
- Tundra areas.

Vehicles and Weight. List the number and kinds of vehicles to be used for motorized travel, the weight of each vehicle and the weight of each trailer or sled (including loaded weight) to be carried by that vehicle:

Mileage.

- State the average total miles traveled in one round trip: _____
- State the number of trips proposed: _____ month while tundra travel is open and nears are present.

Season Factor. Proposed date(s) of travel will be: **From:** _____ **To:** _____

Stream and Water Body Crossings. - Note who you contacted in the ADF&G, Division of Habitat:

Date: _____ Person: _____

Fuel and Hazardous Substance Factor. The volume of fuel and hazardous substances to be used is the total volume (in gallons) to be carried on one vehicle and any trailers or sleds that vehicle is towing.

- Maximum volume of fuel (in gallons) that is being transported by one vehicle and any trailers or sleds it is towing: _____ gallons.
- Hazardous substances other than fuel:
Substance _____
Substance _____
- Do you have an Oil Discharge Prevention and Contingency Plan approved by the Alaska Department of Environmental Conservation? **Yes**[] **No**[X]
- Do you have either a trained spill response team or a contract with a spill response company? **Yes**[] **No**[X]