State of Colorado
Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

SOURCE OF PRODUCED WATER FOR DISPOSAL

FOR OGCC USE ONLY

Document Number: 403532562

Date Received:

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: 10539

Name of Operator: UTAH GAS OP LTD DBA UTAH GAS CORP

Address: 760 HORIZON DRIVE STE 400

City: GRAND JUNCTION   State: CO   Zip: 81506

Contact Name and Telephone:

Name: April Mestas

Phone: (970) 260-1864   Fax: ( )

Email: amestas@utahgascorp.com

DISPOSAL FACILITY INFORMATION

UIC Facility ID:

Operator's Disposal Facility Name: Operator's Disposal Facility Number:

Location: QtrQtr: Sec: Twp: Range: Meridian:

County:

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 5   Deleted: 5   Added: 0

SOURCE OF PRODUCED WATER

Add Source ☐
API Number: 05-103-09167-00   Well Name & No: HH 9119
Operator Name: UTAH GAS OP LTD DBA UTAH GAS CORP   Operator No: 10539
Delete Source ☒
Location: QtrQtr: NWNW   Section: 1   Township: 2S   Range: 104W   Meridian: 6
Producing Formation: DKTA   Analysis Attached? ☐ Yes ☒ No
Transported to disposal site via ☐ Pipeline ☒ Truck ☐ Both   TDS: _____ mg/L

Add Source ☐
API Number: 05-103-09167-00   Well Name & No: HH 9119
Operator Name: UTAH GAS OP LTD DBA UTAH GAS CORP   Operator No: 10539
Delete Source ☒
Location: QtrQtr: NWNW   Section: 1   Township: 2S   Range: 104W   Meridian: 6
Producing Formation: MNCS   Analysis Attached? ☐ Yes ☒ No
Transported to disposal site via ☐ Pipeline ☒ Truck ☐ Both   TDS: _____ mg/L

Add Source ☐
API Number: 05-103-09269-00   Well Name & No: HH 9108
Operator Name: UTAH GAS OP LTD DBA UTAH GAS CORP   Operator No: 10539
Delete Source ☒
Location: QtrQtr: NESW   Section: 11   Township: 2S   Range: 104W   Meridian: 6
Producing Formation: DKTA   Analysis Attached? ☐ Yes ☒ No
Transported to disposal site via ☐ Pipeline ☒ Truck ☐ Both   TDS: _____ mg/L

Add Source ☐
API Number: 05-103-09985-00   Well Name & No: HELLS HOLE 9117
Operator Name: UTAH GAS OP LTD DBA UTAH GAS CORP   Operator No: 10539
Delete Source ☒
Location: QtrQtr: NWNW   Section: 2   Township: 2S   Range: 104W   Meridian: 6
Producing Formation: MNCS   Analysis Attached? ☐ Yes ☒ No
Transported to disposal site via ☐ Pipeline ☒ Truck ☐ Both   TDS: _____ mg/L

Add Source	API Number: 05-103-10017-00	Well Name & No: HELLS HOLE 9126	
☐	Operator Name: UTAH GAS OP LTD DBA UTAH GAS CORP		Operator No: 10539
Delete Source	Location: QtrQtr: SWNW Section: 15 Township: 2S Range: 104W Meridian: 6		
☒	Producing Formation: DKTA Analysis Attached? ☐ Yes ☒ No		
	Transported to disposal site via ☐ Pipeline ☒ Truck ☐ 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: Kris Meil   Signed: _____

Title: Consultant   Date: _____

COGCC Approved: _____   Date: _____

CONDITIONS OF APPROVAL, IF ANY:

COA Type	Description
0 COA	

Attachment List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)