

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>96155</u>	Contact Name and Telephone:
Name of Operator: <u>WHITING OIL & GAS CORPORATION</u>	Name: <u>Pauleen Tobin</u>
Address: <u>1700 BROADWAY STE 2300</u>	Phone: <u>(303) 837-1661</u> Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80290</u>	Email: <u>PollyT@whiting.com</u>

DISPOSAL FACILITY INFORMATION

UIC Facility ID: <u>159979</u>	Operator's Disposal Facility Name: <u>HORSETAIL</u>	Operator's Disposal Facility Number: <u>19N-1924M-R SWD</u>
Location: QtrQtr: <u>SWSE</u> Sec: <u>19</u> Twp: <u>10N</u> Range: <u>57W</u> Meridian: <u>6</u>	County: <u>WELD</u>	

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 6 Deleted: 0 Added: 6

SOURCE OF PRODUCED WATER

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-123-19400-00</u> Well Name & No: <u>BRENNAN 1</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u> Operator No: <u>96155</u>
	Location: QtrQtr: <u>NWNW</u> Section: <u>32</u> Township: <u>10N</u> Range: <u>58W</u> Meridian: <u>6</u>
	Producing Formation: <u>DSND</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 <input checked="" type="checkbox"/>	API Number: <u>05-123-32488-02</u> Well Name & No: <u>Chalk Bluffs 36-13H</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u> Operator No: <u>96155</u>
	Location: QtrQtr: <u>NWSW</u> Section: <u>36</u> Township: <u>10N</u> Range: <u>60W</u> Meridian: <u>6</u>
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-123-36053-00</u> Well Name & No: <u>Church 36-2523H</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u> Operator No: <u>96155</u>
	Location: QtrQtr: <u>SESW</u> Section: <u>36</u> Township: <u>10N</u> Range: <u>60W</u> Meridian: <u>6</u>
	Producing Formation: <u>NBRR</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 <input checked="" type="checkbox"/>	API Number: <u>05-123-36647-00</u> Well Name & No: <u>Horsetail 07-0611H</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>WHITING OIL & GAS CORPORATION</u> Operator No: <u>96155</u>
	Location: QtrQtr: <u>LOT2</u> Section: <u>7</u> Township: <u>10N</u> Range: <u>57W</u> Meridian: <u>6</u>
	Producing Formation: <u>NBRR</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: 05-123-39383-00	Well Name & No: Horsetail 02D-0204
<input checked="" type="checkbox"/>	Operator Name: WHITING OIL & GAS CORPORATION	Operator No: 96155
Delete Source	Location: QtrQtr: LOT4 Section: 2 Township: 10N Range: 57W Meridian: 6	
<input type="checkbox"/>	Producing Formation: NBRR	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: 05-123-40408-02	Well Name & No: Cottonwood 08E-0504
<input checked="" type="checkbox"/>	Operator Name: WHITING OIL & GAS CORPORATION	Operator No: 96155
Delete Source	Location: QtrQtr: SWNW Section: 8 Township: 9N Range: 57W Meridian: 6	
<input type="checkbox"/>	Producing Formation: NBRR	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

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Pauleen Tobin Signed: _____

Title: Engineering Tech II Date: 03/11/2015

COGCC Approved: *Matthew Lee* Date: 12/04/2015

CONDITIONS OF APPROVAL, IF ANY:

COA Type	Description

Attachment Check List

Att Doc Num	Name
2437521	FORM 26 SUBMITTED
2437522	LIST OF WELLS
400877549	Source of Produced Water Import

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)