

**State of Colorado**  
**Oil and Gas Conservation Commission**

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FOR OGCC USE ONLY

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Date Received:

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	API Number: 05-045-09076-00	Well Name & No: CHEVRON 234-30
<input checked="" type="checkbox"/>	Operator Name: BERRY PETROLEUM COMPANY	Operator No: 10091
Delete Source	Location: QtrQtr: SWNW Section: 30 Township: 5S Range: 96W Meridian: 6	
<input type="checkbox"/>	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: 05-045-11404-00	Well Name & No: CHEVRON 33D-30
<input checked="" type="checkbox"/>	Operator Name: BERRY PETROLEUM COMPANY	Operator No: 10091
Delete Source	Location: QtrQtr: Lot 2 Section: 30 Township: 5S Range: 96W Meridian: 6	
<input type="checkbox"/>	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: 05-045-12659-00	Well Name & No: CHEVRON 30-4D
<input checked="" type="checkbox"/>	Operator Name: BERRY PETROLEUM COMPANY	Operator No: 10091
Delete Source	Location: QtrQtr: SENW Section: 30 Township: 5S Range: 96W Meridian: 6	
<input type="checkbox"/>	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: 05-045-12660-00	Well Name & No: CHEVRON 30-1D
<input checked="" type="checkbox"/>	Operator Name: BERRY PETROLEUM COMPANY	Operator No: 10091
Delete Source	Location: QtrQtr: SENW Section: 30 Township: 5S Range: 96W Meridian: 6	
<input type="checkbox"/>	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: *Matthew Lee* 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)