



ILLINOIS DEPARTMENT OF NATURAL RESOURCES

Office of Oil and Gas Resource Management

One Natural Resources Way
Springfield, Illinois 62702-1271
217-782-7756



Citizen Complaint Form*

Please fill out completely!

Name(s):

Are you the landowner? Yes No

Telephone: Home () Cell: ()
Area Code Area Code

Address:
Street Name and Number / P.O. Box

City State Zip Code County

LOCATION

Where is the well, lease, or problem located?
(address or intersection)

County Location w/in Sect. Sect. Twp. Range

OPERATOR (Operator and location information available on tank battery or access road.)

Who is the operator of the lease, or well?
Company Name

Name of Co. Rep.: Phone No.

When did you last speak to the Company Rep. about this problem and what happened?

NATURE OF COMPLAINT (check off type of complaint, then describe in detail below)*

- Oil/Saltwater Leak Firewalls/Dikes Abandoned Well
Well Site Condition Pits Tank Battery
Flow Line Leak Other (provide details below)

Describe complaint/problem in detail:

Use more paper if necessary.

*This form is not for emergency spill situations. Please contact IEPA to report a flowing oil/salt water spill.

When did the problem start? _____

Is the problem continuing? _____ If yes, describe: _____

Do you have photographs of the problem, or any other type of evidence? _____

WITNESSES: Please list any other witnesses who have observed the same problems:

Name(s)

Phone number(s)

Address

Name(s)

Phone number(s)

Address

Use additional paper if necessary for more witnesses.

OTHER AGENCIES?

Have you notified any other office, agency, or law enforcement agency about this problem? (If so, which agency, phone number, and if you recall, date notified and who did you speak to?)

ADDITIONAL NOTES/INFORMATION/DETAILS: Is there anything else you think a well inspector should know about the Complaint, problem, or situation that has not already been covered by this form? Please add it here: