

State of Colorado Energy & Carbon Management Commission



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FOR OGCC USE ONLY

Document Number:

403617285

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: <u>10690</u>	Contact Name and Telephone:
Name of Operator: <u>IMPETRO RESOURCES LLC</u>	Name: <u>Brent Bongers</u>
Address: <u>558 CASTLE PINES PKWY UNIT B-4</u>	Phone: <u>(316) 935-5633</u> Fax: <u>()</u>
City: <u>CASTLE PINES</u> State: <u>CO</u> Zip: <u>80108</u>	Email: <u>bbongers@impetroresources.com</u>

DISPOSAL FACILITY INFORMATION

UIC Facility ID: <u>150116</u>	Operator's Disposal Facility Name: <u>JONES-DUPREE 9</u>	Operator's Disposal Facility Number: _____
Location: QtrQtr: <u>NWNE</u> Sec: <u>26</u> Twp: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>		
County: <u>WASHINGTON</u>		

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 7 Deleted: 0 Added: 7

SOURCE OF PRODUCED WATER

Add Source	API Number: <u>05-121-05414-00</u>	Well Name & No: <u>JONES-DUPREE 3</u>
<input checked="" type="checkbox"/>	Operator Name: <u>IMPETRO RESOURCES LLC</u>	Operator No: <u>10690</u>
Delete Source	Location: QtrQtr: <u>SENW</u> Section: <u>26</u> Township: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	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	API Number: <u>05-121-05435-00</u>	Well Name & No: <u>JONES J W 1</u>
<input checked="" type="checkbox"/>	Operator Name: <u>IMPETRO RESOURCES LLC</u>	Operator No: <u>10690</u>
Delete Source	Location: QtrQtr: <u>NWNW</u> Section: <u>25</u> Township: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	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	API Number: <u>05-121-08883-00</u>	Well Name & No: <u>JONES J W 2</u>
<input checked="" type="checkbox"/>	Operator Name: <u>IMPETRO RESOURCES LLC</u>	Operator No: <u>10690</u>
Delete Source	Location: QtrQtr: <u>SWNW</u> Section: <u>25</u> Township: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	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	API Number: <u>05-121-08884-00</u>	Well Name & No: <u>JONES-DUPREE 7</u>
<input checked="" type="checkbox"/>	Operator Name: <u>IMPETRO RESOURCES LLC</u>	Operator No: <u>10690</u>
Delete Source	Location: QtrQtr: <u>SENE</u> Section: <u>26</u> Township: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>J-3</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

<input checked="" type="checkbox"/> Add Source	API Number: <u>05-121-10487-00</u>	Well Name & No: <u>JONES 33-26</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>IMPETRO RESOURCES LLC</u>	Operator No: <u>10690</u>	
<input type="checkbox"/> Delete Source	Location: QtrQtr: <u>NWSE</u> Section: <u>26</u> Township: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	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

<input checked="" type="checkbox"/> Add Source	API Number: <u>05-121-10881-00</u>	Well Name & No: <u>JONES 34-26</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>IMPETRO RESOURCES LLC</u>	Operator No: <u>10690</u>	
<input type="checkbox"/> Delete Source	Location: QtrQtr: <u>NWSE</u> Section: <u>26</u> Township: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	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

<input checked="" type="checkbox"/> Add Source	API Number: <u>05-121-11020-00</u>	Well Name & No: <u>Jones Dupree 32-26A</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>IMPETRO RESOURCES LLC</u>	Operator No: <u>10690</u>	
<input type="checkbox"/> Delete Source	Location: QtrQtr: <u>SWNE</u> Section: <u>26</u> Township: <u>3S</u> Range: <u>51W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	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>
403617290	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)