

State of Colorado Oil and Gas Conservation Commission

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



FOR OGCC USE ONLY

Document Number:

401745453

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>10456</u> Name of Operator: <u>CAERUS PICEANCE LLC</u> Address: <u>1001 17TH STREET #1600</u> City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Contact Name and Telephone: Name: <u>Kristine Mize-Spansky</u> Phone: <u>(720) 8806368</u> Fax: <u>()</u> Email: <u>kmizespansky@caerusoilandgas.com</u>
--	--

DISPOSAL FACILITY INFORMATION

UIC Facility ID: <u>159149</u>
Operator's Disposal Facility Name: <u>BENZEL DISPOSAL #2</u> Operator's Disposal Facility Number: _____
Location: QtrQtr: <u>NWSE</u> Sec: <u>26</u> Twp: <u>6S</u> Range: <u>93W</u> Meridian: <u>6</u>
County: <u>GARFIELD</u>

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 7 Deleted: 0 Added: 7

SOURCE OF PRODUCED WATER

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-045-09497-00</u> Well Name & No: <u>BENZEL 26-10B(J26NW)</u> Operator Name: <u>CAERUS PICEANCE LLC</u> Operator No: <u>10456</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWSE</u> Section: <u>26</u> Township: <u>6S</u> Range: <u>93W</u> Meridian: <u>6</u> Producing Formation: <u>WMFK</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input checked="" type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-045-09498-00</u> Well Name & No: <u>BENZEL 26-7C (J26NW)</u> Operator Name: <u>CAERUS PICEANCE LLC</u> Operator No: <u>10456</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWSE</u> Section: <u>26</u> Township: <u>6S</u> Range: <u>93W</u> Meridian: <u>6</u> Producing Formation: <u>WMFK</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input checked="" type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-045-13370-00</u> Well Name & No: <u>GMU 26-5D (J26NW)</u> Operator Name: <u>CAERUS PICEANCE LLC</u> Operator No: <u>10456</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWSE</u> Section: <u>26</u> Township: <u>6S</u> Range: <u>93W</u> Meridian: <u>6</u> Producing Formation: <u>WMFK</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input checked="" type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-045-13371-00</u> Well Name & No: <u>GMU 26-14A (J26NW)</u> Operator Name: <u>CAERUS PICEANCE LLC</u> Operator No: <u>10456</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWSE</u> Section: <u>26</u> Township: <u>6S</u> Range: <u>93W</u> Meridian: <u>6</u> Producing Formation: <u>WMFK</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Transported to disposal site via <input type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input checked="" type="checkbox"/> Both TDS: _____ mg/L

Add Source	API Number: <u>05-045-13372-00</u>	Well Name & No: <u>GMU 26-11C (J26NW)</u>
<input checked="" type="checkbox"/>	Operator Name: <u>CAERUS PICEANCE LLC</u>	Operator No: <u>10456</u>
Delete Source	Location: QtrQtr: <u>NWSE</u> Section: <u>26</u> Township: <u>6S</u> Range: <u>93W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>WMFK</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input checked="" type="checkbox"/> Both	TDS: _____ mg/L
Add Source	API Number: <u>05-045-13373-00</u>	Well Name & No: <u>GMU 26-12A (J26NW)</u>
<input checked="" type="checkbox"/>	Operator Name: <u>CAERUS PICEANCE LLC</u>	Operator No: <u>10456</u>
Delete Source	Location: QtrQtr: <u>NWSE</u> Section: <u>26</u> Township: <u>6S</u> Range: <u>93W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>WMFK</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input checked="" type="checkbox"/> Both	TDS: _____ mg/L
Add Source	API Number: <u>05-045-13374-00</u>	Well Name & No: <u>GMU 26-14B (J26NW)</u>
<input checked="" type="checkbox"/>	Operator Name: <u>CAERUS PICEANCE LLC</u>	Operator No: <u>10456</u>
Delete Source	Location: QtrQtr: <u>NWSE</u> Section: <u>26</u> Township: <u>6S</u> Range: <u>93W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>WMFK</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input checked="" 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: Kristine Mize-Spansky Signed: _____
 Title: Gathering Systems Analyst 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>
401749195	Source of Produced Water Import

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)