

State of Colorado
Oil and Gas Conservation Commission

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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>96850</u>	Contact Name and Telephone:
Name of Operator: <u>TEP ROCKY MOUNTAIN LLC</u>	Name: <u>KAROLINA BLANEY</u>
Address: <u>PO BOX 370</u>	Phone: <u>(970) 6832295</u> Fax: <u>(970) 2859573</u>
City: <u>PARACHUTE</u> State: <u>CO</u> Zip: <u>81635</u>	Email: <u>none@given.com</u>

DISPOSAL FACILITY INFORMATION

UIC Facility ID: <u>159387</u>
Operator's Disposal Facility Name: <u>RWF 623-21 INJECTION WELL</u> Operator's Disposal Facility Number: <u>623</u>
Location: QtrQtr: <u>NESW</u> Sec: <u>21</u> Twp: <u>6S</u> Range: <u>94W</u> Meridian: <u>6</u>
County: <u>GARFIELD</u>

SUBMITTED ITEM SUMMARY TOTALS:Submitted: 6 Deleted: 0 Added: 6**SOURCE OF PRODUCED WATER**

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-045-20643-00</u> Well Name & No: <u>FEDERAL PA 14-12</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u> Operator No: <u>96850</u>
	Location: QtrQtr: <u>NESW</u> Section: <u>12</u> Township: <u>7S</u> Range: <u>95W</u> Meridian: <u>6</u>
	Producing Formation: <u>WFCM</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-045-21862-00</u> Well Name & No: <u>FEDERAL PA 21-27</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u> Operator No: <u>96850</u>
	Location: QtrQtr: <u>Lot 6</u> Section: <u>27</u> Township: <u>6S</u> Range: <u>95W</u> Meridian: <u>6</u>
	Producing Formation: <u>WFCM</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-045-21863-00</u> Well Name & No: <u>FEDERAL PA 311-27</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u> Operator No: <u>96850</u>
	Location: QtrQtr: <u>Lot 6</u> Section: <u>27</u> Township: <u>6S</u> Range: <u>95W</u> Meridian: <u>6</u>
	Producing Formation: <u>WFCM</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-045-21865-00</u> Well Name & No: <u>FEDERAL PA 11-27</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u> Operator No: <u>96850</u>
	Location: QtrQtr: <u>Lot 6</u> Section: <u>27</u> Township: <u>6S</u> Range: <u>95W</u> Meridian: <u>6</u>
	Producing Formation: <u>WFCM</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L

Add Source	<input checked="" type="checkbox"/>	API Number: <u>05-103-11949-00</u>	Well Name & No: <u>FEDERAL BCU 33-36-199</u>
Delete Source	<input type="checkbox"/>	Operator Name: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u>	Operator No: <u>96850</u>
		Location: QtrQtr: <u>Lot 12</u> Section: <u>36</u> Township: <u>1N</u> Range: <u>99W</u> Meridian: <u>6</u>	
		Producing Formation: <u>CRCRN</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both	TDS: _____ mg/L

Add Source	<input checked="" type="checkbox"/>	API Number: <u>05-103-11950-00</u>	Well Name & No: <u>FEDERAL BCU 532-36-199</u>
Delete Source	<input type="checkbox"/>	Operator Name: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u>	Operator No: <u>96850</u>
		Location: QtrQtr: <u>Lot 12</u> Section: <u>36</u> Township: <u>1N</u> Range: <u>99W</u> Meridian: <u>6</u>	
		Producing Formation: <u>CRCRN</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input 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: KAROLINA BLANEY Signed: Y
 Title: ENVIRONMENTAL SPECIALIST Date: 01/30/2014

COGCC Approved: *Matthew Lee* Date: 11/16/2016

CONDITIONS OF APPROVAL, IF ANY:

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

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401151033	WATER ANALYSIS

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)