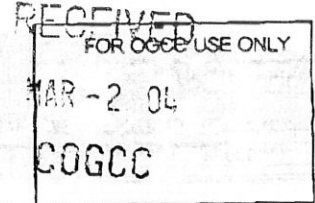




State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303)894-2100 Fax:(303)894-2109



SOURCE OF PRODUCED WATER FOR DISPOSAL

This form must be completed for any new disposal site and for any change in sources of produced water for an existing disposal site.

Complete the
Attachment Checklist

Chemical Analysis of fluid	OGCC
X	

If more space is required,
attach additional sheet.

OGCC Operator Number: <u>36200</u>	Contact Name and Telephone: <u>Ken McKinney</u>
Name of Operator: <u>Grynberg Petroleum</u>	No: <u>303 850 7490</u>
Address: <u>5299 DTC Blvd.</u>	Fax: <u>303 850 7498</u>
City: <u>Greenwood Village</u> State: <u>CO</u> Zip: <u>80111</u>	

OGCC Disposal Facility Number: <u>159111</u>	Operator's Disposal Facility Number: <u>1</u>
Operator's Disposal Facility Name: <u>Grynberg Croissant</u>	
Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>SW NW Sec. 26 9N 62W</u>	
Address: _____	
City: _____	State: _____ Zip: _____ County: _____

Add Source: OGCC Lease No: _____ API No: 05 123 21651 Well Name & No: Croissant #4
☒ Operator Name: Grynberg Petroleum Operator No: 36200
Delete Source: Location: QtrQtr: NW NW Section: 26 Township: 9N Range: 62W Producing Formation: J Sand
☐ Analysis Attached? ☐ Yes ☒ No Transported to disposal site via: ☒ Pipeline ☐ Truck TDS: NA

Add Source: OGCC Lease No: _____ API No: 05-123-6129 Well Name & No: Graefe #1
☒ Operator Name: Grynberg Petroleum Operator No: 36200
Delete Source: Location: QtrQtr: SW NW Section: 26 Township: 9N Range: 62W Producing Formation: Lyons
☐ Analysis Attached? ☒ Yes ☐ No Transported to disposal site via: ☒ Pipeline ☐ Truck TDS: 116000

Add Source: OGCC Lease No: _____ API No: _____ Well Name & No: _____
☐ Operator Name: _____ Operator No: _____
Delete Source: Location: QtrQtr: _____ Section: _____ Township: _____ Range: _____ Producing Formation: _____
☐ Analysis Attached? ☐ Yes ☐ No Transported to disposal site via: ☐ Pipeline ☐ Truck TDS: _____

Add Source: OGCC Lease No: _____ API No: _____ Well Name & No: _____
☐ Operator Name: _____ Operator No: _____
Delete Source: Location: QtrQtr: _____ Section: _____ Township: _____ Range: _____ Producing Formation: _____
☐ Analysis Attached? ☐ Yes ☐ No Transported to disposal site via: ☐ Pipeline ☐ Truck TDS: _____

Add Source: OGCC Lease No: _____ API No: _____ Well Name & No: _____
☐ Operator Name: _____ Operator No: _____
Delete Source: Location: QtrQtr: _____ Section: _____ Township: _____ Range: _____ Producing Formation: _____
☐ Analysis Attached? ☐ Yes ☐ No Transported to disposal site via: ☐ Pipeline ☐ Truck TDS: _____

Add Source: OGCC Lease No: _____ API No: _____ Well Name & No: _____
☐ Operator Name: _____ Operator No: _____
Delete Source: Location: QtrQtr: _____ Section: _____ Township: _____ Range: _____ Producing Formation: _____
☐ Analysis Attached? ☐ Yes ☐ No Transported to disposal site via: ☐ Pipeline ☐ Truck TDS: _____

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Ken McKinney Signed: [Signature]

Title: Production Manager Date: 5-7-04

OGCC Approved: [Signature] Title: Engineer Date: 5/26/04

CONDITIONS OF APPROVAL, IF ANY: