

State of Colorado
Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

Document Number:

2618307

Date Received:

01/26/2015

SOURCE OF PRODUCED WATER FOR DISPOSAL

Per Rule 325.c(5), this form shall be submitted for any new disposal facility and for any change in source of produced water for an existing disposal facility.

OPERATOR INFORMATION

OGCC Operator Number: <u>10373</u>	Contact Name and Telephone:
Name of Operator: <u>NGL WATER SOLUTIONS DJ LLC</u>	Name: <u>Paul Gottlob</u>
Address: <u>3773 CHERRY CRK NORTH DR #1000</u>	Phone: <u>(720) 420-5747</u> Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80209</u>	Email: <u>paul.gottlob@iptenergyservices.com</u>

DISPOSAL FACILITY INFORMATION

UIC Facility ID: 159957

Operator's Disposal Facility Name: NGL FACILITY Operator's Disposal Facility Number: C1C

Location: QtrQtr: SESE Sec: 8 Twp: 4N Range: 64W Meridian: 6

County: WELD

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 2 Deleted: 0 Added: 2

SOURCE OF PRODUCED WATER

Add Source	API Number: <u>05-123-37925-00</u>	Well Name & No: <u>70 Ranch 4-63-3-4956CH</u>
<input checked="" type="checkbox"/>	Operator Name: <u>BARRETT CORPORATION* BILL</u>	Operator No: <u>10071</u>
Delete Source	Location: QtrQtr: <u>NWSW</u> Section: <u>3</u> Township: <u>4N</u> Range: <u>63W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>NBRR</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input type="checkbox"/> Pipeline <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Both	TDS: <u>19477</u> mg/L
Add Source	API Number: <u>05-123-37931-00</u>	Well Name & No: <u>70 Ranch 4-63-03-3225CDH</u>
<input checked="" type="checkbox"/>	Operator Name: <u>BARRETT CORPORATION* BILL</u>	Operator No: <u>10071</u>
Delete Source	Location: QtrQtr: <u>NWSW</u> Section: <u>3</u> Township: <u>4N</u> Range: <u>63W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>CODL</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input type="checkbox"/> Pipeline <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Both	TDS: <u>18083</u> mg/L

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Paul Gottlob Signed: _____

Title: Reg & Eng Tech Date: 01/23/2015

COGCC Approved: *Matthew Lee* Date: 07/06/2016

CONDITIONS OF APPROVAL, IF ANY:

<u>COA Type</u>	<u>Description</u>

Attachment Check List

Att Doc Num **Name**

2618307	FORM 26 SUBMITTED
2618522	SOURCE OF PRODUCED WATER FOR DISPOSAL (Form 26)

Total Attach: 2 Files

General Comments

User Group **Comment** **Comment Date**

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Total: 0 comment(s)