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FORM

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Rev 6/99

# State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303)894-2100 Fax:(303)894-2109

**RECEIVED**

FOR OGCC USE ONLY

MAR 03 2015

**COGCC**Complete the  
Attachment Checklist**SOURCE OF PRODUCED WATER FOR DISPOSAL**

This form must be completed for any new disposal site and for any change in sources of produced water for an existing disposal site.

OGCC Operator Number: <u>10500</u>	Contact Name and Telephone:
Name of Operator: <u>Coachman Energy Operating Company LLC</u>	<u>Neyeska G. Mut</u>
Address: <u>1401 17th Street, Suite 850</u>	No: <u>303-296-3535</u>
City: <u>Denver</u> State: <u>CO</u> Zip: <u>80203</u>	Fax: <u>303-296-3888</u>

OGCC Disposal Facility Number: _____
Operator's Disposal Facility Name: _____ Operator's Disposal Facility Number: _____
Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>SWSR, Section 21, T6S, R91W, 6th PM</u>
Address: _____
City: _____ State: _____ Zip: _____ County: <u>Garfield</u>

Chemical Analysis of fluid	Oper	OGCC

If more space is required,  
attach additional sheet.Add Source: OGCC Lease No: \_\_\_\_\_ API No: 05-045-21182 Well Name & No: Federal 6/7-13-21☒ Operator Name: Coachman Energy Operating Company LLC Operator No: 10500Delete Source: Location: QtrQtr: SWSR Section: 21 Township: 6S Range: 91W Producing Formation: WMFK☐ Analysis Attached? ☐ Yes ☒ No Transported to disposal site via: ☒ Pipeline ☐ Truck TDS: >10,000Add Source: OGCC Lease No: \_\_\_\_\_ API No: 05-045-21180 Well Name & No: Federal 6/7-14-21☒ Operator Name: Coachman Energy Operating Company LLC Operator No: 10500Delete Source: Location: QtrQtr: SWSR Section: 21 Township: 6S Range: 91W Producing Formation: WMFK☐ Analysis Attached? ☐ Yes ☒ No Transported to disposal site via: ☒ Pipeline ☐ Truck TDS: >10,000Add Source: OGCC Lease No: \_\_\_\_\_ API No: 05-045-21181 Well Name & No: Federal 6/7-15-21☒ Operator Name: Coachman Energy Operating Company LLC Operator No: 10500Delete Source: Location: QtrQtr: SWSR Section: 21 Township: 6S Range: 91W Producing Formation: WMFK☐ Analysis Attached? ☐ Yes ☒ No Transported to disposal site via: ☒ Pipeline ☐ Truck TDS: >10,000Add Source: OGCC Lease No: \_\_\_\_\_ API No: 05-045-21183 Well Name & No: Federal 6/7-16-21☒ Operator Name: Coachman Energy Operating Company LLC Operator No: 10500Delete Source: Location: QtrQtr: SWSR Section: 21 Township: 6S Range: 91W Producing Formation: WMFK☐ Analysis Attached? ☐ Yes ☒ No Transported to disposal site via: ☒ Pipeline ☐ Truck TDS: >10,000

Add Source: OGCC Lease No: \_\_\_\_\_ API No: \_\_\_\_\_ Well Name &amp; No: \_\_\_\_\_

☐ Operator Name: \_\_\_\_\_ Operator No: \_\_\_\_\_

Delete Source: Location: QtrQtr: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Producing Formation: \_\_\_\_\_

☐ Analysis Attached? ☐ Yes ☐ No Transported to disposal site via: ☐ Pipeline ☐ Truck TDS: \_\_\_\_\_

Add Source: OGCC Lease No: \_\_\_\_\_ API No: \_\_\_\_\_ Well Name &amp; No: \_\_\_\_\_

☐ Operator Name: \_\_\_\_\_ Operator No: \_\_\_\_\_

Delete Source: Location: QtrQtr: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_ Producing Formation: \_\_\_\_\_

☐ Analysis Attached? ☐ Yes ☐ No Transported to disposal site via: ☐ Pipeline ☐ Truck TDS: \_\_\_\_\_

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Rick Obernolte Signed: Rick ObernolteTitle: Agent Date: March 3, 2015

OGCC Approved: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: