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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/31/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Seubert & Associates, Inc. 225 North Shore Drive Suite 300 Pittsburgh	<div style="font-size: 2em; font-weight: bold;">RECEIVED</div> <div style="font-size: 1.5em; font-weight: bold;">OCT 27 2023</div> <div style="font-size: 2em; font-weight: bold;">ECMC</div>	CONTACT NAME: Jackie Dobrowsky PHONE (A/C, No, Ext): (412) 734-4900 E-MAIL ADDRESS: certs@seubert.com	FAX (A/C, No): (412) 734-5725
		INSURER(S) AFFORDING COVERAGE	
INSURED MDS Energy Development, LLC 409 Butler Road, Suite A Kittanning PA 16201-4403	INSURER A: Travelers Indemnity Co.		25658
	INSURER B: Travelers Indemnity of Connecticut		25682
	INSURER C: Travelers Property Casualty Company of America		25674
	INSURER D: RSUI Indemnity Co.		22314
	INSURER E: Brickstreet Mutual Insurance Co		12372
	INSURER F: Federal Insurance Company		20281

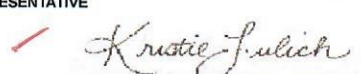
COVERAGES **CERTIFICATE NUMBER:** 2023/2024 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDD INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> X, C & U <input checked="" type="checkbox"/> Pollution Included GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			H6601T225863TIA23	06/01/2023	06/01/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			BA9R28345923N4G	06/01/2023	06/01/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			CUP3T10459923N4	06/01/2023	06/01/2024	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
E	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WCB1038496	10/27/2023	10/27/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Middle Excess Liability			NHA102759	06/01/2023	06/01/2024	Limit: \$10,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Insurer F: High Excess Liability: 30035653; 6/1/2023 - 6/1/2024; \$15,000,000 Limit
 Insurer G: (Ironshore Specialty Insurance Company; NAIC# 25445)-Pollution Site Liability; Policy# ISPILLSB948K003; 6/1/2023 - 6/1/2024; \$1,000,000 Occurrence / \$2,000,000 Aggregate; Ded: \$150,000
 Insurer G: Excess Pollution Site Liability IEELPLLB948N003; 6/1/2023 - 6/1/2024; \$9,000,000 Occurrence / \$9,000,000 Aggregate
 Insurer H: (Berkley National Insurance Company; NAIC# 38911)- Inland Marine - MIM1039990-52 - 06/01/2023 - 06/01/2024 - Leased/Rented/Borrowed Contractors Equipment; Limit: \$500,000; Ded: \$5,000
 Insurer I: (Argonaut Insurance Company; NAIC# 19801) Workers Compensation - Policy#WC929038803444 - 10/27/2023 to 10/27/2024 - Applies to States:

CERTIFICATE HOLDER Colorado Energy & Carbon Management Commission 1120 Lincoln Street, Suite 801 Denver, CO 80203	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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ADDITIONAL REMARKS SCHEDULE

AGENCY Seubert & Associates, Inc.		NAMED INSURED MDS Energy Development, LLC	
POLICY NUMBER			
CARRIER	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance: Notes

Additional Named Insureds:
 Appalachian Drillers, LLC
 First Class Energy, LLC - Does Not Apply to Inland Marine
 M/D Gas, Inc., A General Partner - Does Not Apply to Inland Marine
 MDS 2012-Marcellus Shale Development LP - Does Not Apply to Inland Marine
 MDS 2014-Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2015-Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2016-Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2017-Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2018-Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2019-Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2020-Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2021-Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2022-Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS-2023 Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2024-Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2025-Marcellus Shale Development, LP - Does Not Apply to Inland Marine
 MDS Associated Companies, Inc.
 MDS Energy Development, LLC - Does Not Apply to Inland Marine
 MDS Energy Fund I, LP - Does Not Apply to Inland Marine
 MDS Energy Partners Gp, LLC - Does Not Apply to Inland Marine
 MDS Energy Partners, LP - Does Not Apply to Inland Marine
 MDS Energy Partners Operating LLC - Does Not Apply to Inland Marine
 MDS Energy Public 2013-A - Does Not Apply to Inland Marine
 MDS Energy, Ltd. - I
 MDS Gathering, LLC - Does Not Apply to Inland Marine
 MDS Land Holdings, LLC
 MDS Securities, LLC - Does Not Apply to Inland Marine
 MDS Well Holdings, LLC
 MDS Wells 2006, LP - Does Not Apply to Inland Marine
 MDS Wells 2007, LP - Does Not Apply to Inland Marine
 MDS Wells 2008, LP - Does Not Apply to Inland Marine
 MDS Wells 2009, LP - Does Not Apply to Inland Marine
 MDS Wells 2010, LP - Does Not Apply to Inland Marine
 MDS Wells 2011, LP - Does Not Apply to Inland Marine
 MDS 2022-Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2023-Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2024-Shale Development, LP - Does Not Apply to Inland Marine
 MDS 2025-Shale Development, LP - Does Not Apply to Inland Marine



AGENCY CUSTOMER ID: _____

LOC #: _____

ADDITIONAL REMARKS SCHEDULE

Page ____ of ____

AGENCY Seubert & Associates, Inc.		NAMED INSURED MDS Energy Development, LLC	
POLICY NUMBER			
CARRIER	NAIC CODE	EFFECTIVE DATE:	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance: Remarks

Insurer I: (Argonaut Insurance Company; NAIC# 19801) Workers Compensation - Policy#WC929038803444 - 10/27/2023 to 10/27/2024 - Applies to States: CA, FL, NY, TX, CO - Employers Liability Limits; Each Accident \$1,000,000; Disease-Each Employee \$1,000,000; Disease Policy Limit \$1,000,000