



Condensate Storage Tank(s) APEN Form APCD-205

Air Pollutant Emission Notice (APEN) and Application for Construction Permit

All sections of this APEN and application must be completed for both new and existing facilities, including APEN updates. An application with missing information may be determined incomplete and may be returned or result in longer application processing times. *You may be charged an additional APEN fee if the APEN is filled out incorrectly or is missing information and requires re-submittal.*

This APEN is to be used for tanks that store condensate associated with oil and gas industry operations. If your emission source does not fall into this category, there may be a more specific APEN available for your source (e.g. crude oil storage tanks, produced water storage tanks, hydrocarbon liquid loading, etc.). In addition, the General APEN (Form APCD-200) is available if the specialty APEN options will not satisfy your reporting needs. A list of all available APEN forms and associated addendum forms can be found on the Air Pollution Control Division (APCD) website at: www.colorado.gov/pacific/cdphe/air-permits.

This emission notice is valid for five (5) years. Submission of a revised APEN is required 30 days prior to expiration of the five-year term, or when a reportable change is made (significant emissions increase, increase production, new equipment, change in fuel type, etc.). See Regulation No. 3, Part A, II.C. for revised APEN requirements.

Permit Number: _____

AIRS ID Number: _____ / _____ / _____

[Leave blank unless APCD has already assigned a permit # and AIRS ID]

Section 1 - Administrative Information

Company Name¹: _____

Site Name: _____

Site Location: _____

Site Location

County: _____

NAICS or SIC Code: _____

Mailing Address: _____

(Include Zip Code)

Contact Person: _____

Phone Number: _____

E-Mail Address²: _____

¹ Use the full, legal company name registered with the Colorado Secretary of State. This is the company name that will appear on all documents issued by the APCD. Any changes will require additional paperwork.

² Permits, exemption letters, and any processing invoices will be issued by the APCD via e-mail to the address provided.

Permit Number: _____

AIRS ID Number: _____

/ /

[Leave blank unless APCD has already assigned a permit # and AIRS ID]

Section 2 - Requested Action

- ☐ **NEW permit OR newly-reported emission source**
- ☐ Request coverage under traditional construction permit
- ☐ Request coverage under a General Permit
- ☐ GP01 ☐ GP08

If General Permit coverage is requested, the General Permit registration fee of **\$312.50** must be submitted along with the APEN filing fee.

- OR -

- ☐ **MODIFICATION to existing permit** (check each box below that applies)
- ☐ Change in equipment ☐ Change company name³
- ☐ Change permit limit ☐ Transfer of ownership⁴ ☐ Other (describe below)

- OR -

- ☐ **APEN submittal for update only** (Note blank APENs will not be accepted)

- ADDITIONAL PERMIT ACTIONS -

- ☐ **APEN submittal for permit exempt/grandfathered source**
- ☐ **Limit Hazardous Air Pollutants (HAPs) with a federally-enforceable limit on Potential To Emit (PTE)**

Additional Info & Notes: _____

³ For company name change, a completed Company Name Change Certification Form (Form APCD-106) must be submitted.

⁴ For transfer of ownership, a completed Transfer of Ownership Certification Form (Form APCD-104) must be submitted.

Section 3 - General Information

General description of equipment and purpose: _____

Company equipment Identification No. (optional): _____

For *existing* sources, operation began on: _____

For *new or reconstructed* sources, the projected start-up date is: _____

Normal Hours of Source Operation: _____ hours/day _____ days/week _____ weeks/year

Storage tank(s) located at: ☐ Exploration & Production (E&P) site ☐ Midstream or Downstream (non E&P) site

Will this equipment be operated in any NAAQS nonattainment area?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Are Flash Emissions anticipated from these storage tanks?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Is the actual annual average hydrocarbon liquid throughput \geq 500 bbl/day?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
If "yes", identify the stock tank gas-to-oil ratio:			m ³ /liter	
Are these storage tanks subject to Colorado Oil and Gas Conservation Commission (COGCC) 805 series rules? If so, submit Form APCD-105.	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Are you requesting \geq 6 ton/yr VOC emissions (per storage tank), or are uncontrolled actual emissions \geq 6 ton/yr (per storage tank)?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Permit Number: _____

AIRS ID Number: _____

/ /

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Section 4 - Storage Tank(s) Information

	Actual Annual Amount (bbl/year)	Requested Annual Permit Limit ⁵ (bbl/year)
Condensate Throughput:		

From what year is the *actual annual amount*? _____

Average API gravity of sales oil: _____ degrees

RVP of sales oil: _____

Tank design: ☐ Fixed roof ☐ Internal floating roof ☐ External floating roof

Storage Tank ID	# of Liquid Manifold Storage Vessels in Storage Tank	Total Volume of Storage Tank (bbl)	Installation Date of Most Recent Storage Vessel in Storage Tank (month/year)	Date of First Production (month/year)

Wells Serviced by this Storage Tank or Tank Battery ⁶ (E&P Sites Only)		
API Number	Name of Well	Newly Reported Well
- -		<input type="checkbox"/>
- -		<input type="checkbox"/>
- -		<input type="checkbox"/>
- -		<input type="checkbox"/>
- -		<input type="checkbox"/>

⁵ Requested values will become permit limitations. Requested limit(s) should consider future growth.⁶ The E&P Storage Tank APEN Addendum (Form APCD-212) should be completed and attached when additional space is needed to report all wells that are serviced by the equipment reported on this APEN form.**Section 5 - Stack Information**

Geographical Coordinates (Latitude/Longitude or UTM)

Operator Stack ID No.	Discharge Height Above Ground Level (feet)	Temp. (°F)	Flow Rate (ACFM)	Velocity (ft/sec)

Indicate the direction of the stack outlet: (check one)

☐ Upward☐ Downward☐ Upward with obstructing raincap☐ Horizontal☐ Other (describe): _____

Indicate the stack opening and size: (check one)

☐ Circular

Interior stack diameter (inches): _____

☐ Square/rectangle

Interior stack width (inches): _____

Interior stack depth (inches): _____

☐ Other (describe): _____

Permit Number: _____ AIRS ID Number: _____ / _____ / _____
[Leave blank unless APCD has already assigned a permit # and AIRS ID]

Section 6 - Control Device Information

☐ Check this box if no emission control equipment or practices are used to reduce emissions, and skip to the next section.

<input type="checkbox"/>	Vapor Recovery Unit (VRU):	Pollutants Controlled:	_____
		Size:	_____ Make/Model: _____
		Requested Control Efficiency:	_____ %
		VRU Downtime or Bypassed (emissions vented):	_____ %

<input type="checkbox"/>	Combustion Device:	Pollutants Controlled:	_____
		Rating:	_____ MMBtu/hr
		Type:	_____ Make/Model: _____
		Requested Control Efficiency:	_____ %
		Manufacturer Guaranteed Control Efficiency:	_____ %
		Minimum Temperature:	_____ Waste Gas Heat Content: _____ Btu/scf
Constant Pilot Light:		<input type="checkbox"/> Yes <input type="checkbox"/> No	Pilot Burner Rating: _____ MMBtu/hr

<input type="checkbox"/>	Closed Loop System	Description of the closed loop system:	_____

<input type="checkbox"/>	Other:	Pollutants Controlled:	_____
		Description:	_____
		Control Efficiency Requested:	_____ %

Section 7 - Gas/Liquids Separation Technology Information (E&P Sites Only)

What is the pressure of the final separator vessel prior to discharge to the storage tank(s)? _____ psig

Describe the separation process between the well and the storage tanks: _____

Permit Number: _____

AIRS ID Number: _____

/ /

[Leave blank unless APCD has already assigned a permit # and AIRS ID]

Section 8 - Emissions Inventory Information

Attach all emissions calculations and emission factor documentation to this APEN form⁷.

If multiple emission control methods were identified in Section 6, the following table can be used to state the overall (or combined) control efficiency (% reduction):

Pollutant	Description of Control Method(s)	Overall Requested Control Efficiency (% reduction in emissions)
VOC		
NO _x		
CO		
HAPs		
Other:		

From what year is the following reported *actual annual emissions* data? _____

Criteria Pollutant Emissions Inventory							
Pollutant	Emission Factor ⁷			Actual Annual Emissions		Requested Annual Permit Emission Limit(s) ⁵	
	Uncontrolled Basis	Units	Source (AP-42, Mfg. etc)	Uncontrolled Emissions (Tons/year)	Controlled Emissions ⁸ (Tons/year)	Uncontrolled Emissions (Tons/year)	Controlled Emissions (Tons/year)
VOC							
NO _x							
CO							

Non-Criteria Reportable Pollutant Emissions Inventory						
Chemical Name	Chemical Abstract Service (CAS) Number	Emission Factor ⁷			Actual Annual Emissions	
		Uncontrolled Basis	Units	Source (AP-42, Mfg. etc)	Uncontrolled Emissions (Pounds/year)	Controlled Emissions ⁸ (Pounds/year)
Benzene	71432					
Toluene	108883					
Ethylbenzene	100414					
Xylene	1330207					
n-Hexane	110543					
2,2,4-Trimethylpentane	540841					

⁵ Requested values will become permit limitations. Requested limit(s) should consider future growth.

⁷ Attach condensate liquid laboratory analysis, stack test results, and associated emissions calculations if you are requesting site specific emissions factors according to the guidance in PS Memo 14-03.

⁸ Annual emissions fees will be based on actual controlled emissions reported. If source has not yet started operating, leave blank.

Permit Number: _____

AIRS ID Number: _____

/ /

[Leave blank unless APCD has already assigned a permit # and AIRS ID]

Section 9 - Applicant Certification

I hereby certify that all information contained herein and information submitted with this application is complete, true, and correct. If this is a registration for coverage under General Permit GP01 or GP08, I further certify that this source is and will be operated in full compliance with each condition of the applicable General Permit.

Signature of Legally Authorized Person (not a vendor or consultant)

Date

Name (print)

Title

Check the appropriate box to request a copy of the:

- ☐ Draft permit prior to issuance
☐ Draft permit prior to public notice

(Checking any of these boxes may result in an increased fee and/or processing time)

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Send this form along with \$191.13 and the General Permit registration fee of \$312.50, if applicable, to:

Colorado Department of Public Health and Environment
Air Pollution Control Division
APCD-SS-B1
4300 Cherry Creek Drive South
Denver, CO 80246-1530

Make check payable to:

Colorado Department of Public Health and Environment

For more information or assistance call:

Small Business Assistance Program
(303) 692-3175 or (303) 692-3148

APCD Main Phone Number
(303) 692-3150

Or visit the APCD website at:

<https://www.colorado.gov/cdphe/apcd>