

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:	2006	7	1
Monitoring Period Stop:	2006	7	31
Date Form Completed:	2006	8	16

Parameter:	Sample Location Result										050 A	
	001 A										# 1	Type
Flow - MGD						#DIV/0!	0	0	0	recorder		
pH min							0	0				
pH max						#DIV/0!	0	0	0	grab		
Oil & Grease - Visible Sheen Yes = 1 No = 0						#DIV/0!	0	0	0	visual		
Oil & Grease						#DIV/0!	0	0	0	grab		
Total Dissolved Solids						#DIV/0!	0	0	0	composite	1352	grab
Chloride as Cl						#DIV/0!	0	0	0	composite	10	grab
Fluoride, Total as F						#DIV/0!	0	0	0	composite	0.8	grab
Sodium, as Na						#DIV/0!	0	0	0	composite	59.5	grab
Sulfate as S						#DIV/0!	0	0	0	composite	691	grab
Barium, Total as Ba						#DIV/0!	0	0	0	composite	0.451	grab
Boron, Total as B						#DIV/0!	0	0	0	composite	0.96	grab
Thallium, Total as Tl						#DIV/0!	0	0	0	composite	0.01	grab
Benzene						#DIV/0!	0	0	0	grab		
Toluene						#DIV/0!	0	0	0	grab		
Ethyl Benzene						#DIV/0!	0	0	0	grab		
Xylene, Total						#DIV/0!	0	0	0	grab		
Naphthalene						#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
864	grab	1272	grab	1450	grab	1054	grab
15	grab	11	grab	13	grab	15	grab
0.9	grab	0.8	grab	0.8	grab	0.9	grab
38.8	grab	49.3	grab	40.5	grab	44.8	grab
470	grab	620	grab	724	grab	544	grab
0.024	grab	0.014	grab	0.012	grab	0.025	grab
0.15	grab	0.18	grab	0.19	grab	0.16	grab
0.02	grab	0.02	grab	<0.01	grab	0.02	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)

(2-16)

COGCC 281818 & 281824

PERMIT NUMBER

(17-19)

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	7	1	2006	7	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)		(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	UNITS								
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	*****	*****	*****	*****		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	SAMPLE MEASUREMENT	*****		(94)	*****	*****	*****	*****		1/7	visual					
84066 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	INST MAX		*****	*****	*****	*****		WEEKLY	VISUAL					
			YES = 1 NO = 0													
OIL AND GREASE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)			grab					
03582 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	10	MG/L		CONTIN	GRAB					
							INST MAX			GENT						
pH	SAMPLE MEASUREMENT	*****	*****	*****		*****		(12)		1/7	grab					
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		6.5	*****	8.5			WEEKLY	GRAB					
					MINIMUM		MAXIMUM									
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		SU		1/30	composite					
70295 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT	MG/L		ONCE/	COMPOSITE					
							DAILY MAX			MONTH						
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)		1/30	composite					
00940 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT	MG/L		ONCE/	COMPOSITE					
							DAILY MAX			MONTH						
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)		1/30	composite					
00951 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT	MG/L		ONCE/	COMPOSITE					
							DAILY MAX			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 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	8	16					
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
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

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
2006	7	1	2006	7	31
FROM (20-21)		(22-23)	TO (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	*****	*****	*****	*****	*****		(19)		1/30 composite					
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX								
SULFATE as S 00154 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)		1/30 composite					
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX								
BARIUM, TOTAL as Ba 01007 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)		1/30 composite					
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX								
BORON, TOTAL as B 01022 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)		1/30 composite					
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX								
THALLIUM as Th 01059 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)		1/30 composite					
	PERMIT REQUIREMENT	*****	*****		*****	*****	REPORT DAILY MAX								
BENZENE 34030 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)		1/30 grab					
	PERMIT REQUIREMENT	*****	*****		*****	*****	0.005 DAILY MAX								
TOLUENE 34010 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)		1/30 grab					
	PERMIT REQUIREMENT	*****	*****		*****	*****	1 DAILY MAX								
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	8	16					
Operator in Responsible Charge						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT									
TYPED OR PRINTED						AREA CODE	NUMBER	YEAR	MO	DAY					
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)															

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FACILITY

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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
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MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
2006	7	1	2006	7	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

DISCHARGE TO PIPELINE

*** NO DISCHARGE ***

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			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	*****	*****	*****	*****	*****		(19)		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	*****	*****	*****	*****	*****		(19)		1/30	grab
	PERMIT REQUIREMENT	*****	*****		*****	*****	1.4 DAILY MAX	MG/L		ONCE/ MONTH	GRAB
NAPHTHALENE 34696 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****		(19)		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	8	16
Operator in Responsible Charge				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR
TYPED OR PRINTED								MO	DAY	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)										

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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	7	1		2006	7	31

FROM

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

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

UPGRADIENT 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 MEASUREMEN T	*****	*****	*****	*****	1352	1352	(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 MEASUREMEN T	*****	*****	*****	*****	59.5	59.5	(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 MEASUREMEN T	*****	*****	*****	*****	10	10	(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 MEASUREMEN T		*****	(03) MGD	*****	691	691	(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 MEASUREMEN T	*****	*****	*****	*****	0.8	0.8	(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 MEASUREMEN T	*****	*****	*****	*****	0.451	0.451	(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 MEASUREMEN T	*****	*****	*****	*****	0.96	0.96	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT 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				TELEPHONE		DATE			
STEPHEN ROGERS Operator in Responsible Charge		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				303-220-5399		2006	8	16	
TYPED OR PRINTED						ARE A	NUMBER	YEAR	MO	DAY	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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NAME Wellington Operating Co.
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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
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LARIMER

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

MONITORING PERIOD
YEAR MO DAY
2006 7 1 TO 2006 7 31
*** NO DISCHARGE ***

UPGRADIENT ALLUVIAL GROUNDWATER
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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)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
THALLIUM, TOTAL as Th 01059 EFFLUENT GROSS VALUE	SAMPLE MEASUREMEN T	*****	*****	*****	*****	0.01	0.01	(19) MG/L	0	1/30	grab	
	PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX		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		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		
STEPHEN ROGERS Operator in Responsible Charge								303-220-5399		2006	8	16
TYPED OR PRINTED						ARE A	NUMBER	YEAR	MO	DAY		

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

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DISCHARGE MONITORING REPORT (DMR)

(2-16)

DGCC 281818 & 28182
PERMIT NUMBER

(17-19)

050 B
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LARIMER

FACILITY

1590 East Larimer County Road 70

LOCATION Wellington, CO 80549

FROM

MONITORING PERIOD						
YEAR	MO	DAY		YEAR	MO	DAY
2006	7	1	TO	2006	7	31

*** NO DISCHARGE ☐ ***

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		(46-53)	(54-61)		(38-45)	(46-53)	(54-61)											
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS										
TOTAL DISSOLVED SOLIDS 70295 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	864	(19)	0	1/30	grab							
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB							
SODIUM as Na EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	38.8	(19)	0	1/30	grab							
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB							
CHLORIDE as Cl 00940 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	15	(19)	0	1/30	grab							
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB							
SULFATE as S 00154 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT		*****	(03)	*****	*****	470	(19)	0	1/30	grab							
	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	INSTAN							
FLUORIDE, TOTAL as F 00951 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.9	(19)	0	1/30	grab							
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB							
BARIUM, TOTAL as Ba 01007 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.024	(19)	0	1/30	grab							
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT DAILY MAX	MG/L		ONCE/ MONTH	GRAB							
BORON, TOTAL as B 01022 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.15	(19)	0	1/30	grab							
	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	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			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHONE		DATE								
STEPHEN ROGERS Operator in Responsible Charge								303-220-5399		2006	8	16						
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)

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 & 28183
PERMIT NUMBER

(17-19)

050 B
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	7	1	2006	7	31

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	*****	*****	*****	*****	*****	0.02	(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 8 16	
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

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 C
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	7	1	2006	7	31

FROM (20-21) (22-23) (24-25) TO (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)	(54-61)	UNITS	(38-45)	(46-53)	(54-61)					
		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM	UNITS				
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMEN T	*****	*****	*****	*****	1272	1272	(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 MEASUREMEN T	*****	*****	*****	*****	49.3	49.3	(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 MEASUREMEN T	*****	*****	*****	*****	11	11	(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 MEASUREMEN T		*****	(03) MGD	*****	620	620	(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 MEASUREMEN T	*****	*****	*****	*****	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 MEASUREMEN T	*****	*****	*****	*****	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 MEASUREMEN T	*****	*****	*****	*****	0.18	0.18	(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	8	16		
Operator in Responsible Charge				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		ARE A	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

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	YEAR	MO	DAY
FRC 2006	7	1	TO 2006	7	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)	<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	*****	*****	*****	*****	0.02	0.02	(19)	1	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 8 16		
			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 7 1 2006 7 31

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	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		(46-53)	(54-61)	UNITS	(38-45)	(46-53)	(54-61)				
		AVERAGE	MAXIMUM		MINIMUM	AVERAGE	MAXIMUM				
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	1450	1450	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT	REPORT	MG/L	ONCE/MONTH	GRAB	
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	40.5	40.5	(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		*****	*****	*****	724	724	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	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	
BARILUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.012	0.012	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	2	REPORT	MG/L	ONCE/MONTH	GRAB	
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.19	0.19	(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 Operator in Responsible Charge						303-220-5399		2006 8 16			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				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	7	1	2006	7	31

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	*****	*****	*****	*****	<0.01	<0.01	(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	8	16
			AREA	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	TO	
2006		7	1	2006 7 31	

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	*****	*****		*****	1054	1054	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT	REPORT	MG/L		ONCE/MONTH	GRAB
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****		*****	44.8	44.8	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	REPORT	REPORT	MG/L		ONCE/MONTH	GRAB
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****		*****	15	15	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	250	REPORT	MG/L		ONCE/MONTH	GRAB
SULFATE as S	SAMPLE MEASUREMENT		*****	(03)	*****	544	544	(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	*****	*****		*****	0.9	0.9	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2	REPORT	MG/L		ONCE/MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****		*****	0.025	0.025	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	2	REPORT	MG/L		ONCE/MONTH	GRAB
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****		*****	0.16	0.16	(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 8 16			
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

TIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDE)

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
2006 7 1 TO 2006 7 31

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

*** 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			
THALLIUM, TOTAL as Th 01059 EFFLUENT GROSS VALUE	SAMPLE MEASUREMEN T	*****	*****	*****	*****	0.02	0.02	(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 PRINCIPAL EXECUTIVE OFFICER	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 8 16
TYPED OR PRINTED			ARE A NUMBER	YEAR MO DAY

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