

State of Colorado Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

Document Number:

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Date Received:

SOURCE OF PRODUCED WATER FOR DISPOSAL

Per Rule 325.c(5), this form shall be submitted for any new disposal facility and for any change in source of produced water for an existing disposal facility.

OPERATOR INFORMATION

OGCC Operator Number: <u>96155</u>	Contact Name and Telephone:
Name of Operator: <u>WHITING OIL & GAS CORPORATION</u>	Name: <u>CARA MEZYDLO</u>
Address: <u>1700 BROADWAY STE 2300</u>	Phone: <u>(303) 876-7091</u> Fax: <u>(720) 644-3658</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80290</u>	Email: <u>cara.mezydlo@whiting.com</u>

DISPOSAL FACILITY INFORMATION

UIC Facility ID: <u>159220</u>	Operator's Disposal Facility Name: <u>B-19N SWD 1</u>	Operator's Disposal Facility Number: _____
Location: QtrQtr: <u>SESW</u> Sec: <u>19</u> Twp: <u>2S</u> Range: <u>97W</u> Meridian: <u>6</u>		
County: <u>RIO BLANCO</u>		

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 9 Deleted: 0 Added: 9

SOURCE OF PRODUCED WATER

Add Source	API Number: <u>05-103-11178-00</u>	Well Name & No: <u>FEDERAL 397-3K-K3</u>
<input checked="" type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u>	Operator No: <u>96155</u>
Delete Source	Location: QtrQtr: <u>NESW</u> Section: <u>3</u> Township: <u>3S</u> Range: <u>97W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>COZZ</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input type="checkbox"/> Pipeline <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source	API Number: <u>05-103-11178-00</u>	Well Name & No: <u>FEDERAL 397-3K-K3</u>
<input checked="" type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u>	Operator No: <u>96155</u>
Delete Source	Location: QtrQtr: <u>NESW</u> Section: <u>3</u> Township: <u>3S</u> Range: <u>97W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>CRCRN</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input type="checkbox"/> Pipeline <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source	API Number: <u>05-103-11178-00</u>	Well Name & No: <u>FEDERAL 397-3K-K3</u>
<input checked="" type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u>	Operator No: <u>96155</u>
Delete Source	Location: QtrQtr: <u>NESW</u> Section: <u>3</u> Township: <u>3S</u> Range: <u>97W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>WFCM</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input type="checkbox"/> Pipeline <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source	API Number: <u>05-103-11179-00</u>	Well Name & No: <u>FEDERAL 397-3K-L3</u>
<input checked="" type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u>	Operator No: <u>96155</u>
Delete Source	Location: QtrQtr: <u>NESW</u> Section: <u>3</u> Township: <u>3S</u> Range: <u>97W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>COZZ</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input type="checkbox"/> Pipeline <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	

Add Source	API Number: <u>05-103-11179-00</u>	Well Name & No: <u>FEDERAL 397-3K-L3</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u>	Operator No: <u>96155</u>	
Delete Source	Location: QtrQtr: <u>NESW</u> Section: <u>3</u> Township: <u>3S</u> Range: <u>97W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	Producing Formation: <u>CRCRN</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Transported to disposal site via <input type="checkbox"/> Pipeline <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L		
<hr/>			
Add Source	API Number: <u>05-103-11179-00</u>	Well Name & No: <u>FEDERAL 397-3K-L3</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u>	Operator No: <u>96155</u>	
Delete Source	Location: QtrQtr: <u>NESW</u> Section: <u>3</u> Township: <u>3S</u> Range: <u>97W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	Producing Formation: <u>WFCM</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Transported to disposal site via <input type="checkbox"/> Pipeline <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L		
<hr/>			
Add Source	API Number: <u>05-103-11211-00</u>	Well Name & No: <u>FEDERAL 397-3G-G1</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u>	Operator No: <u>96155</u>	
Delete Source	Location: QtrQtr: <u>SWNE</u> Section: <u>3</u> Township: <u>3S</u> Range: <u>97W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	Producing Formation: <u>COZZ</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Transported to disposal site via <input type="checkbox"/> Pipeline <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L		
<hr/>			
Add Source	API Number: <u>05-103-11211-00</u>	Well Name & No: <u>FEDERAL 397-3G-G1</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u>	Operator No: <u>96155</u>	
Delete Source	Location: QtrQtr: <u>SWNE</u> Section: <u>3</u> Township: <u>3S</u> Range: <u>97W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	Producing Formation: <u>CRCRN</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Transported to disposal site via <input type="checkbox"/> Pipeline <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L		
<hr/>			
Add Source	API Number: <u>05-103-11211-00</u>	Well Name & No: <u>FEDERAL 397-3G-G1</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u>	Operator No: <u>96155</u>	
Delete Source	Location: QtrQtr: <u>SWNE</u> Section: <u>3</u> Township: <u>3S</u> Range: <u>97W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	Producing Formation: <u>WFCM</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Transported to disposal site via <input type="checkbox"/> Pipeline <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L		

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

Print Name: CARA MEZYDLO Signed: _____

Title: ENGINEERING TECH Date: _____

COGCC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY:

<u>COA Type</u>	<u>Description</u>

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)