

State of Colorado Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

Document Number:

401893991

Date Received:

01/22/2019

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: 17320

Name of Operator: CITY & COUNTY OF DENVER

Address: 8500 PENA BLVD CONCOUR A #4385

City: DENVER State: CO Zip: 80249

Contact Name and Telephone:

Name: Julie Branting

Phone: (303) 638-7484 Fax: (720) 685-9016

Email: petropro@comcast.net

DISPOSAL FACILITY INFORMATION

UIC Facility ID: 159132

Operator's Disposal Facility Name: THIRD CREEK WATERFLOOD

Operator's Disposal Facility Number:

Location: QtrQtr: NESW Sec: 18 Twp: 2S Range: 65W Meridian: 6

County: DENVER

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 4 Deleted: 1 Added: 3

SOURCE OF PRODUCED WATER

Add Source <input checked="" type="checkbox"/>	API Number: 05-031-06388-00	Well Name & No: CHAMPLIN 117 AMOCO A 1
	Operator Name: CITY & COUNTY OF DENVER	Operator No: 17320
Delete Source <input type="checkbox"/>	Location: QtrQtr: SWSE Section: 7 Township: 2S Range: 65W Meridian: 6	
	Producing Formation: JSND 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: 3091 mg/L	
Add Source <input type="checkbox"/>	API Number: 05-031-06399-00	Well Name & No: CHAMPLIN 117 AMOCO A 2
	Operator Name: CITY & COUNTY OF DENVER	Operator No: 17320
Delete Source <input checked="" type="checkbox"/>	Location: QtrQtr: NESW Section: 7 Township: 2S Range: 65W Meridian: 6	
	Producing Formation: JSND Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: 05-031-06413-00	Well Name & No: CHAMPLIN 117 AMOCO A-4
	Operator Name: CITY & COUNTY OF DENVER	Operator No: 17320
Delete Source <input type="checkbox"/>	Location: QtrQtr: SWNW Section: 7 Township: 2S Range: 65W Meridian: 6	
	Producing Formation: JSND 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: 3085 mg/L	
Add Source <input checked="" type="checkbox"/>	API Number: 05-031-06414-00	Well Name & No: CHAMPLIN 117 AMOCO A-5
	Operator Name: CITY & COUNTY OF DENVER	Operator No: 17320
Delete Source <input type="checkbox"/>	Location: QtrQtr: NESE Section: 7 Township: 2S Range: 65W Meridian: 6	
	Producing Formation: JSND 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: 3091 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: Julie Branting Signed: _____

Title: Agent Date: 01/22/2019

COGCC Approved:  Date: 01/23/2019

CONDITIONS OF APPROVAL, IF ANY:

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

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401893991	FORM 26 SUBMITTED
401913832	WATER ANALYSIS

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
UIC	Returned to DRAFT so operator could make changes.	01/22/2019

Total: 1 comment(s)