

DISCHARGE MONITORING REPORT GENERATOR - WELLINGTON OPERATING COMPANY - prepared by STEWART ENVIRONMENTAL CONSULTANTS, INC.

Facility Information:

Name: Wellington Operating Co.  
 Mailing Address: 6065 S. Quebec Street, Suite 201  
 City, State, Zip: Englewood, CO 80111

Location Address: 1590 East Larimer County Road 70  
 City, State, Zip: Wellington, CO 80549

Telephone: 303-220-5399

Contact Name: Bradley A. Pomeroy

Permit Number: COGCC 281818 & 281824

DATE:	Year	Month	Day
Monitoring Period Start:	2007	12	1
Monitoring Period Stop:	2007	12	31
Date Form Completed:	2008	1	22

Sample Location Result

Parameter:	001 A										050 A		050 B		050 C		050 D		050 E		
	# 1	# 2	# 3	# 4	# 5	Average	Minimum	Maximum	# Samples	Type	# 1	Type	# 1	Type	# 1	Type	# 1	Type	# 1	Type	
Flow - MGD		0.0706	0.075	0.0087		0.0514		0.075	3	recorder											
pH min		7.81	7.74	7.81			7.74														
pH max		7.92	7.88	7.82				7.92	3	grab											
Oil & Grease - Visible Sheen Yes = 1 No = 0								0	0	visual											
Oil & Grease								N.S.	0	grab											
Total Dissolved Solids		2196						2196	1	composite	1110	grab	1172	grab	1166	grab	1182	grab	840	grab	
Chloride as Cl		430.5						430.5	1	composite	13.0	grab	291.3	grab	31.6	grab	10.2	grab	29.4	grab	
Fluoride, Total as F		4.3						4.3	1	composite	1.0	grab	0.8	grab	0.9	grab	0.8	grab	1.3	grab	
Sodium, as Na		804						804	1	composite	44.0	grab	139	grab	45.6	grab	33.4	grab	47.5	grab	
Sulfate as S		8.1						8.1	1	composite	729.7	grab	253.6	grab	630.6	grab	774.1	grab	461.3	grab	
Barium, Total as Ba		9.23						9.23	1	composite	0.011	grab	0.037	grab	0.014	grab	0.01	grab	0.025	grab	
Boron, Total as B		2.32						2.32	1	composite	0.185	grab	0.68	grab	0.188	grab	0.16	grab	0.184	grab	
Thallium, Total as Tl		< 0.01						0	1	composite	< 0.01	grab	< 0.01	grab	< 0.01	grab	< 0.01	grab	< 0.01	grab	
Benzene			< 0.001					< 0.001	1	grab			< 0.001	grab 1/365							
Toluene			< 0.002					< 0.002	1	grab			< 0.002	grab 1/365							
Ethyl Benzene			< 0.002					< 0.002	1	grab			< 0.002	grab 1/365							
Xylene, Total			< 0.004					< 0.004	1	grab			< 0.004	grab 1/365							
Naphthalene			< 0.002					< 0.002	1	grab											

Complete Only If NO Discharge:

NO DISCHARGE:

050 B: Enter "N.S" instead of concentration values when Not Sampled (annual BTEX)  
 Also manually enter "0" in "# EX" column if N.S.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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Wellington, CO 80549

ATTN: Bradley A. Pomeroy

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

COGCC 281818 & 281824  
PERMIT NUMBER

001 A  
DISCHARGE NUMBER

E & P WASTES (SUBR DP)  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires

LARIMER

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	2007	12	1		2007	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

DISCHARGE TO PIPELINE

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		0.0514	0.075	(03)	*****	*****	*****	*****	0	30/30	recorder
50050 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	0.144 30 DA AVG	REPORT DAILY MAX	MGD	*****	*****	*****	*****		CONTIN	RECORDER
OIL AND GREASE VISUAL		*****	0	(94)	*****	*****	*****	*****	0	1/7	visual
84066 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT		INST MAX	YES = 1	*****	*****	*****	*****		WEEKLY	VISUAL
			YES = 1 NO = 0	NO = 0							
OIL AND GREASE		*****	*****	*****	*****	*****	N.S.	(19)	0	contingent	grab
03582 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	10			CONTIN	GRAB
							INST MAX	MG/L		GENT	
pH		*****	*****	*****	7.74	*****	7.92	(12)	0	1/7	grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	6.5	*****	8.5			WEEKLY	GRAB
					MINIMUM		MAXIMUM	SU			
TOTAL DISSOLVED SOLIDS		*****	*****	*****	*****	*****	2196	(19)	0	1/30	composite
70295 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT			ONCE/	COMPOSITE
							DAILY MAX	MG/L		MONTH	
CHLORIDE as Cl		*****	*****	*****	*****	*****	430.5	(19)	0	1/30	composite
00940 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT			ONCE/	COMPOSITE
							DAILY MAX	MG/L		MONTH	
FLUORIDE, TOTAL as F		*****	*****	*****	*****	*****	4.3	(19)	0	1/30	composite
00951 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT			ONCE/	COMPOSITE
							DAILY MAX	MG/L		MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  RANDY R. EVANS Operator in Responsible Charge TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			AREA CODE	NUMBER	YEAR	MO	DAY
			303-220-5399		2008	1	22

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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Englewood, CO 80111

FACILITY LOCATION 1590 East Larimer County Road 70  
Wellington, CO 80549

ATTN: Bradley A. Pomeroy

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) (17-19)

COGCC 281818 & 281824  
PERMIT NUMBER

001 A  
DISCHARGE NUMBER

E & P WASTES  
(SUBR DP)  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires

LARIMER

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DISCHARGE TO PIPELINE

\*\*\* NO DISCHARGE  \*\*\*

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PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	804	(19)	0	1/30	composite
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/MONTH	COMPOSITE
SULFATE as S	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	8.1	(19)	0	1/30	composite
00154 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/MONTH	COMPOSITE
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	9.23	(19)	0	1/30	composite
01007 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/MONTH	COMPOSITE
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.32	(19)	0	1/30	composite
01022 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/MONTH	COMPOSITE
THALLIUM as Th	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.01	(19)	0	1/30	composite
01059 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/MONTH	COMPOSITE
BENZENE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.001	(19)	0	1/30	grab
34030 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.005 DAILY MAX	MG/L		ONCE/MONTH	GRAB
TOLUENE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.002	(19)	0	1/30	grab
34010 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 DAILY MAX	MG/L		ONCE/MONTH	GRAB

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			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)  
Please see cover letter for discussion.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

ADDRESS 6065 S. Quebec Street, Suite 201  
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FACILITY 1590 East Larimer County Road 70

LOCATION Wellington, CO 80549  
Bradley A. Pomeroy

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

COGCC 281818 & 281824  
PERMIT NUMBER

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DISCHARGE NUMBER

E & P WASTES  
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Form Approved.  
OMB No. 2040-0004  
Approval expires

LARIMER

MONITORING PERIOD

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DISCHARGE TO PIPELINE

\*\*\* NO DISCHARGE  \*\*\*

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ETHYLBENZENE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.002	(19)	0	1/30	grab
37371 1 0 0	EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	0.7	MG/L		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	DAILY MAX				
XYLENES,TOTAL	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.004	(19)	0	1/30	grab
81551 1 0 0	EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	1.4	MG/L		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	DAILY MAX				
NAPHTHALENE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.002	(19)	0	1/30	grab
34696 1 0 0	EFFLUENT GROSS VALUE	*****	*****	*****	*****	*****	0.14	MG/L		ONCE/MONTH	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	DAILY MAX				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			

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RANDY R. EVANS Operator in Responsible Charge TYPED OR PRINTED			303-220-5399		2008	1	22

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

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MONITORING PERIOD					
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2007	12	1	2007	12	31

UPGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE  \*\*\*

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PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUANTITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	1110	1110	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	44	44	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	13	13	(19)	0	1/30	grab
940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SULFATE as S	SAMPLE MEASUREMENT		*****	(03)	*****	729.7	729.7	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	INSTAN
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	1	1	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.011	0.011	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.185	0.185	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB

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			303-220-5399	2008	1	22
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UPGRADIENT ALLUVIAL GROUNDWATER

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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
THALLIUM, TOTAL as Th	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.01	< 0.01	(19)	0	1/30	grab
01059 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			

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DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING			(4 Card Only) QUANTITY OR CONCENTRATION				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS			
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	1172	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT	MG/L		ONCE/MONTH	GRAB
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	139	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT	MG/L		ONCE/MONTH	GRAB
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	291.3	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT	MG/L		ONCE/MONTH	GRAB
SULFATE as S	SAMPLE MEASUREMENT	*****	*****	(03)	*****	*****	253.6	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	REPORT	MG/L		ONCE/MONTH	INSTAN
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.8	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT	MG/L		ONCE/MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.037	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT	MG/L		ONCE/MONTH	GRAB
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.68	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT	MG/L		ONCE/MONTH	VISUAL

<b>NAME/TITLE PRINCIPAL EXECUTIVE OFFICER</b> RANDY R. EVANS Operator in Responsible Charge TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	<b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	TELEPHONE	DATE			
			303-220-5399	2008	1	22	
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
 NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
**DISCHARGE MONITORING REPORT (DMR)**

Form Approved.  
 OMB No. 2040-0004  
 Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
 Englewood, CO 80111

COGCC 281818 & 281824  
 PERMIT NUMBER

050 B  
 DISCHARGE NUMBER

E & P WASTES  
 (SUBR DP)  
 F - FINAL

LARIMER

FACILITY 1590 East Larimer County Road 70  
 LOCATION Wellington, CO 80549  
 Bradley A. Pomeroy

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
2007	12	1		2007	12	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

DOWNGRAIDENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
THALLIUM, TOTAL as Th 01059 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.01	(19)	0	1/30	grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/MONTH	GRAB
BENZENE EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 0.001	(19)	0	1/365	grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.005 DAILY MAX	MG/L		ONCE/YEAR	GRAB
TOLUENE EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 0.002	(19)	0	1/365	grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 DAILY MAX	MG/L		ONCE/YEAR	GRAB
ETHYLBENZENE EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 0.002	(19)	0	1/365	grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.7 DAILY MAX	MG/L		ONCE/YEAR	GRAB
XYLENES, TOTAL EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	< 0.004	(19)	0	1/365	grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.4 DAILY MAX	MG/L		ONCE/YEAR	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			

<b>NAME/TITLE PRINCIPAL EXECUTIVE OFFICER</b> RANDY R. EVANS Operator in Responsible Charge TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	<b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	<b>TELEPHONE</b> 303-220-5399		<b>DATE</b> 2008 1 22		
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) **NOTE: "N.S." SIGNIFIES THAT THE OUTFALL WAS 'Not Sampled' FOR THE CURRENT REPORTING PERIOD**

NAME Wellington Operating Co.

DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111

COGCC 281818 & 281824  
PERMIT NUMBER

050 C  
DISCHARGE NUMBER

E & P WASTES  
(SUBR DP)  
F - FINAL

LARIMER

FACILITY 1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

Bradley A. Pomeroy

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	2007	12	1		2007	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

1/4-MILE DOWNGRAIDENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	1166	1166	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	45.6	45.6	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	31.6	31.6	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	250 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SULFATE as S	SAMPLE MEASUREMENT	*****	*****	(03)	*****	630.6	630.6	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	INSTAN
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.9	0.9	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.014	0.014	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.188	0.188	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	5 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	VISUAL

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER <b>RANDY R. EVANS</b> Operator in Responsible Charge TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
			AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

**DISCHARGE MONITORING REPORT (DMR)**

Form Approved.

OMB No. 2040-0004

Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111

COGCC 281818 & 281824  
PERMIT NUMBER

050 C  
DISCHARGE NUMBER

E & P WASTES  
(SUBR DP)  
F - FINAL

LARIMER

FACILITY 1590 East Larimer County Road 70  
LOCATION Wellington, CO 80549  
Bradley A. Pomeroy

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
2007	12	1	2007	12	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUANTITY OR CONCENTRATION (4 Card Only) (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
THALLIUM, TOTAL as Th	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.01	< 0.01	(19)	0	1/30	grab
01059 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	0.002	REPORT	MG/L		ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			

<b>NAME/TITLE PRINCIPAL EXECUTIVE OFFICER</b> RANDY R. EVANS Operator in Responsible Charge TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	<b>TELEPHONE</b> 303-220-5399		<b>DATE</b> 2008 1 22		
		<b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	<b>AREA CODE</b>	<b>NUMBER</b>	<b>YEAR</b>	<b>MO</b>

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
 NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

Form Approved.  
 OMB No. 2040-0004  
 Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
 Englewood, CO 80111

(2-16)  
**COGCC 281818 & 281824**  
 PERMIT NUMBER

(17-19)  
**050 D**  
 DISCHARGE NUMBER

E & P WASTES  
 (SUBR DP)  
 F - FINAL

LARIMER

FACILITY 1590 East Larimer County Road 70  
 LOCATION Wellington, CO 80549  
 Bradley A. Pomeroy

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2007	12	1	2007	12	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	1182	1182	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	33.4	33.4	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	10.2	10.2	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	250 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
SULFATE as S	SAMPLE MEASUREMENT	*****	*****	*****	*****	774.1	774.1	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	INSTAN
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.8	0.8	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.011	0.011	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.16	0.16	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	5 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	VISUAL

<b>NAME/TITLE PRINCIPAL EXECUTIVE OFFICER</b> <b>RANDY R. EVANS</b> Operator in Responsible Charge <b>TYPED OR PRINTED</b>	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	<b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	TELEPHONE	DATE			
			303-220-5399	2008	1	22	
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
 NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
**DISCHARGE MONITORING REPORT (DMR)**

Form Approved.  
 OMB No. 2040-0004  
 Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
 Englewood, CO 80111

(2-16)  
**COGCC 281818 & 281824**  
 PERMIT NUMBER

(17-19)  
**050 D**  
 DISCHARGE NUMBER

E & P WASTES  
 (SUBR DP)  
 F - FINAL

LARIMER

FACILITY 1590 East Larimer County Road 70  
 LOCATION Wellington, CO 80549  
 Bradley A. Pomeroy

MONITORING PERIOD							
YEAR	MO	DAY	FROM	TO	YEAR	MO	DAY
2007	12	1			2007	12	31
			(20-21)	(22-23)	(24-25)		
			(26-27)	(28-29)	(30-31)		

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	QUANTITY OR LOADING (3 Card Only (46-53) (54-61))			QUANTITY OR CONCENTRATION (4 Card Only (38-45) (46-53) (54-61))			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
01059 THALLIUM, TOTAL as Th EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.01	<0.01	0	1/30	grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.002 30 DA AVG	REPORT DAILY MAX		ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****			

<b>NAME/TITLE PRINCIPAL EXECUTIVE OFFICER</b> <b>RANDY R. EVANS</b> Operator in Responsible Charge TYPED OR PRINTED	<small>I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.</small>	<b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	TELEPHONE	DATE			
			303-220-5399	2008	1	22	
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111

FACILITY 1590 East Larimer County Road 70

LOCATION Wellington, CO 80549  
Bradley A. Pomeroy

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)  
COGCC 281818 & 281824  
PERMIT NUMBER

(17-19)  
050 E  
DISCHARGE NUMBER

E & P WASTES  
(SUBR DP)  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires

LARIMER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
2007	12	1	2007	12	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE  \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT / PERMIT REQUIREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	840	840	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT	REPORT			ONCE/MONTH	GRAB
						DAILY MAX	DAILY MAX	MG/L			
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	47.5	47.5	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT	REPORT			ONCE/MONTH	GRAB
						DAILY MAX	DAILY MAX	MG/L			
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	29.4	29.4	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	250	REPORT			ONCE/MONTH	GRAB
						DAILY MAX	DAILY MAX	MG/L			
SULFATE as S	SAMPLE MEASUREMENT	*****	*****	(03)	*****	461.3	461.3	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	REPORT	REPORT			ONCE/MONTH	INSTAN
						DAILY MAX	DAILY MAX	MG/L			
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.3	1.3	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2	REPORT			ONCE/MONTH	GRAB
						DAILY MAX	DAILY MAX	MG/L			
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.025	0.025	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2	REPORT			ONCE/MONTH	GRAB
						DAILY MAX	DAILY MAX	MG/L			
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.184	0.184	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	5	REPORT			ONCE/MONTH	VISUAL
						DAILY MAX	DAILY MAX	MG/L			

<b>NAME/TITLE PRINCIPAL EXECUTIVE OFFICER</b> RANDY R. EVANS Operator in Responsible Charge TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	<b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	<b>TELEPHONE</b> 303-220-5399		<b>DATE</b> 2008 1 22		
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME Wellington Operating Co.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

**DISCHARGE MONITORING REPORT (DMR)**

Form Approved.

OMB No. 2040-0004

Approval expires

ADDRESS 6065 S. Quebec Street, Suite 201  
Englewood, CO 80111

COGCC 281818 & 281824  
PERMIT NUMBER

050 E  
DISCHARGE NUMBER

E & P WASTES  
(SUBR DP)  
F - FINAL

LARIMER

FACILITY 1590 East Larimer County Road 70  
LOCATION Wellington, CO 80549  
Bradley A. Pomeroy

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
2007	12	1	2007	12	31
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (3 Card Only) (46-53)			QUANTITY OR CONCENTRATION (4 Card Only) (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
THALLIUM, TOTAL as Th	SAMPLE MEASUREMENT	*****	*****	*****	*****	< 0.01	< 0.01	(19)	0	1/30	grab
01059 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	0.002	REPORT			ONCE/MONTH	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER RANDY R. EVANS Operator in Responsible Charge TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
			303-220-5399	2008	1	22
AREA CODE	NUMBER	YEAR	MO	DAY		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)