

DISCHARGE MONITORING REPORT GENERATOR - WELLINGTON OPERATING COMPANY - prepared by STEWART ENVIRONMENTAL CONSULTANTS, INC.

Facility Information:

Name:

Wellington Operating Co.

Mailing Address:

6065 S. Quebec Street, Suite 201

City, State, Zip:

Englewood, CO 80111

Location Address:

1590 East Larimer County Road 70

City, State, Zip:

Wellington, CO 80549

Telephone:

303-220-5399

Contact Name:

Bradley A. Pomeroy

Permit Number

COGCC 281818 & 281824

DATE:	Year	Month	Day
Monitoring Period Start:	2008	1	1
Monitoring Period Stop:	2008	1	31
Date Form Completed:	2008	2	26

	Sample Location Result																			
	001 A										050 A		050 B		050 C		050 D		050 E	
Parameter:	# 1	# 2	# 3	# 4	# 5	Average	Minimum	Maximum	# Samples	Type	# 1	Type	# 1	Type	# 1	Type	# 1	Type	# 1	Type
Flow - MGD	0.0082	0.0785	0.0069	0.0655		0.0398		0.0785	4	recorder										
pH min	7.75	7.74	7.92	7.51		7.51														
pH max	7.75	7.96	7.92	7.79				7.96	4	grab										
Oil & Grease - Visible Sheen Yes = 1 No = 0								0	0	visual										
Oil & Grease								N.S.	0	grab										
Total Dissolved Solids				2358				2358	1	composite	1098	grab	1314	grab	1290	grab	1338	grab	808	grab
Chloride as Cl				447.7				447.7	1	composite	8.8	grab	295.2	grab	21.6	grab	9.6	grab	23.5	grab
Fluoride, Total as F				4.8				4.8	1	composite	0.9	grab	0.9	grab	0.8	grab	0.9	grab	0.9	grab
Sodium, as Na				706				706	1	composite	38.8	grab	149	grab	39.4	grab	28.6	grab	39.4	grab
Sulfate as S				11.3				11.3	1	composite	657	grab	231	grab	743.3	grab	738.2	grab	438.2	grab
Barium, Total as Ba				7.72				7.72	1	composite	0.009	grab	0.029	grab	0.011	grab	0.01	grab	0.022	grab
Boron, Total as B				2.31				2.31	1	composite	0.16	grab	0.72	grab	0.16	grab	0.14	grab	0.15	grab
Thallium, Total as Tl				< 0.01				0	1	composite	< 0.01	grab	<0.01	grab	< 0.01	grab	<0.01	grab	< 0.01	grab
Benzene				<0.001				<0.001	1	grab			N.S.	grab 1/365						
Toluene				<0.002				<0.002	1	grab			N.S.	grab 1/365						
Ethyl Benzene				<0.002				<0.002	1	grab			N.S.	grab 1/365						
Xylene, Total				<0.004				<0.004	1	grab			N.S.	grab 1/365						
Naphthalene				<0.002				<0.002	1	grab										

Complete Only If NO Discharge:

NO DISCHARGE:

050 B: Enter "N.S" instead of concentration values  
when Not Sampled (annual BTEX)  
Also manually enter "0" in "# EX" column if N.S.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111

FACILITY

LOCATION 1590 East Larimer County Road 70  
Wellington, CO 80549

ATTN: Bradley A. Pomeroy

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

**DISCHARGE MONITORING REPORT (DMR)**

(2-16)

(17-19)

COGCC 281818 & 281824  
PERMIT NUMBER

001 A  
DISCHARGE NUMBER

E & P WASTES  
(SUBR DP)  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires

LARIMER

**MONITORING PERIOD**

FROM

YEAR MO DAY  
2008 1 1

(20-21)

(22-23)

(24-25)

TO

YEAR MO DAY  
2008 1 31

(26-27)

(28-29)

(30-31)

DISCHARGE TO PIPELINE

\*\*\* NO DISCHARGE ☐ \*\*\*

**NOTE: Read instructions before completing this form.**

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0398	0.0785	(03)	*****	*****	*****	*****	0	30/30	recorder
50050 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.144 30 DA AVG	REPORT DAILY MAX	MGD	*****	*****	*****	*****		CONTIN	RECORDER
OIL AND GREASE VISUAL	SAMPLE MEASUREMENT	*****	0	(94)	*****	*****	*****	*****	0	1/7	visual
84066 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		INST MAX	YES = 1	*****	*****	*****	*****		WEEKLY	VISUAL
			YES = 1 NO = 0	NO = 0							
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	N.S.	(19)	0	contingent	grab
03582 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	10	MG/L		CONTIN GENT	GRAB
pH	SAMPLE MEASUREMENT	*****	*****	*****	7.51	*****	7.96	(12)	0	1/7	grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.5	*****	8.5	SU		WEEKLY	GRAB
					MINIMUM		MAXIMUM				
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2358	(19)	0	1/30	composite
70295 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT	MG/L		ONCE/ MONTH	COMPOSITE
							DAILY MAX				
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	447.7	(19)	0	1/30	composite
00940 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT	MG/L		ONCE/ MONTH	COMPOSITE
							DAILY MAX				
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	4.8	(19)	0	1/30	composite
00951 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT	MG/L		ONCE/ MONTH	COMPOSITE
							DAILY MAX				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

RANDY R. EVANS

Operator in Responsible Charge

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER  
OR AUTHORIZED AGENT

TELEPHONE

303-220-5399

DATE

2008

2

26

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS  
NAME  
Wellington Operating Co.

ADDRESS  
6065 S. Quebec Street, Suite 201  
Englewood, CO 80111

FACILITY  
LOCATION  
1590 East Larimer County Road 70  
Wellington, CO 80549

ATTN: Bradley A. Pomeroy

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16)  
COGCC 281818 & 281824  
PERMIT NUMBER

(17-19)  
001 A  
DISCHARGE NUMBER

MONITORING PERIOD  
FROM  
YEAR  
2008  
MO  
1  
DAY  
1  
TO  
YEAR  
2008  
MO  
1  
DAY  
31

E & P WASTES  
(SUBR DP)  
F - FINAL

DISCHARGE TO PIPELINE  
\*\*\* NO DISCHARGE \*\*\*  
NOTE: Read instructions before completing this form.

LARIMER

FORM APPROVED  
OMB No. 2040-0004  
Approval expires

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	706	(19)	0	1/30	composite		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX	MG/L		ONCE/MONTH	COMPOSITE		
SULFATE as S	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	11.3	(19)	0	1/30	composite		
00154 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX	MG/L		ONCE/MONTH	COMPOSITE		
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	7.72	(19)	0	1/30	composite		
01007 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX	MG/L		ONCE/MONTH	COMPOSITE		
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.31	(19)	0	1/30	composite		
01022 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX	MG/L		ONCE/MONTH	COMPOSITE		
THALLIUM as Th	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.01	(19)	0	1/30	composite		
01059 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX	MG/L		ONCE/MONTH	COMPOSITE		
BENZENE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.001	(19)	0	1/30	grab		
34030 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	0.005 DAILY MAX	MG/L		ONCE/MONTH	GRAB		
TOLUENE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.002	(19)	0	1/30	grab		
34010 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	1 DAILY MAX	MG/L		ONCE/MONTH	GRAB		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.				TELEPHONE		DATE					
RANDY R. EVANS						303-220-5399		2008		2		26	
Operator in Responsible Charge													
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY			
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) Please see cover letter for discussion.													

PERMITTEE NAME/ADDRESS  
NAME  
Wellington Operating Co.

ADDRESS  
6065 S. Quebec Street, Suite 201  
Englewood, CO 80111

FACILITY  
1590 East Larimer County Road 70

LOCATION  
Wellington, CO 80549  
Bradley A. Pomeroy

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16)  
COGCC 281818 & 281824  
PERMIT NUMBER

(17-19)  
001 A  
DISCHARGE NUMBER

MONITORING PERIOD  
FROM  
YEAR  
2008  
MO  
1  
DAY  
1  
TO  
YEAR  
2008  
MO  
1  
DAY  
31

E & P WASTES  
(SUBR DP)  
F - FINAL

DISCHARGE TO PIPELINE  
\*\*\* NO DISCHARGE \*\*\*  
NOTE: Read instructions before completing this form.

LARIMER

FORM APPROVED  
OMB No. 2040-0004  
Approval expires

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ETHYLBENZENE	SAMPLE MEASUREMENT 37371 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	<0.002	(19)	0	1/30	grab
		PERMIT REQUIREMENT	*****		*****	*****	*****	0.7 DAILY MAX	MG/L		ONCE/MONTH
XYLENES,TOTAL	SAMPLE MEASUREMENT 81551 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	<0.004	(19)	0	1/30	grab
		PERMIT REQUIREMENT	*****		*****	*****	*****	1.4 DAILY MAX	MG/L		ONCE/MONTH
NAPHTHALENE	SAMPLE MEASUREMENT 34696 1 0 0 EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	<0.002	(19)	0	1/30	grab
		PERMIT REQUIREMENT	*****		*****	*****	*****	0.14 DAILY MAX	MG/L		ONCE/MONTH
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
		PERMIT REQUIREMENT	*****		*****	*****	*****		*****		
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
		PERMIT REQUIREMENT	*****		*****	*****	*****		*****		
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
		PERMIT REQUIREMENT	*****		*****	*****	*****		*****		
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
		PERMIT REQUIREMENT	*****		*****	*****	*****		*****		
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
		PERMIT REQUIREMENT	*****		*****	*****	*****		*****		

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
RANDY R. EVANS  
Operator in Responsible Charge  
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE  
303-220-5399

DATE  
2008 2 26

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

EPA Form 3320-1 (Rev 3/99) Previous editions may be used.

PAGE 3 OF 3

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

Form Approved.

OMB No. 2040-0004

Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111

(2-16)  
COGCC 281818 & 281824  
PERMIT NUMBER

(17-19)  
050 A  
DISCHARGE NUMBER

E & P WASTES  
(SUBR DP)  
F - FINAL

LARIMER

FACILITY

1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

Bradley A. Pomeroy

MONITORING PERIOD

FROM

YEAR	MO	DAY
2008	1	1

TO

YEAR	MO	DAY
2008	1	31

UPGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER  (32-37)	<div></div>	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	1098	1098	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	38.8	38.8	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	8.8	8.8	(19)	0	1/30	grab
940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SULFATE as S	SAMPLE MEASUREMENT		*****	(03)  MGD	*****	657	657	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	INSTAN
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.9	0.9	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.009	0.009	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.16	0.16	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER RANDY R. EVANS Operator in Responsible Charge TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE 303-220-5399		DATE 2008 2 26		
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

## DISCHARGE MONITORING REPORT (DMR)

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OMB No. 2040-0004

Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
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PERMIT NUMBER050 A  
DISCHARGE NUMBERE & P WASTES  
(SUBR DP)  
F - FINAL

LARIMER

FACILITY

1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

Bradley A. Pomeroy

FROM

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
2008	1	1	2008	1	31

TO

UPGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER  (32-37)	<div></div>	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
THALLIUM, TOTAL as Th	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.01	< 0.01	(19)	0	1/30	grab
01059 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMENT		*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER RANDY R. EVANS Operator in Responsible Charge TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			AREA CODE	NUMBER	YEAR	MO	DAY
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(17-19)  
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(SUBR DP)  
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DOWNGRADIENT ALLUVIAL GROUNDWATER

MONITORING PERIOD											
YEAR			MO			DAY			YEAR		
2008			1			1			2008		
(20-21)			(22-23)			(24-25)			(26-27)		

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1314	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	149	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	295.2	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SULFATE as S	SAMPLE MEASUREMENT	*****	*****	(03)	*****	*****	231	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	INSTAN
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.9	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.029	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.72	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	TELEPHONE		DATE		
		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM(NPDES)

## DISCHARGE MONITORING REPORT (DMR)

Form Approved.

OMB No. 2040-0004

Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111COGCC 281818 & 281824  
PERMIT NUMBER050 B  
DISCHARGE NUMBERE & P WASTES  
(SUBR DP)  
F - FINAL

LARIMER

FACILITY

1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

Bradley A. Pomeroy

## MONITORING PERIOD

YEAR			MO			DAY		
2008	1	1	2008	1	31	2008	1	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)			

DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-61)	MAXIMUM (54-61)	UNITS (54-61)	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS (54-61)			
THALLIUM, TOTAL as Th	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.01	(19)	0	1/30	grab
01059 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BENZENE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	N.S.	(19)	0	1/365	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.005 DAILY MAX	MG/L		ONCE/ YEAR	GRAB
TOLUENE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	N.S.	(19)	0	1/365	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 DAILY MAX	MG/L		ONCE/ YEAR	GRAB
ETHYLBENZENE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	N.S.	(19)	0	1/365	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.7 DAILY MAX	MG/L		ONCE/ YEAR	GRAB
XYLENES, TOTAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	N.S.	(19)	0	1/365	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.4 DAILY MAX	MG/L		ONCE/ YEAR	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.				TELEPHONE		DATE		
RANDY R. EVANS Operator in Responsible Charge		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				303-220-5399		2008	2	26
TYPED OR PRINTED						AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) NOTE: "N.S." SIGNIFIES THAT THE OUTFALL WAS "Not Sampled" FOR THE CURRENT REPORTING PERIOD



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM(NPDES)

## DISCHARGE MONITORING REPORT (DMR)

Form Approved.

OMB No. 2040-0004

Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111COGCC 281818 & 281824  
PERMIT NUMBER050 C  
DISCHARGE NUMBERE & P WASTES  
(SUBR DP)  
F - FINAL

LARIMER

FACILITY

1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

Bradley A. Pomeroy

## MONITORING PERIOD

FROM

YEAR MO DAY  
2008 1 1

TO

YEAR MO DAY  
2008 1 31

1/4-MILE DOWNGRAIDENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	1290	1290	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	39.4	39.4	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	21.6	21.6	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	250 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SULFATE as S	SAMPLE MEASUREMENT	*****	*****	(03)	*****	743.3	743.3	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	INSTAN
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.8	0.8	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.011	0.011	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.16	0.16	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	5 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	VISUAL
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.</small>					TELEPHONE		DATE		
RANDY R. EVANS Operator in Responsible Charge							303-220-5399		2008	2	26
TYPED OR PRINTED							SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

## DISCHARGE MONITORING REPORT (DMR)

(2-16)

COGCC 281818 &amp; 281824

PERMIT NUMBER

(17-19)

050 C

DISCHARGE NUMBER

E &amp; P WASTES

(SUBR DP)

F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires

LARIMER

FACILITY

1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

Bradley A. Pomeroy

FROM

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
2008	1	1	2008	1	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

TO

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)												
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM															
THALLIUM, TOTAL as Th	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.01	< 0.01	(19)	0	1/30	grab											
01059 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	0.002	REPORT															
						30 DA AVG	DAILY MAX															
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		*****														
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****															
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****														
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****															
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****														
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****															
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****														
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****															
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****														
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****															
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****														
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****															
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****														
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****															
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.						TELEPHONE		DATE												
RANDY R. EVANS										2008	2	26										
Operator in Responsible Charge																						
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT						AREA CODE	NUMBER	YEAR	MO	DAY										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)																						

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

## DISCHARGE MONITORING REPORT (DMR)

Form Approved.

OMB No. 2040-0004

Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111(2-16)  
COGCC 281818 & 281824  
PERMIT NUMBER(17-19)  
050 D  
DISCHARGE NUMBERE & P WASTES  
(SUBR DP)  
F - FINAL

LARIMER

FACILITY 1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

Bradley A. Pomeroy

FROM

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
2008	1	1		2008	1	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)						
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS									
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	1338	1338	(19)	0	1/30	grab						
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB						
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	28.6	28.6	(19)	0	1/30	grab						
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB						
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	9.6	9.6	(19)	0	1/30	grab						
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	250 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB						
SULFATE as S	SAMPLE MEASUREMENT		*****	*****	*****	738.2	738.2	(19)	0	1/30	grab						
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	INSTAN						
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.9	0.9	(19)	0	1/30	grab						
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	2 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB						
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.008	0.008	(19)	0	1/30	grab						
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	2 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB						
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.14	0.14	(19)	0	1/30	grab						
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	5 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	VISUAL						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.				TELEPHONE 303-220-5399		DATE									
RANDY R. EVANS								2008	2	26							
Operator in Responsible Charge								AREA CODE	NUMBER	YEAR MO DAY							
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)																	

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111

FACILITY 1590 East Larimer County Road 70

LOCATION Wellington, CO 80549  
Bradley A. Pomeroy

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

## DISCHARGE MONITORING REPORT (DMR)

(2-16)  
COGCC 281818 & 281824  
PERMIT NUMBER(17-19)  
050 D  
DISCHARGE NUMBERE & P WASTES  
(SUBR DP)  
F - FINALForm Approved.  
OMB No. 2040-0004  
Approval expires

LARIMER

## MONITORING PERIOD

FROM  
YEAR MO DAY  
2008 1 1  
(20-21) (22-23) (24-25)  
TO  
YEAR MO DAY  
2008 1 31  
(26-27) (28-29) (30-31)

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53)			QUANTITY OR CONCENTRATION (4 Card Only) (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
THALLIUM, TOTAL as Th	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.01	<0.01	(19)	0	1/30	grab	
01059 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	0.002 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB	
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****				
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****				
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.				TELEPHONE		DATE				
RANDY R. EVANS						303-220-5399		2008 2 26				
Operator in Responsible Charge												
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)												

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111

FACILITY

1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

Bradley A. Pomeroy

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM(NPDES)

## DISCHARGE MONITORING REPORT (DMR)

(2-16)

COGCC 281818 & 281824  
PERMIT NUMBER

(17-19)

050 E  
DISCHARGE NUMBERE & P WASTES  
(SUBR DP)  
F - FINALForm Approved.  
OMB No. 2040-0004  
Approval expires

LARIMER

## MONITORING PERIOD

YEAR	MO	DAY	TO	YEAR	MO	DAY
2008	1	1		2008	1	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	808	808	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT DAILY MAX	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	39.4	39.4	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT DAILY MAX	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	23.5	23.5	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	250 DAILY MAX	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SULFATE as S	SAMPLE MEASUREMENT		*****	(03)	*****	438.2	438.2	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	REPORT DAILY MAX	REPORT DAILY MAX	MG/L		ONCE/ MONTH	INSTAN
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.9	0.9	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	2 DAILY MAX	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.022	0.022	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	2 DAILY MAX	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.15	0.15	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	5 DAILY MAX	REPORT DAILY MAX	MG/L		ONCE/ MONTH	VISUAL

## NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

RANDY R. EVANS

Operator in Responsible Charge

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER  
OR AUTHORIZED AGENT

## TELEPHONE

303-220-5399

AREA  
CODE

NUMBER

## DATE

2008 2 26

YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

## DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

E &amp; P WASTES

Form Approved.

OMB No. 2040-0004

Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111COGCC 281818 & 281824  
PERMIT NUMBER050 E  
DISCHARGE NUMBER

(SUBR DP)

F - FINAL

LARIMER

FACILITY 1590 East Larimer County Road 70  
LOCATION Wellington, CO 80549

Bradley A. Pomeroy

FROM

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
2008	1	1	2008	1	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

TO

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
THALLIUM, TOTAL as Th	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.01	< 0.01	(19)	0	1/30	grab
01059 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	0.002	REPORT	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.		TELEPHONE		DATE				
RANDY R. EVANS				303-220-5399		2008	2	26		
Operator in Responsible Charge				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR MO DAY		
TYPED OR PRINTED										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)										