

State of Colorado Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

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12/04/2009

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: 10091

Name of Operator: BERRY PETROLEUM COMPANY LLC

Address: 5201 TRUXTUN AVENUE #100

City: BAKERSFIELD State: CA Zip: 90339

Contact Name and Telephone:

Name: CHRIS FREEMAN 303-999-4400

Phone: (303) 999-4220 Fax: (303) 999-4334

Email: none@given.com

DISPOSAL FACILITY INFORMATION

UIC Facility ID: 414668

Operator's Disposal Facility Name: F-30

Operator's Disposal Facility Number:

Location: QtrQtr: SENW Sec: 30 Twp: 5S Range: 96W Meridian: 6

County: GARFIELD

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 6 Deleted: 0 Added: 6

SOURCE OF PRODUCED WATER


Add Source <input checked="" type="checkbox"/>	API Number: 05-045-09076-00	Well Name & No: CHEVRON 234-30
	Operator Name: BERRY PETROLEUM COMPANY	Operator No: 10091
Delete Source <input type="checkbox"/>	Location: QtrQtr: SWNW Section: 30 Township: 5S Range: 96W Meridian: 6	
	Producing Formation: WMFK Analysis Attached? <input type="checkbox"/> Yes <input checked="" 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: 05-045-11404-00	Well Name & No: CHEVRON 33D-30
	Operator Name: BERRY PETROLEUM COMPANY	Operator No: 10091
Delete Source <input type="checkbox"/>	Location: QtrQtr: Lot 2 Section: 30 Township: 5S Range: 96W Meridian: 6	
	Producing Formation: WMFK Analysis Attached? <input type="checkbox"/> Yes <input checked="" 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: 05-045-12659-00	Well Name & No: CHEVRON 30-4D
	Operator Name: BERRY PETROLEUM COMPANY	Operator No: 10091
Delete Source <input type="checkbox"/>	Location: QtrQtr: SENW Section: 30 Township: 5S Range: 96W Meridian: 6	
	Producing Formation: WMFK Analysis Attached? <input type="checkbox"/> Yes <input checked="" 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: 05-045-12660-00	Well Name & No: CHEVRON 30-1D
	Operator Name: BERRY PETROLEUM COMPANY	Operator No: 10091
Delete Source <input type="checkbox"/>	Location: QtrQtr: SENW Section: 30 Township: 5S Range: 96W Meridian: 6	
	Producing Formation: WMFK Analysis Attached? <input type="checkbox"/> Yes <input checked="" 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	API Number: <u>05-045-12661-00</u>	Well Name & No: <u>CHEVRON 30-2D</u>
<input checked="" type="checkbox"/>	Operator Name: <u>BERRY PETROLEUM COMPANY</u>	Operator No: <u>10091</u>
Delete Source	Location: QtrQtr: <u>SEnw</u> Section: <u>30</u> Township: <u>5S</u> Range: <u>96W</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 checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	

Add Source	API Number: <u>05-045-12699-00</u>	Well Name & No: <u>CHEVRON 30-26D</u>
<input checked="" type="checkbox"/>	Operator Name: <u>BERRY PETROLEUM COMPANY</u>	Operator No: <u>10091</u>
Delete Source	Location: QtrQtr: <u>SEnw</u> Section: <u>30</u> Township: <u>5S</u> Range: <u>96W</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 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: CHRIS FREEMAN Signed: _____
 Title: ENVIRONMENTAL MANAGER Date: 12/04/2009

COGCC Approved:  Date: 03/11/2019

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>
Engineer	changed analysis attached to NO due to error from paper copy without back-up scan operator is no longer operator of record	03/11/2019

Total: 1 comment(s)