

# State of Colorado Oil and Gas Conservation Commission

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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>10705</u>	Contact Name and Telephone:
Name of Operator: <u>EVERGREEN NATURAL RESOURCES LLC</u>	Name: <u>Mackenzie Smith</u>
Address: <u>1875 LAWRENCE ST STE 1150</u>	Phone: <u>(303) 2848820</u> Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>mackenzie.smith@enrllc.com</u>

### DISPOSAL FACILITY INFORMATION

UIC Facility ID: <u>159094</u>	Operator's Disposal Facility Name: <u>HILL RANCH 14-12 WD</u>	Operator's Disposal Facility Number: _____
Location: QtrQtr: <u>SWSW</u> Sec: <u>12</u> Twp: <u>34S</u> Range: <u>66W</u> Meridian: <u>6</u>		
County: <u>LAS ANIMAS</u>		

### SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 8 Deleted: 0 Added: 8

### SOURCE OF PRODUCED WATER

Add Source	API Number: <u>05-071-06665-00</u>	Well Name & No: <u>LORENCITO 2-8-34-66</u>
<input checked="" type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u>	Operator No: <u>10705</u>
Delete Source	Location: QtrQtr: <u>NWNE</u> Section: <u>8</u> Township: <u>34S</u> Range: <u>66W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>RT-VJ</u> 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	API Number: <u>05-071-06671-00</u>	Well Name & No: <u>TAD POLE 21-12</u>
<input checked="" type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u>	Operator No: <u>10705</u>
Delete Source	Location: QtrQtr: <u>NENW</u> Section: <u>12</u> Township: <u>34S</u> Range: <u>66W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>VRMJ</u> 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	API Number: <u>05-071-06676-00</u>	Well Name & No: <u>MARMOT 41-02</u>
<input checked="" type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u>	Operator No: <u>10705</u>
Delete Source	Location: QtrQtr: <u>NENE</u> Section: <u>2</u> Township: <u>34S</u> Range: <u>66W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>VRMJ</u> 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	API Number: <u>05-071-06678-00</u>	Well Name & No: <u>OTTER 44-02</u>
<input checked="" type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u>	Operator No: <u>10705</u>
Delete Source	Location: QtrQtr: <u>SESE</u> Section: <u>2</u> Township: <u>34S</u> Range: <u>66W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>VRMJ</u> 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

<b>Add Source</b>	API Number: <u>05-071-06679-00</u>	Well Name & No: <u>HORNY TOAD 21-01</u>
<input checked="" type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u>	Operator No: <u>10705</u>
<b>Delete Source</b>	Location: QtrQtr: <u>NENW</u> Section: <u>1</u> Township: <u>34S</u> Range: <u>66W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>VRMJ</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>3300</u> mg/L
<b>Add Source</b>	API Number: <u>05-071-08856-00</u>	Well Name & No: <u>TORTUGA 14-2 14-2</u>
<input checked="" type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u>	Operator No: <u>10705</u>
<b>Delete Source</b>	Location: QtrQtr: <u>SWSW</u> Section: <u>2</u> Township: <u>34S</u> Range: <u>66W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>VRMJ</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>4000</u> mg/L
<b>Add Source</b>	API Number: <u>05-071-08857-00</u>	Well Name & No: <u>SNAKE 31-11</u>
<input checked="" type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u>	Operator No: <u>10705</u>
<b>Delete Source</b>	Location: QtrQtr: <u>NWNE</u> Section: <u>11</u> Township: <u>34S</u> Range: <u>66W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>VRMJ</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>3900</u> mg/L
<b>Add Source</b>	API Number: <u>05-071-08862-00</u>	Well Name & No: <u>FROG 13-12</u>
<input checked="" type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u>	Operator No: <u>10705</u>
<b>Delete Source</b>	Location: QtrQtr: <u>NWSW</u> Section: <u>12</u> Township: <u>34S</u> Range: <u>66W</u> Meridian: <u>6</u>	
<input type="checkbox"/>	Producing Formation: <u>VRMJ</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>4630</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: Mackenzie Smith Signed: \_\_\_\_\_

Title: Production Engineer Date: \_\_\_\_\_

COGCC Approved: \_\_\_\_\_ Date: \_\_\_\_\_

**CONDITIONS OF APPROVAL, IF ANY:**

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

**Attachment List**

<u>Att Doc Num</u>	<u>Name</u>
402882379	WATER ANALYSIS
402909299	Source of Produced Water Import

Total Attach: 2 Files

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
UIC	RETURNED TO DRAFT: RTD for facility info correction	12/15/2021

Total: 1 comment(s)