

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

2.0833333

Contact Name: Bradley A. Pomeroy

Permit Number: COGCC 281818 & 281824

DATE:	Year	Month	Day
Monitoring Period Start:	2006	9	1
Monitoring Period Stop:	2006	9	30
Date Form Completed:	2006	10	12

Sample Location Result

Parameter:	001 A										050 A	
	# 1	# 2	# 3	# 4	# 5	Average	Minimum	Maximum	# Samples	Type	# 1	Type
Flow - MGD		0.0583	0.0345			0.0464	0.0345	0.0586	2	recorder		
pH min		7.39	7.65				7.39					
pH max		7.76	7.77					7.77	2	grab		
Oil & Grease - Visible Sheen Yes = 1 No = 0		0				0	0	0	1	visual		
Oil & Grease		N.S.				#DIV/0!	0	0	0	grab		
Total Dissolved Solids		2042				2042	2042	2042	1	composite	1470	grab
Chloride as Cl		457				457	457	457	1	composite	11	grab
Fluoride, Total as F		4				4	4	4	1	composite	0.9	grab
Sodium, as Na		185				185	185	185	1	composite	47.9	grab
Sulfate as S		16				16	16	16	1	composite	867	grab
Barium, Total as Ba		5.52				5.52	5.52	5.52	1	composite	0.013	grab
Boron, Total as B		2.03				2.03	2.03	2.03	1	composite	0.25	grab
Thallium, Total as Tl		<0.01				#DIV/0!	0	0	0	composite	0.07	grab
Benzene		0.008				0.008	0.008	0.008	1	grab		
Toluene		<0.002				#DIV/0!	0	0	0	grab		
Ethyl Benzene		<0.002				#DIV/0!	0	0	0	grab		
Xylene, Total		<0.004				#DIV/0!	0	0	0	grab		
Naphthalene		<0.002				#DIV/0!	0	0	0	grab		

Complete Only If NO Discharge:

NO DISCHARGE:

050 B		050 C		050 D		050 E	
# 1	Type	# 1	Type	# 1	Type	# 1	Type
806	grab	984	grab	1240	grab	1106	grab
17	grab	17	grab	8	grab	13	grab
1.0	grab	0.8	grab	0.8	grab	0.8	grab
29.2	grab	35.7	grab	28.4	grab	31.4	grab
339	grab	481	grab	647	grab	565	grab
0.028	grab	0.015	grab	0.012	grab	0.033	grab
0.21	grab	0.23	grab	0.23	grab	0.23	grab
0.06	grab	0.06	grab	0.06	grab	0.10	grab
N.S.	grab 1/365						
N.S.	grab 1/365						
N.S.	grab 1/365						
N.S.	grab 1/365						

**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)
NAME Wellington Operating Co.

ADDRESS 6065 S. Quebec Street, Suite 201
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)

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							
		YEAR	MO	DAY			YEAR	MO	DAY
FROM		2006	9	1	TO		2006	9	30
		(20-21)	(22-23)	(24-25)			(26-27)	(28-29)	(30-31)

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LOCATION 1590 East Larimer County Road 70
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ATTN: Bradley A. Pomeroy

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)
(2-16)

COGCC 281818 & 281824
PERMIT NUMBER

001 A
DISCHARGE NUMBER

E & P WASTES
(SUBR DP)
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		MONITORING PERIOD							
		YEAR	MO	DAY			YEAR	MO	DAY
FROM		2006	9	1	TO		2006	9	30
		(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)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)						
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM									
SODIUM as Na EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	185	(19)	0	1/30	composite					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	COMPOSITE					
SULFATE as S 00154 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	16	(19)	0	1/30	composite					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	COMPOSITE					
BARIUM, TOTAL as Ba 01007 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	5.52	(19)	0	1/30	composite					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	COMPOSITE					
BORON, TOTAL as B 01022 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	2.03	(19)	0	1/30	composite					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	COMPOSITE					
THALLIUM as Th 01059 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.01	(19)	0	1/30	composite					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	COMPOSITE					
BENZENE 34030 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.008	(19)	1*	1/30	grab					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.005 DAILY MAX	MG/L		ONCE/ MONTH	GRAB					
TOLUENE 34010 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.002	(19)	0	1/30	grab					
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1 DAILY MAX	MG/L		ONCE/ MONTH	GRAB					
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		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.				TELEPHONE		DATE								
STEPHEN ROGERS						303-220-5399		2006	10	12						
Operator in Responsible Charge						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY				
TYPED OR PRINTED																
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) Please see cover letter for discussion. Results reported by telephone on September 26, 2006																

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

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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

001 A
DISCHARGE NUMBER

E & P WASTES

(SUBR DP)

F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires

LARIMER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2006	9	1	2006	9	30
(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)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
ETHYLBENZENE 37371 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.002	(19)	0	1/30	grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.7 DAILY MAX	MG/L		ONCE/ MONTH	GRAB
XYLENES,TOTAL 81551 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.004	(19)	0	1/30	grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	1.4 DAILY MAX	MG/L		ONCE/ MONTH	GRAB
NAPHTHALENE 34696 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	<0.002	(19)	0	1/30	grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	0.14 DAILY MAX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER					TELEPHONE		DATE		
STEPHEN ROGERS					303-220-5399		2006	10	12
Operator in Responsible Charge					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR MO DAY
TYPED OR PRINTED									
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

TIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

DGCC 281818 & 28182
PERMIT NUMBER

(17-19)

050 A
DISCHARGE NUMBER

E & P WASTES
(SUBR DP)
F - FINAL

Form Approved.
OMB No. 2040-0004

Approval expires

LARIMER

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
2006	9	1		2006	9	30

FROM

UPGRADIENT ALLUVIAL GROUNDWATER

*** NO DISCHARGE ***

(20-21) (22-23) (24-25)

(26-27) (28-29) (30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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)
		(46-53)	(54-61)	UNITS	(38-45)	(46-53)	(54-61)	UNITS			
		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM				
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMEN T	*****	*****	*****	*****	1470	1470	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT	REPORT		ONCE/	GRAB	
					30 DA AVG	DAILY MAX	MG/L	MONTH			
SODIUM as Na	SAMPLE MEASUREMEN T	*****	*****	*****	*****	47.9	47.9	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT	REPORT		ONCE/	GRAB	
					30 DA AVG	DAILY MAX	MG/L	MONTH			
CHLORIDE as Cl	SAMPLE MEASUREMEN T	*****	*****	*****	*****	11	11	(19)	0	1/30	grab
940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT	REPORT		ONCE/	GRAB	
					30 DA AVG	DAILY MAX	MG/L	MONTH			
SULFATE as S	SAMPLE MEASUREMEN T		*****	(03)	*****	867	867	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT	REPORT		ONCE/	INSTAN	
				MGD	30 DA AVG	DAILY MAX	MG/L	MONTH			
FLUORIDE, TOTAL as F	SAMPLE MEASUREMEN T	*****	*****	*****	*****	0.9	0.9	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT	REPORT		ONCE/	GRAB	
					30 DA AVG	DAILY MAX	MG/L	MONTH			
BARIUM, TOTAL as Ba	SAMPLE MEASUREMEN T	*****	*****	*****	*****	0.013	0.013	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT	REPORT		ONCE/	GRAB	
					30 DA AVG	DAILY MAX	MG/L	MONTH			
BORON, TOTAL as B	SAMPLE MEASUREMEN T	*****	*****	*****	*****	0.25	0.25	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT	REPORT		ONCE/	GRAB	
					30 DA AVG	DAILY MAX	MG/L	MONTH			
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		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				TELEPHONE		DATE			
STEPHEN ROGERS		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				303-220-5399		2006	10	12	
Operator in Responsible Charge						ARE A		NUMBER	YEAR	MO	DAY
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

PERMITTEE NAME/ADDRESS
NAME Wellington Operating Co.
ADDRESS 6065 S. Quebec Street, Suite 201
Englewood, CO 80111

TIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDE)
DISCHARGE MONITORING REPORT (DMR)
(2-16) DGCC 281818 & 28184
PERMIT NUMBER
(17-19) 050 A
DISCHARGE NUMBER
E & P WASTES (SUBR DP)
F - FINAL
Form Approved.
OMB No. 2040-0004
Approval expires
LARIMER

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

MONITORING PERIOD
YEAR MO DAY
2006 9 1
TO 2006 9 30
*** NO DISCHARGE ***

UPGRADIENT ALLUVIAL GROUNDWATER

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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)
		(46-53)	(54-61)	UNITS	(38-45)	(46-53)	(54-61)				
		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM	UNITS			
THALLIUM, TOTAL as Th 01059 EFFLUENT GROSS VALUE	SAMPLE MEASUREMEN T	*****	*****	*****	*****	0.07	0.07	(19)	0	1/30	grab
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX		MG/L	ONCE/MONTH	GRAB
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T		*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
STEPHEN ROGERS
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

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
303-220-5399
ARE A NUMBER

DATE
2006 10 12
YEAR MO DAY

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

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

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Englewood, CO 80111

TIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)
JGCC 281818 & 28182
PERMIT NUMBER

(17-19)
050 B
DISCHARGE NUMBER

E & P WASTES
(SUBR DP)
F - FINAL

Form Approved.
OMB No. 2040-0004
Approval expires

LARIMER

FACILITY

1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

FROM

MONITORING PERIOD
YEAR MO DAY TO YEAR MO DAY
2006 9 1 2006 9 30

DOWNGRADIANT ALLUVIAL GROUNDWATER

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(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)
		(46-53)	(54-61)	UNITS	(38-45)	(46-53)	(54-61)	UNITS			
		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM				
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	806	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX		MG/L	ONCE/ MONTH	GRAB
SODIUM as Na	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	29.2	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX		MG/L	ONCE/ MONTH	GRAB
CHLORIDE as Cl	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	17	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX		MG/L	ONCE/ MONTH	GRAB
SULFATE as S	SAMPLE MEASUREMEN T	*****	*****	(03) MGD	*****	*****	339	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX		MG/L	ONCE/ MONTH	INSTAN
FLUORIDE, TOTAL as F	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	1.0	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX		MG/L	ONCE/ MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	0.028	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX		MG/L	ONCE/ MONTH	GRAB
BORON, TOTAL as B	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	0.21	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX		MG/L	ONCE/ MONTH	VISUAL

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STEPHEN ROGERS Operator in Responsible Charge				303-220-5399	2006	10	12
TYPED OR PRINTED				ARE A NUMBER	YEAR	MO	DAY

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

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

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ADDRESS 6065 S. Quebec Street, Suite 201
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Bradley A. Pomeroy

TIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

DGCC 281818 & 28183
PERMIT NUMBER

(17-19)

050 B
DISCHARGE NUMBER

E & P WASTES
(SUBR DP)
F - FINAL

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OMB No. 2040-0004

Approval expires

LARIMER

MONITORING PERIOD

YEAR	MO	DAY	YEAR	MO	DAY
2006	9	1	2006	9	30

FROM

TO

DOWNGRADIENT ALLUVIAL GROUNDWATER

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	<div></div>	(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)
		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS			
THALLIUM, TOTAL as Th 01059 EFFLUENT GROSS VALUE	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	0.06	(19) MG/L	0	1/30	grab
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX		ONCE/ MONTH	GRAB	
BENZENE EFFLUENT GROSS VALUE	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	N.S.	(19) MG/L	0	1/365	grab
	PERMIT REQUIREMENT	*****	*****		*****	*****	0.005 DAILY MAX		ONCE/ YEAR	GRAB	
TOLUENE EFFLUENT GROSS VALUE	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	N.S.	(19) MG/L	0	1/365	grab
	PERMIT REQUIREMENT	*****	*****		*****	*****	1 DAILY MAX		ONCE/ YEAR	GRAB	
ETHYLBENZENE EFFLUENT GROSS VALUE	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	N.S.	(19) MG/L	0	1/365	grab
	PERMIT REQUIREMENT	*****	*****		*****	*****	0.7 DAILY MAX		ONCE/ YEAR	GRAB	
XYLENES, TOTAL EFFLUENT GROSS VALUE	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	N.S.	(19) MG/L	0	1/365	grab
	PERMIT REQUIREMENT	*****	*****		*****	*****	1.4 DAILY MAX		ONCE/ YEAR	GRAB	
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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		TELEPHONE		DATE	
STEPHEN ROGERS Operator in Responsible Charge			303-220-5399		2006 10 12	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		ARE A	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.

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

DISCHARGE MONITORING REPORT (DMR)

(2-16)

DGCC 281818 & 28182
PERMIT NUMBER

(17-19)

050 C
DISCHARGE NUMBER

E & P WASTES

(SUBR DP)

F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires

LARIMER

FACILITY

1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

Bradley A. Pomeroy

MONITORING PERIOD						
YEAR	MO	DAY	YEAR	MO	DAY	
2006	9	1	2006	9	30	

FROM

TO

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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)
		(46-53)	(54-61)		(38-45)	(46-53)	(54-61)				
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****		*****	984	984	(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	*****	*****		*****	35.7	35.7	(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	*****	*****		*****	17	17	(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)	*****	481	481	(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	*****	*****		*****	0.8	0.8	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2 DA AVG	REPORT DAILY MAX	MG/L		ONCE/MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****		*****	0.015	0.015	(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	*****	*****		*****	0.23	0.23	(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		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		TELEPHONE		DATE	
STEPHEN ROGERS				303-220-5399		2006 10 12	
Operator in Responsible Charge				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		YEAR MO DAY	
TYPED OR PRINTED				ARE A NUMBER			

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

TIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDE)

DISCHARGE MONITORING REPORT (DMR)

(2-16)
OGCC 281818 & 28184
PERMIT NUMBER

(17-19)
050 C
DISCHARGE NUMBER

E & P WASTES
(SUBR DP)
F - FINAL

Form Approved.
OMB No. 2040-0004
Approval expires

LARIMER

FACILITY

1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

Bradley A. Pomeroy

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
FRC 2006	9	1		2006	9	30

(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)	<div></div>	(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)
		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS			
THALLIUM, TOTAL as Th	SAMPLE MEASUREMEN T	*****	*****	*****	*****	0.06	0.06	(19)	0	1/30	grab
01059 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	0.002 30 DA AVG	REPORT DAILY MAX		MG/L	ONCE/ MONTH	GRAB
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****		*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEPHEN ROGERS 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		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 303-220-5399		DATE 2006 10 12	
	ARE A	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

TIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

DGCC 281818 & 28182

PERMIT NUMBER

(17-19)

050 D

DISCHARGE NUMBER

E & P WASTES
(SUBR DP)
F - FINAL

Form Approved.
OMB No. 2040-0004
Approval expires
LARIMER

MONITORING PERIOD

YEAR MO DAY TO YEAR MO DAY

2006 9 1 2006 9 30

FROM

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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)
		(46-53)	(54-61)	UNITS	(38-45)	(46-53)	(54-61)				
		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM				
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	1240	1240	(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	*****	*****	*****	*****	28.4	28.4	(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	*****	*****	*****	*****	8	8	(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		*****	*****	*****	647	647	(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
BARIIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.012	0.012	(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	*****	*****	*****	*****	0.23	0.23	(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		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				TELEPHONE		DATE			
STEPHEN ROGERS Operator in Responsible Charge						303-220-5399		2006	10	12	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				ARE A	NUMBER	YEAR	MO	DAY	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

PERMITTEE NAME/ADDRESS (Include Facility Name, Location & 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

TIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDE)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

DGCC 281818 & 28182
PERMIT NUMBER

(17-19)

050 D
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
2006	9	1	2006	9	30

FROM

TO

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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)
		(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS			
THALLIUM, TOTAL as Th 01059 EFFLUENT GROSS VALUE	SAMPLE MEASUREMEN T	*****	*****	*****	*****	0.06	0.06	(19)	0	1/30	grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.002 30 DA AVG	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
	SAMPLE MEASUREMEN T	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			

NAME/TITLE STEPHEN ROGERS 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	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			303-220-5399		2006	10	12
			ARE A	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

TIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

DGCC 281818 & 28182
PERMIT NUMBER

(17-19)

050 E
DISCHARGE NUMBER

E & P WASTES

(SUBR DP)

F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires

LARIMER

FACILITY

1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

Bradley A. Pomeroy

MONITORING PERIOD					
YEAR			MO		
DAY	DAY	DAY	DAY	DAY	DAY
2006	9	1	2006	9	30

FROM

TO

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

*** NO DISCHARGE

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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)	
		(46-53)		(54-61)	(38-45)		(46-53)				(54-61)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****		*****	1106	1106	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT	REPORT	MG/L	ONCE/MONTH	GRAB	
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****		*****	31.4	31.4	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT	REPORT	MG/L	ONCE/MONTH	GRAB	
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****		*****	13	13	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	250	REPORT	MG/L	ONCE/MONTH	GRAB	
SULFATE as S	SAMPLE MEASUREMENT		*****	(03)	*****	565	565	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	REPORT	REPORT	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	REPORT	MG/L	ONCE/MONTH	GRAB	
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****		*****	0.033	0.033	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2	REPORT	MG/L	ONCE/MONTH	GRAB	
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****		*****	0.23	0.23	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	5	REPORT	MG/L	ONCE/MONTH	VISUAL	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		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				TELEPHONE		DATE			
STEPHEN ROGERS						303-220-5399		2006 10 12			
Operator in Responsible Charge											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				ARE A 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)			(17-19)		
COGCC 281818 & 281824			050 E		
PERMIT NUMBER			DISCHARGE NUMBER		

E & P WASTES
(SUBR DP)
F - FINAL

Form Approved.
OMB No. 2040-0004
Approval expires

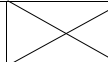
LARIMER

1/4-MILE DOWNGRAIDENT ALLUVIAL GROUNDWATER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
2006	9	1	2006	9	30
(20-21)		(22-23)	(24-25)		(26-27)
			(28-29)		(30-31)

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(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	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	(19)	0	1/30	grab
01059 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	0.002	REPORT				
					30 DA AVG	DAILY MAX	MGL				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****				
	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 STEPHEN ROGERS Operator in Responsible Charge	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.	TELEPHONE 303-220-5399		DATE 2006 10 12	
		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR MO DAY	

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