

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	3	1
Monitoring Period Stop:	2007	3	31
Date Form Completed:	2007	4	16

Sample Location Result

	001 A										050 A	
Parameter:	# 1	# 2	# 3	# 4	# 5	Average	Minimum	Maximum	# Samples	Type	# 1	Type
Flow - MGD	0.0151	0.0092	0.0166	0.0536		0.0158		0.0339	4	recorder		
pH min	7.87	7.64	7.83	6.99			6.99					
pH max	7.94	7.64	7.83	8.01				8.01	4	grab		
Oil & Grease - Visible Sheen Yes = 1 No = 0				0		0		0	1	visual		
Oil & Grease				N.S.		N.S.		N.S.	1	grab		
Total Dissolved Solids				2310		2310		2310	1	composite	1298	grab
Chloride as Cl				459.0		459.0		459.0	1	composite	10.2	grab
Fluoride, Total as F				4.2		4.2		4.2	1	composite	0.9	grab
Sodium, as Na				941		941		941	1	composite	50.8	grab
Sulfate as S				12.2		12.2		12.2	1	composite	733	grab
Barium, Total as Ba				5.49		5.49		5.49	1	composite	0.01	grab
Boron, Total as B				2.60		2.60		2.60	1	composite	0.2	grab
Thallium, Total as Tl				<0.01		<0.01		<0.01	1	composite	<0.01	grab
Benzene				<0.001		<0.001		<0.001	1	grab		
Toluene				<0.002		<0.002		<0.002	1	grab		
Ethyl Benzene				<0.002		<0.002		<0.002	1	grab		
Xylene, Total				<0.004		<0.004		<0.004	1	grab		
Naphthalene				<0.002		<0.002		<0.002	1	grab		

Complete Only If NO Discharge:

NO DISCHARGE: ☐

050 B		050 C		050 D		050 E	
# 1	Type	# 1	Type	# 1	Type	# 1	Type
856	grab	1340	grab	1252	grab	1006	grab
20.5	grab	11.0	grab	8.5	grab	21.4	grab
0.90	grab	0.8	grab	0.8	grab	0.7	grab
40.9	grab	49.9	grab	36.6	grab	40.5	grab
422.8	grab	754.1	grab	668.2	grab	528.2	grab
0.02	grab	0.02	grab	0.01	grab	0.02	grab
0.2	grab	0.2	grab	0.2	grab	0.1	grab
<0.01	grab	<0.01	grab	<0.01	grab	<0.01	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)
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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		
2007			3			1		
FROM			TO					
(20-21)			(22-23)			(26-27)		

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 (46-53)				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	0.0158	0.0243	(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	SAMPLE MEASUREMENT	*****	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	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	N.S.	(19)	0	contingent	grab					
03582 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	10	MG/L		CONTIN	GRAB					
							INST MAX			GENT						
pH	SAMPLE MEASUREMENT	*****	*****	*****	6.99	*****	8.01	(12)	0	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	*****	*****	*****	*****	*****	2310	SU	0	1/30	composite					
70295 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT	MG/L		ONCE/	COMPOSITE					
							DAILY MAX	(19)		MONTH						
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	459	(19)	0	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	*****	*****	*****	*****	*****	4.2	(19)	0	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		2007	4	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)																

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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
FROM		2007	3	1	TO		2007	3	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							
SODIUM as Na EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	941	(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	*****	*****	*****	*****	*****	12.2	(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	*****	*****	*****	*****	*****	5.49	(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	*****	*****	*****	*****	*****	2.6	(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	*****	*****	*****	*****	*****	<0.001	(19)	0	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		2007	4	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) Please see cover letter for discussion.														

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

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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

001 A
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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
2007	3	1	2007	3	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				
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				2007	4	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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DISCHARGE MONITORING REPORT (DMR)

(2-16)
COGCC 281818 & 281824
PERMIT NUMBER

(17-19)
050 A
DISCHARGE NUMBER

E & P WASTES
(SUBR DP)
F - FINAL

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OMB No. 2040-0004
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LARIMER

MONITORING PERIOD

FROM
200731
(20-21)(22-23)(24-25)

TO
200731
(26-27)(28-29)(30-31)

UPGRADIENT ALLUVIAL GROUNDWATER

*** 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				UNITS
TOTAL DISSOLVED SOLIDS		*****	*****	*****	*****	1298	1298	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX		MG/L	ONCE/ MONTH	GRAB
SODIUM as Na		*****	*****	*****	*****	50.8	50.8	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX		MG/L	ONCE/ MONTH	GRAB
CHLORIDE as Cl		*****	*****	*****	*****	10.2	10.2	(19)	0	1/30	grab
940 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX		MG/L	ONCE/ MONTH	GRAB
SULFATE as S		*****	*****	(03) MGD	*****	733	733	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX		MG/L	ONCE/ MONTH	INSTAN
FLUORIDE, TOTAL as F		*****	*****	*****	*****	0.9	0.9	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX		MG/L	ONCE/ MONTH	GRAB
BARIUM, TOTAL as Ba		*****	*****	*****	*****	0.01	0.01	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****		*****	REPORT 30 DA AVG	REPORT DAILY MAX		MG/L	ONCE/ MONTH	GRAB
BORON, TOTAL as B		*****	*****	*****	*****	0.2	0.2	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT 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 AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.				TELEPHONE		DATE			
STEPHEN ROGERS Operator in Responsible Charge						303-220-5399		2007	4	16	
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

EPA Form 3320-1 (Rev 3/99) Previous editions may be used.

PAGE1 OF2

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E & P WASTES
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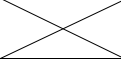
LARIMER

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
2007	3	1	2007	3	31
(20-21)		(22-23)	(24-25)		(26-27)
		(28-29)			(30-31)

UPGRADIENT ALLUVIAL GROUNDWATER

*** NO DISCHARGE ***

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		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	*****	*****		*****	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	*****	*****		*****	*****	*****	*****													
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****													
	PERMIT REQUIREMENT	*****	*****		*****	*****	*****	*****													
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****													
	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 AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.						TELEPHONE		DATE											
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DISCHARGE MONITORING REPORT (DMR)

(2-16)
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DOWNGRADIANT ALLUVIAL GROUNDWATER

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53)			QUANTITY OR CONCENTRATION (4 Card Only) (38-45)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
		(54-61)	(54-61)	(54-61)	(54-61)	(54-61)	(54-61)				
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	856	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT			ONCE/MONTH	GRAB
							DAILY MAX	MG/L			
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	40.9	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT			ONCE/MONTH	GRAB
							DAILY MAX	MG/L			
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	20.5	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT			ONCE/MONTH	GRAB
							DAILY MAX	MG/L			
SULFATE as S	SAMPLE MEASUREMENT	*****	*****	(03)	*****	*****	422.8	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	*****	REPORT			ONCE/MONTH	INSTAN
							DAILY MAX	MG/L			
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.9	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT			ONCE/MONTH	GRAB
							DAILY MAX	MG/L			
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.02	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT			ONCE/MONTH	GRAB
							DAILY MAX	MG/L			
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	0.2	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	REPORT			ONCE/MONTH	VISUAL
							DAILY MAX	MG/L			
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 Operator in Responsible Charge							303-220-5399		2007 4 16		
TYPED OR PRINTED							SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE NUMBER		YEAR MO DAY
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

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 B
DISCHARGE NUMBER

E & P WASTES (SUBR DP)
F - FINAL

Form Approved.
OMB No. 2040-0004
Approval expires

LARIMER

MONITORING PERIOD
FROM 2007 3 1 TO 2007 3 31
(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) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
THALLIUM, TOTAL as Th	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	<0.01	(19) MG/L	0	1/30	grab
01059 EFFLUENT GROSS VALUE		*****	*****		*****	*****	REPORT DAILY MAX		ONCE/MONTH GRAB		
BENZENE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	N.S.	(19) MG/L	0	1/365	grab
EFFLUENT GROSS VALUE		*****	*****		*****	*****	0.005 DAILY MAX		ONCE/YEAR GRAB		
TOLUENE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	N.S.	(19) MG/L	0	1/365	grab
EFFLUENT GROSS VALUE		*****	*****		*****	*****	1 DAILY MAX		ONCE/YEAR GRAB		
ETHYLBENZENE	SAMPLE MEASUREMENT PERMIT REQUIREMENT		*****	*****	*****	*****	N.S.	(19) MG/L	0	1/365	grab
EFFLUENT GROSS VALUE		*****	*****		*****	*****	0.7 DAILY MAX		ONCE/YEAR GRAB		
XYLENES, TOTAL	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	N.S.	(19) MG/L	0	1/365	grab
EFFLUENT GROSS VALUE		*****	*****		*****	*****	1.4 DAILY MAX		ONCE/YEAR GRAB		
	SAMPLE MEASUREMENT PERMIT REQUIREMENT	*****	*****	*****	*****	*****	*****	*****			
		*****	*****		*****	*****	*****		*****		
	SAMPLE MEASUREMENT 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 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 303-220-5399
DATE 2007 4 16

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

PERMITTEE NAME/ADDRESS
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 C
DISCHARGE NUMBER

E & P WASTES
(SUBR DP)
F - FINAL

Form Approved.
OMB No. 2040-0004
Approval expires

LARIMER

FROM
2007 3 1
(20-21) (22-23) (24-25)

TO
2007 3 31
(26-27) (28-29) (30-31)

*** 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				UNITS
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	1340	1340	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT	REPORT		MG/L	ONCE/MONTH	GRAB
SODIUM as Na	SAMPLE MEASUREMENT	*****	*****	*****	*****	49.9	49.9	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT	REPORT		MG/L	ONCE/MONTH	GRAB
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	11	11	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	250	REPORT		MG/L	ONCE/MONTH	GRAB
SULFATE as S	SAMPLE MEASUREMENT		*****	(03) MGD	*****	754.1	754.1	(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 30	REPORT		MG/L	ONCE/MONTH	GRAB
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.02	0.02	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	2	REPORT		MG/L	ONCE/MONTH	GRAB
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.2	0.2	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	5	REPORT		MG/L	ONCE/MONTH	VISUAL

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 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
303-220-5399

DATE
2007 4 16

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

EPA Form 3320-1 (Rev 3/99) Previous editions may be used.

PAGE 1 OF 2

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 C
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
2007	3	1	2007	3	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)		(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	UNITS			
THALLIUM, TOTAL as Th 01059 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.01	<0.01	(19) MG/L	0	1/30	grab
	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	*****	*****		*****	*****	*****				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			
	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 AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.		TELEPHONE		DATE		
STEPHEN ROGERS		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		303-220-5399		2007	4	16
Operator in Responsible Charge				AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED								
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)								

PERMITTEE NAME/ADDRESS
NAMEWellington Operating Co.

ADDRESS6065 S. Quebec Street, Suite 201
Englewood, CO 80111

FACILITY1590 East Larimer County Road 70
LOCATIONWellington, 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 D
DISCHARGE NUMBER

E & P WASTES
(SUBR DP)
F - FINAL

Form Approved.
OMB No. 2040-0004
Approval expires

LARIMER

FROM200731
TO2007331

MONITORING PERIOD
YEARMO DAY
200731
2007331

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

*** NO DISCHARGE ***

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL DISSOLVED SOLIDS		*****	*****	*****	*****	1252	1252	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	REPORT	REPORT			ONCE/	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DA AVG	DAILY MAX	MG/L		MONTH	
SODIUM as Na		*****	*****	*****	*****	36.6	36.6	(19)	0	1/30	grab
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	REPORT	REPORT			ONCE/	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DA AVG	DAILY MAX	MG/L		MONTH	
CHLORIDE as Cl		*****	*****	*****	*****	8.5	8.5	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	250	REPORT			ONCE/	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DA AVG	DAILY MAX	MG/L		MONTH	
SULFATE as S			*****	*****	*****	668.2	668.2	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	REPORT	REPORT			ONCE/	INSTAN
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DA AVG	DAILY MAX	MG/L		MONTH	
FLUORIDE, TOTAL as F		*****	*****	*****	*****	0.8	0.8	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	2	REPORT			ONCE/	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DA AVG	DAILY MAX	MG/L		MONTH	
BARIUM, TOTAL as Ba		*****	*****	*****	*****	0.01	0.01	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	2	REPORT			ONCE/	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DA AVG	DAILY MAX	MG/L		MONTH	
BORON, TOTAL as B		*****	*****	*****	*****	0.2	0.2	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	5	REPORT			ONCE/	VISUAL
	PERMIT REQUIREMENT	*****	*****	*****	*****	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 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		2007	4	16	
Operator in Responsible Charge						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO
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

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

COGCC 281818 & 281824
PERMIT NUMBER

050 D
DISCHARGE NUMBER

E & P WASTES
(SUBR DP)
F - FINAL


Form Approved.
OMB No. 2040-0004
Approval expires

LARIMER

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 (46-53) (54-61)				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
						30 DA AVG	DAILY MAX	MG/L			
	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
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
303-220-5399
AREA CODE NUMBER

DATE
2007 4 16
YEAR MO DAY

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

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

LARIMER

Form Approved.
OMB No. 2040-0004
Approval expires

1/4-MILE DOWNGRADIENT ALLUVIAL GROUNDWATER

FROM
(20-21)
2007
(22-23)
3
(24-25)
1

TO
(26-27)
2007
(28-29)
3
(30-31)
31

*** 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	UNITS			
TOTAL DISSOLVED SOLIDS	SAMPLE MEASUREMENT	*****	*****	*****	*****	1006	1006	(19)	0	1/30	grab
70295 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	REPORT DAILY MAX	REPORT DAILY MAX	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 DAILY MAX	REPORT DAILY MAX	MG/L	ONCE/ MONTH	GRAB	
CHLORIDE as Cl	SAMPLE MEASUREMENT	*****	*****	*****	*****	21.4	21.4	(19)	0	1/30	grab
00940 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	250 DAILY MAX	REPORT DAILY MAX	MG/L	ONCE/ MONTH	GRAB	
SULFATE as S	SAMPLE MEASUREMENT		*****	(03)	*****	528.2	528.2	(19)	0	1/30	grab
00154 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	MGD	*****	REPORT DAILY MAX	REPORT DAILY MAX	MG/L	ONCE/ MONTH	INSTAN	
FLUORIDE, TOTAL as F	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.7	0.7	(19)	0	1/30	grab
00951 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	2 DAILY MAX	REPORT DAILY MAX	MG/L	ONCE/ MONTH	GRAB	
BARIUM, TOTAL as Ba	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.020	0.020	(19)	0	1/30	grab
01007 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	2 DAILY MAX	REPORT DAILY MAX	MG/L	ONCE/ MONTH	GRAB	
BORON, TOTAL as B	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	(19)	0	1/30	grab
01022 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****		*****	5 DAILY MAX	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 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		2007 4 16			
Operator in Responsible Charge						AREA CODE NUMBER		YEAR MO DAY			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT									
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	3	1	2007	3	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)		(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				
THALLIUM, TOTAL as Th 01059 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	*****	*****	<0.01	<0.01	(19)	0	1/30	grab
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.002 30 DA AVG	REPORT DAILY MAX				
	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****	*****	*****			GRAB
	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		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					2007	4	16		
Operator in Responsible Charge			SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY

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