

State of Colorado Energy & Carbon Management Commission

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FOR OGCC USE ONLY

Document Number:

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Date Received:

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: 10690

Name of Operator: IMPETRO RESOURCES LLC

Address: 558 CASTLE PINES PKWY UNIT B-4

City: CASTLE PINES State: CO Zip: 80108

Contact Name and Telephone:

Name: Brent Bongers

Phone: (361) 935-5633 Fax: ()

Email: bbongers@impetroresources.com

DISPOSAL FACILITY INFORMATION

UIC Facility ID: 159376

Operator's Disposal Facility Name: JONES 4

Operator's Disposal Facility Number:

Location: QtrQtr: NESE Sec: 26 Twp: 3S Range: 51W Meridian: 6

County: WASHINGTON

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 7 Deleted: 0 Added: 7

SOURCE OF PRODUCED WATER

Add Source	API Number: 05-121-05414-00	Well Name & No: JONES-DUPREE 3
<input checked="" type="checkbox"/>	Operator Name: IMPETRO RESOURCES LLC	Operator No: 10690
Delete Source	Location: QtrQtr: SENW Section: 26 Township: 3S Range: 51W Meridian: 6	
<input type="checkbox"/>	Producing Formation: JSND 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: 05-121-05435-00	Well Name & No: JONES J W 1
<input checked="" type="checkbox"/>	Operator Name: IMPETRO RESOURCES LLC	Operator No: 10690
Delete Source	Location: QtrQtr: NWNW Section: 25 Township: 3S Range: 51W Meridian: 6	
<input type="checkbox"/>	Producing Formation: JSND 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: 05-121-08883-00	Well Name & No: JONES J W 2
<input checked="" type="checkbox"/>	Operator Name: IMPETRO RESOURCES LLC	Operator No: 10690
Delete Source	Location: QtrQtr: SWNW Section: 25 Township: 3S Range: 51W Meridian: 6	
<input type="checkbox"/>	Producing Formation: JSND 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: 05-121-08884-00	Well Name & No: JONES-DUPREE 7
<input checked="" type="checkbox"/>	Operator Name: IMPETRO RESOURCES LLC	Operator No: 10690
Delete Source	Location: QtrQtr: SENE Section: 26 Township: 3S Range: 51W Meridian: 6	
<input type="checkbox"/>	Producing Formation: J-3 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>05-121-10487-00</u>	Well Name & No: <u>JONES 33-26</u>
	Operator Name: <u>IMPETRO RESOURCES LLC</u>	Operator No: <u>10690</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWSE</u> Section: <u>26</u> Township: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>	
	Producing Formation: <u>JSND</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>05-121-10881-00</u>	Well Name & No: <u>JONES 34-26</u>
	Operator Name: <u>IMPETRO RESOURCES LLC</u>	Operator No: <u>10690</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWSE</u> Section: <u>26</u> Township: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>	
	Producing Formation: <u>JSND</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>05-121-11020-00</u>	Well Name & No: <u>Jones Dupree 32-26A</u>
	Operator Name: <u>IMPETRO RESOURCES LLC</u>	Operator No: <u>10690</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWNE</u> Section: <u>26</u> Township: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>	
	Producing Formation: <u>JSND</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: Amber Barnett Signed: _____

Title: Compliance Specialist Date: _____

COGCC Approved: _____ Date: _____

CONDITIONS OF APPROVAL, IF ANY:

<u>COA Type</u>	<u>Description</u>
0 COA	

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
403617262	Source of Produced Water Import

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)