

State of Colorado Oil and Gas Conservation Commission

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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: 10112

Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC

Address: 5057 KELLER SPRINGS RD STE 650

City: ADDISON State: TX Zip: 75001

Contact Name and Telephone:

Name: Alyssa Beard

Phone: (303) 244-8114 Fax: ()

Email: regulatory@foundationenergy.com

DISPOSAL FACILITY INFORMATION

UIC Facility ID: 159170

Operator's Disposal Facility Name: CS FED NAV 13-12-4-102 WD

Operator's Disposal Facility Number:

Location: QtrQtr: NWSW Sec: 12 Twp: 4S Range: 104W Meridian: 6

County: RIO BLANCO

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 10 Deleted: 0 Added: 10

SOURCE OF PRODUCED WATER

Add Source <input checked="" type="checkbox"/>	API Number: 05-103-08715-00	Well Name & No: COLUMBINE SP FED 13-24-4-104
	Operator Name: FOUNDATION ENERGY MANAGEMENT LLC	Operator No: 10112
Delete Source <input type="checkbox"/>	Location: QtrQtr: NWNW Section: 24 Township: 4S Range: 104W Meridian: 6	
	Producing Formation: DKTA 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 <input checked="" type="checkbox"/>	API Number: 05-103-10159-00	Well Name & No: COLUMBINE SP FED 8-14-4-104
	Operator Name: FOUNDATION ENERGY MANAGEMENT LLC	Operator No: 10112
Delete Source <input type="checkbox"/>	Location: QtrQtr: NESE Section: 14 Township: 4S Range: 104W Meridian: 6	
	Producing Formation: DKTA 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 <input checked="" type="checkbox"/>	API Number: 05-103-10435-00	Well Name & No: COLUMBINE SP FED 7C-12-4-104
	Operator Name: FOUNDATION ENERGY MANAGEMENT LLC	Operator No: 10112
Delete Source <input type="checkbox"/>	Location: QtrQtr: NWSE Section: 12 Township: 4S Range: 104W Meridian: 6	
	Producing Formation: MVRDC 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 <input checked="" type="checkbox"/>	API Number: 05-103-10436-00	Well Name & No: COLUMBINE SP FED 15C-23-4-104
	Operator Name: FOUNDATION ENERGY MANAGEMENT LLC	Operator No: 10112
Delete Source <input type="checkbox"/>	Location: QtrQtr: NWNE Section: 23 Township: 4S Range: 104W Meridian: 6	
	Producing Formation: MVRD 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 <input checked="" type="checkbox"/>	API Number: <u>05-103-10443-00</u>	Well Name & No: <u>COLUMBINE SP FED 6C-23-4-103</u>
	Operator Name: <u>FOUNDATION ENERGY MANAGEMENT LLC</u>	Operator No: <u>10112</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NESW</u> Section: <u>23</u> Township: <u>4S</u> Range: <u>104W</u> Meridian: <u>6</u>	
	Producing Formation: <u>MVRDC</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 <input checked="" type="checkbox"/>	API Number: <u>05-103-10444-00</u>	Well Name & No: <u>COLUMBINE SP FED 11C-11-4-104</u>
	Operator Name: <u>FOUNDATION ENERGY MANAGEMENT LLC</u>	Operator No: <u>10112</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SEnw</u> Section: <u>11</u> Township: <u>4S</u> Range: <u>104W</u> Meridian: <u>6</u>	
	Producing Formation: <u>MVRDC</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 <input checked="" type="checkbox"/>	API Number: <u>05-103-10447-00</u>	Well Name & No: <u>COLUMBINE SP FED 13C-23-4-104</u>
	Operator Name: <u>FOUNDATION ENERGY MANAGEMENT LLC</u>	Operator No: <u>10112</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWNW</u> Section: <u>23</u> Township: <u>4S</u> Range: <u>104W</u> Meridian: <u>6</u>	
	Producing Formation: <u>MVRD</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 <input checked="" type="checkbox"/>	API Number: <u>05-103-10452-00</u>	Well Name & No: <u>COLUMBINE SP FED 13C-11-4-104</u>
	Operator Name: <u>FOUNDATION ENERGY MANAGEMENT LLC</u>	Operator No: <u>10112</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWNW</u> Section: <u>11</u> Township: <u>4S</u> Range: <u>104W</u> Meridian: <u>6</u>	
	Producing Formation: <u>MVRDC</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 <input checked="" type="checkbox"/>	API Number: <u>05-103-10453-00</u>	Well Name & No: <u>COLUMBINE SPRINGS FEDERAL 4C-11-4S-104</u>
	Operator Name: <u>FOUNDATION ENERGY MANAGEMENT LLC</u>	Operator No: <u>10112</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWSW</u> Section: <u>11</u> Township: <u>4S</u> Range: <u>104W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NESLC</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 <input checked="" type="checkbox"/>	API Number: <u>05-103-10466-00</u>	Well Name & No: <u>COLUMBINE SP FED 10C-12-4-104</u>
	Operator Name: <u>FOUNDATION ENERGY MANAGEMENT LLC</u>	Operator No: <u>10112</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWNE</u> Section: <u>12</u> Township: <u>4S</u> Range: <u>104W</u> Meridian: <u>6</u>	
	Producing Formation: <u>MVRDC</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: Alyssa Beard Signed: _____

Title: HSE Manager Date: _____

COGCC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY:

COA Type	Description

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)