

# 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

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## 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: 10699

Name of Operator: OWN RESOURCES OPERATING LLC

Address: 38 PALMER CREST CT

City: SPRING State: TX Zip: 77381

Contact Name and Telephone:

Name: Pat Dolezal

Phone: (970) 332-3585 Fax: ( )

Email: pat.dolezal@ownresources.com

### DISPOSAL FACILITY INFORMATION

UIC Facility ID: 159222

Operator's Disposal Facility Name: KGA 13-12D

Operator's Disposal Facility Number:

Location: QtrQtr: NWSW Sec: 13 Twp: 3N Range: 45W Meridian: 6

County: YUMA

### SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 22 Deleted: 0 Added: 22

### SOURCE OF PRODUCED WATER

Add Source	API Number: 05-125-08740-00	Well Name & No: KITZMILLER STATE 16 1
<input checked="" type="checkbox"/>	Operator Name: OWN RESOURCES OPERATING LLC	Operator No: 10699
Delete Source	Location: QtrQtr: NWSW Section: 16 Township: 3N Range: 45W Meridian: 6	
<input type="checkbox"/>	Producing Formation: NBRR 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: 05-125-09156-00	Well Name & No: STATE 16-14
<input checked="" type="checkbox"/>	Operator Name: OWN RESOURCES OPERATING LLC	Operator No: 10699
Delete Source	Location: QtrQtr: SESW Section: 16 Township: 3N Range: 45W Meridian: 6	
<input type="checkbox"/>	Producing Formation: NBRR 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: 05-125-09166-00	Well Name & No: KGA 17-11
<input checked="" type="checkbox"/>	Operator Name: OWN RESOURCES OPERATING LLC	Operator No: 10699
Delete Source	Location: QtrQtr: NESW Section: 17 Township: 3N Range: 45W Meridian: 6	
<input type="checkbox"/>	Producing Formation: NBRR 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: 05-125-09186-00	Well Name & No: KGA 13-13
<input checked="" type="checkbox"/>	Operator Name: OWN RESOURCES OPERATING LLC	Operator No: 10699
Delete Source	Location: QtrQtr: SWSW Section: 13 Township: 3N Range: 45W Meridian: 6	
<input type="checkbox"/>	Producing Formation: NBRR 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: <u>05-125-09323-00</u>	Well Name & No: <u>KGA 13-11</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWSW</u> Section: <u>13</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-09443-00</u>	Well Name & No: <u>KGA 8-15</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWSE</u> Section: <u>8</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-09448-00</u>	Well Name & No: <u>STATE 16-3</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NENW</u> Section: <u>16</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-09449-00</u>	Well Name & No: <u>STATE 16-13</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWSW</u> Section: <u>16</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-09453-00</u>	Well Name & No: <u>KGA 17-8</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SENE</u> Section: <u>17</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-09476-00</u>	Well Name & No: <u>KGA 22-4</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWNW</u> Section: <u>22</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-09540-00</u>	Well Name & No: <u>KGA 21-6</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SENW</u> Section: <u>21</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-09654-00</u>	Well Name & No: <u>SMITH 28-4</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWNW</u> Section: <u>28</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-09721-00</u>	Well Name & No: <u>SMITH 28-3</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NENW</u> Section: <u>28</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-09737-00</u>	Well Name & No: <u>SMITH 21-13</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWSW</u> Section: <u>21</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-09739-00</u>	Well Name & No: <u>ROTH 13-6</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SENW</u> Section: <u>13</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-09828-00</u>	Well Name & No: <u>STATE 16-5</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWNW</u> Section: <u>16</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-10061-00</u>	Well Name & No: <u>KGA 18-13</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWSW</u> Section: <u>18</u> Township: <u>3N</u> Range: <u>44W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-10062-00</u>	Well Name & No: <u>ROTH 13-1</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NENE</u> Section: <u>13</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-10071-00</u>	Well Name & No: <u>KGA 17-1</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NENE</u> Section: <u>17</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-10435-00</u>	Well Name & No: <u>KGA 17-2</u>
	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWNE</u> Section: <u>17</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-11868-00</u>	Well Name & No: <u>KGA 16-11</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
	Location: QtrQtr: <u>NESW</u> Section: <u>16</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-125-11869-00</u>	Well Name & No: <u>KGA 17-07</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>
	Location: QtrQtr: <u>SWNE</u> Section: <u>17</u> Township: <u>3N</u> Range: <u>45W</u> Meridian: <u>6</u>	
	Producing Formation: <u>NBRR</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: Pat Dolezal Signed: \_\_\_\_\_  
 Title: Regulatory Specialist Date: 02/14/2020

COGCC Approved:  Date: 07/01/2021

**CONDITIONS OF APPROVAL, IF ANY:**

**Condition of Approval**

**COA Type**

**Description**

0 COA	

**Attachment List**

**Att Doc Num**

**Name**

402313112	FORM 26 SUBMITTED
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Total Attach: 1 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)