

State of Colorado
Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

Document Number:
401621023

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>95520</u>	Contact Name and Telephone:
Name of Operator: <u>WESCO OPERATING INC</u>	Name: <u>Tom Kirkwood</u>
Address: <u>120 S DURBIN STREET</u>	Phone: <u>(307) 577-5328</u> Fax: <u>(307) 2651791</u>
City: <u>CASPER</u> State: <u>WY</u> Zip: <u>82602</u>	Email: <u>tomk@kirkwoodcompanies.com</u>

DISPOSAL FACILITY INFORMATION

UIC Facility ID: 159125

Operator's Disposal Facility Name: RUDNIK 43B-27 Operator's Disposal Facility Number: _____

Location: QtrQtr: NESE Sec: 27 Twp: 3S Range: 51W Meridian: 6

County: WASHINGTON

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 1 Deleted: 0 Added: 1

SOURCE OF PRODUCED WATER

Add Source	API Number: <u>05-121-08687-00</u>	Well Name & No: <u>RUDNIK 33-27</u>
<input checked="" type="checkbox"/>	Operator Name: <u>WESCO OPERATING INC</u>	Operator No: <u>95520</u>
Delete Source	Location: QtrQtr: <u>NWSE</u> Section: <u>27</u> Township: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>JSND</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: <u>1420</u> 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: Tom Kirkwood Signed: _____

Title: Engineer 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>
401621333	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)