

State of Colorado
Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

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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>10592</u>	Contact Name and Telephone:
Name of Operator: <u>EXCELL OPERATING LLC</u>	Name: <u>Betty Matthews</u>
Address: <u>36629 US HIGHWAY 385</u>	Phone: <u>(970) 332-3831</u> Fax: <u>(970) 332-5821</u>
City: <u>WRAY</u> State: <u>CO</u> Zip: <u>80758</u>	Email: <u>bmatthews@excell-llc.com</u>

DISPOSAL FACILITY INFORMATION

UIC Facility ID: <u>159098</u>	Operator's Disposal Facility Name: <u>CHRISTIANSON SWD 12-12</u>	Operator's Disposal Facility Number: _____
Location: QtrQtr: <u>SWNE</u> Sec: <u>12</u> Twp: <u>3S</u> Range: <u>50W</u> Meridian: <u>6</u>		
County: <u>WASHINGTON</u>		

SUBMITTED ITEM SUMMARY TOTALS:Submitted: 8 Deleted: 0 Added: 8**SOURCE OF PRODUCED WATER**

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-121-10654-00</u> Well Name & No: <u>CHRISTIANSON 21-12</u>
	Operator Name: <u>EXCELL OPERATING LLC</u> Operator No: <u>10592</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NENW</u> Section: <u>12</u> Township: <u>3S</u> Range: <u>50W</u> Meridian: <u>6</u>
	Producing Formation: <u>JSND</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: <u>2040</u> mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-121-10674-00</u> Well Name & No: <u>CHRISTIANSON 31A-12</u>
	Operator Name: <u>EXCELL OPERATING LLC</u> Operator No: <u>10592</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NWNE</u> Section: <u>12</u> Township: <u>3S</u> Range: <u>50W</u> Meridian: <u>6</u>
	Producing Formation: <u>JSND</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: <u>1868</u> mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-121-10678-00</u> Well Name & No: <u>YOUNG*J 32A-12</u>
	Operator Name: <u>EXCELL OPERATING LLC</u> Operator No: <u>10592</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>SWNE</u> Section: <u>12</u> Township: <u>3S</u> Range: <u>50W</u> Meridian: <u>6</u>
	Producing Formation: <u>JSND</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: <u>1980</u> mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-121-10680-00</u> Well Name & No: <u>CHRISTIANSON 21A - 12</u>
	Operator Name: <u>EXCELL OPERATING LLC</u> Operator No: <u>10592</u>
Delete Source <input type="checkbox"/>	Location: QtrQtr: <u>NENW</u> Section: <u>12</u> Township: <u>3S</u> Range: <u>50W</u> Meridian: <u>6</u>
	Producing Formation: <u>JSND</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: <u>1901</u> mg/L

Add Source	API Number: <u>05-121-10681-00</u>	Well Name & No: <u>CHRISTIANSON 21B-12</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>EXCELL OPERATING LLC</u>	Operator No: <u>10592</u>	
Delete Source	Location: QtrQtr: <u>NENW</u> Section: <u>12</u> Township: <u>3S</u> Range: <u>50W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	Producing Formation: <u>JSND</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both	TDS: <u>1923</u> mg/L	
Add Source	API Number: <u>05-121-10684-00</u>	Well Name & No: <u>CHRISTIANSON 21D 21D-12</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>EXCELL OPERATING LLC</u>	Operator No: <u>10592</u>	
Delete Source	Location: QtrQtr: <u>NENW</u> Section: <u>12</u> Township: <u>3S</u> Range: <u>50W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	Producing Formation: <u>JSND</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both	TDS: <u>1897</u> mg/L	
Add Source	API Number: <u>05-121-10687-00</u>	Well Name & No: <u>CHRISTIANSON 22-12</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>EXCELL OPERATING LLC</u>	Operator No: <u>10592</u>	
Delete Source	Location: QtrQtr: <u>SENW</u> Section: <u>12</u> Township: <u>3S</u> Range: <u>50W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	Producing Formation: <u>JSND</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both	TDS: <u>1711</u> mg/L	
Add Source	API Number: <u>05-121-10688-00</u>	Well Name & No: <u>CHRISTIANSON 21C-12</u>	
<input checked="" type="checkbox"/>	Operator Name: <u>EXCELL OPERATING LLC</u>	Operator No: <u>10592</u>	
Delete Source	Location: QtrQtr: <u>NENW</u> Section: <u>12</u> Township: <u>3S</u> Range: <u>50W</u> Meridian: <u>6</u>		
<input type="checkbox"/>	Producing Formation: <u>JSND</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both	TDS: <u>1854</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: Betty Matthews Signed: _____

Title: Administrator Date: 06/26/2018

COGCC Approved: *Matthew Lee* Date: 06/28/2018

CONDITIONS OF APPROVAL, IF ANY:

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

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401685806	FORM 26 SUBMITTED
401685888	Source of Produced Water Import
401685922	WATER ANALYSIS

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
UIC	Note operator comment that Christianson 21D-12 TDS is the average for the seven wells.	06/28/2018

Total: 1 comment(s)