|  |
| --- |
| For Office Use Only |
| (If Land Treatment/Burial Method Used) |
| PIT ID# \_\_\_ \_\_\_ P \_\_\_ \_\_\_ \_\_\_ \_\_\_ |
| Status | Date | Reviewed by |
|  |  |  |
|  |  |  |
|  |  |  |

DNR/OFFICE OF CONSERVATION

ENGINEERING DIVISION

ENG-15c Rev 6/11

(See Instruction Page)

TYPE OR PRINT

E&P WASTE UNAUTHORIZED DISCHARGE/DISPOSAL NOTIFICATION

|  |
| --- |
| PART I - GENERAL INFORMATION |
| Operator Name: |       | Operator Code: |       |
| Mailing Address: |       |
| Contact Name: |       | Phone: | (     )     -      |
| Facility Identification: |       |
| Well Name & No.(Nearest Associated Well) |       | Serial No.: |       |
| Field: |       | Field Code: |       |
| Parish: |       | Parish Code: |       |
| Location Description | Latitude     °     ’      ” | Longitude     °     ’      ” | Section      | Township      | Range      |
| **PART II - DISCHARGE INFORMATION** |
| Discharge Date |       | Additional Comments:      |
| Report Date(See Back Page for Details) |       |  |
| **Type and Volume (Check all that apply/Report vol. & units):** | Area of Impact: |
| [ ] OIL | Volume: |       |  | Length      ft. | Width      ft. | Ave. Depth      ft. |
| [ ] SALTWATER | Volume: |       |  |  |  |  |
| [ ] OTHER | Volume: |       |  | Location of Discharge: |
| If other, Describe: |       | Latitude     °     ’      ” | Longitude     °     ’      ” |
| Total Volume Recovered: |       |  |  |  |
| Factors and/or Causes Resulting in the Accumulations or Discharge of E&P Waste (Attach additional sheet if necessary):      |
| Action Taken to immediately Control/Contain Spill (Attach additional sheet if necessary):      |
| Measures taken to prevent future spills:      |
| **PART III – CLEANUP METHOD(S)** |
| **Select Method(s) Utilized in Cleanup: (Check Method(s) used, record Volume and select appropriate Units)** |
| [ ]  Burial/Trenching (Must Submit Closure Data – See Instr. Page) | Volume: |       |  |
| [ ]  Land Treatment (Must Submit Closure Data – See Instr. Page) | Volume: |       |  |
| [ ]  Return to Production Facility | Volume: |       |  |
| [ ]  Commercial Waste Facility (Must Submit Form UIC-28) | Volume: |       |  |
| ***Note: A list of approved offsite commercial waste facilities may be obtained from Injection & Mining Division by calling (225) 342-5515.*** |
|  |
| **I attest that the cleanup in question was performed in accordance with LAC 43:XIX.311. If burial /trenching is checked above, I also attest that the burial cell is at least five (5) feet above the *seasonal high water table*, and at least five (5) feet *below ground level* and *covered with native soil*.** |
| Print or Type Name      | Signature of Responsible Party | Date      |