

State of Colorado
Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

Document Number:

401537473

Date Received:

02/06/2018

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>10591</u> | Contact Name and Telephone: |
| Name of Operator: <u>AUGUSTUS ENERGY PARTNERS II LLC</u> | Name: <u>Duane Zimmerman</u> |
| Address: <u>2016 GRAND AVENUE SUITE A</u> | Phone: <u>(406) 294-5990</u> Fax: <u>(406) 294-5992</u> |
| City: <u>BILLINGS</u> State: <u>MT</u> Zip: <u>59102</u> | Email: <u>dzimmerman@augustusenergy.com</u> |

DISPOSAL FACILITY INFORMATION

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| UIC Facility ID: <u>159082</u> |
| Operator's Disposal Facility Name: <u>PINYON RIDGE FED C-1W DISPOSAL WELL</u> Operator's Disposal Facility Number: _____ |
| Location: QtrQtr: <u>NESE</u> Sec: <u>21</u> Twp: <u>3N</u> Range: <u>97W</u> Meridian: <u>6</u> |
| County: <u>RIO BLANCO</u> |

SUBMITTED ITEM SUMMARY TOTALS:Submitted: 2 Deleted: 0 Added: 2**SOURCE OF PRODUCED WATER**

| | |
|-------------------------------------|---|
| Add Source | API Number: <u>05-103-11954-01</u> Well Name & No: <u>Wiley 23-3-97 H1</u> |
| <input checked="" type="checkbox"/> | Operator Name: <u>AUGUSTUS ENERGY PARTNERS II LLC</u> Operator No: <u>10591</u> |
| Delete Source | Location: QtrQtr: <u>SWSE</u> Section: <u>23</u> Township: <u>3N</u> Range: <u>97W</u> Meridian: <u>6</u> |
| <input type="checkbox"/> | Producing Formation: <u>NBRR</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>34844</u> mg/L |
| Add Source | API Number: <u>05-103-66126-00</u> Well Name & No: <u>LLOYD-FEDERAL 22-X-17</u> |
| <input checked="" type="checkbox"/> | Operator Name: <u>MERRION OIL & GAS CORP</u> Operator No: <u>56680</u> |
| Delete Source | Location: QtrQtr: <u>SENW</u> Section: <u>17</u> Township: <u>2N</u> Range: <u>97W</u> Meridian: <u>6</u> |
| <input type="checkbox"/> | Producing Formation: <u>WEBR</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: _____ 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: Pascual R. Laborda Signed: _____Title: Permitting & Regulatory Date: 02/06/2018COGCC Approved: *Matthew Lee* Date: 11/06/2018**CONDITIONS OF APPROVAL, IF ANY:****COA Type****Description**

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Attachment Check List

| Att Doc Num | Name |
|-------------|-------------------|
| 401537473 | FORM 26 SUBMITTED |
| 401537480 | WATER ANALYSIS |

Total Attach: 3 Files

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
|--------------------------|-----------------------|----------------------------|
| | | Stamp Upon Approval |

Total: 0 comment(s)