



WATER PROTECTION BUREAU

Agency Use

Permit No.:

Date Rec'd

Amount Rec'd

Check No.

Rec'd By

FORM NOI-31

Notice of Intent (NOI) Form Produced Water General Permit (PWGP) MTG310000

READ BEFORE COMPLETING THIS FORM: Before completing this form (NOI-31), oil and natural gas operators need to read the Produced Water General Permit (PWGP), particularly Parts I and II. This NOI Form must be completed by owners or operators of facilities which discharge produced water to ephemeral drainages and are seeking coverage under the MPDES PWGP (MTG310000). Please read the attached instructions before completing this form. You must print or type legibly; forms that are not legible, incomplete, or unsigned will be returned. You must maintain a copy of the completed NOI Form for your records.

Section A - Application Status (Check one):

- Input boxes for New, Resubmitted, Renewal, and Modification with corresponding permit number fields and a note to discuss modification in Section J.

Section B - Facility or Site Information:

Facility Name: Facility Location: Nearest City or Town: Zip Code: County: Township: Range: Section: Latitude: Longitude: Is this facility or site located on an Indian Reservation? No Yes (See instructions for further information)

Section C - Applicant (Owner/Operator) Information:

Owner or Operator Name: Mailing Address: City, State, and Zip Code: Phone Number: Email Address: Is the person listed above the facility or site owner? Yes No Status of Applicant (Check one) Federal State Private Public Other (specify)

Section D – Standard Industrial Classification (SIC) Codes:

Provide at least one SIC code which best reflects the products or services provided by the facility or site described in Section B.

Code	A. Primary	Code	B. Second
1		2	

Section E – Authorized Representative: Montana regulations require all reports required by the permit or other information requested by DEQ must be signed by the applicant or a duly authorized representative [ARM 17.30.1323(2)]. By filling out this section the applicant designates the person or position listed below as the duly authorized representative for this permit. Ideally, the authorized representative will have overall responsibility for the specific oil and gas operation and/or environmental matters. The specific rules regarding the designation of an authorized representative are outlined in the instructions included with this form. If the applicant does not wish to designate a duly authorized representative at this time, leave this section blank and select “No” below.

Name and Title, or Position Title: _____

Company Name (if different than the applicant): _____

Mailing Address: _____

City, State, and Zip Code: _____

Phone Number: () _____ Email Address: _____

No duly authorized representative for this permit is designated at this time.

Section F – Facility, Treatment Process, and Flow Rate Description: Please describe the nature of your operations, the source(s) of produced water, and the treatment process. Include a Facility Design Diagram which details how oil & gas and produced water moves through the facility, the layout of the facility, any treatment processes, and the outfall location(s). On the diagram label where effluent monitoring will take place (outfall). The outfall is the discharge location prior to produced water entering the receiving water and after all treatment.

Facility Design Diagram Attached

Total Discharge Rate (gallons per minute (gpm): _____ (should match value in PW-1 Form)

Section G – Receiving Ephemeral Surface Water(s):

For each outfall location provide the latitude and longitude to the nearest second and the name of the receiving ephemeral water. If the receiving ephemeral water is unnamed, please indicate the closest named drainage the receiving ephemeral water flows into (i.e. unnamed tributary to Clear Creek). Attach additional sheets if necessary for more outfalls. In addition, certify below that the receiving ephemeral water(s) listed below are in fact ephemeral, and no discharge of produced water to intermittent or perennial waters will occur.

Outfall Number	Latitude	Longitude	Receiving Ephemeral Surface Waters (Name)
001			
002			
003			
004			

The receiving waters listed above are ephemeral and no discharge of produced water to intermittent or perennial waters will occur.

MAP: Attach a USGS topographic quadrangle map or aerial photo extending one mile beyond the property boundaries of the site or facility/activity identified in Section B depicting the facility or activity boundaries, major drainage patterns, and the receiving surface waters stated above. The scale of this map may need to be different than the map required with the PW-1 Form.

Map Attached

Section H – Water Quality Analysis: Applicants seeking coverage under the PWGP must conduct a water quality analysis of the produced water proposed to be discharged to ensure the water meets the water quality requirements established in the PWGP. The analysis must be done in accordance with EPA test procedures (40 CFR Part 136). Sample for each parameter listed in the table below, ensuring any appropriate required reporting value (RRV) from DEQ-7 is met and the watering criteria maximum concentration in the table is not exceeded. For any parameters that are reported as below the RRV, indicate non-detect (ND) in the table and include the RRV for that parameter. If no RRV is listed, 1/10 of the maximum concentration should be used. Applicants must complete the table below and certify that the proposed discharge meets the water quality requirements established in the PWGP. The sample analysis date must be within 2 years prior to the date on this NOI. Please include the lab analysis with the NOI package.

The produced water proposed to be discharged meets the water quality requirements of the PWGP.

Wildlife and Livestock Drinking Water Requirements				
Parameter	Units	Type ⁽¹⁾	Maximum Allowable Concentration	Sample Results (Include Lab Analysis)
Arsenic, total recoverable	mg/L	Grab	0.5	
Boron	mg/L	Grab	5.0	
Copper, total recoverable	mg/L	Grab	0.5	
Electric Conductivity (EC)	µS/cm ⁽²⁾	Grab	11,000	
Fluoride	mg/L	Grab	3.0	
Lead, total recoverable	mg/L	Grab	0.1	
Nitrate, as Nitrogen (N)	mg/L	Grab	100	
Nitrite, as Nitrogen (N)	mg/L	Grab	10	
Oil and Grease	mg/L	Grab	10	
pH	s. u.	Grab	6.0 – 9.0	
Selenium, total recoverable	mg/L	Grab	0.05	
Sodium	mg/L	Grab	2,250	
Sodium Adsorption Ratio (SAR)	None	Calculated	NA ⁽³⁾	
Sulfate	mg/L	Grab	2,500	
Total Dissolved Solids (TDS)	mg/L	Grab	5,000	
Zinc, total recoverable	mg/L	Grab	25.0	

Footnotes:
 1. See Definition section at end of permit for explanation of terms.
 2. µS/cm – microSiemens/cm.
 3. NA – Not applicable. No maximum allowable concentration in permit.

Section I – New Sources:

This section must be completed by any proposed new (does not yet exist and will be constructed and initiating operation) oil and gas facility/activity seeking coverage under the PWGP).

A. Describe the potential impacts of the proposed facility/activity on unique ecological resources, species of special concern, including vegetation, wildlife, fish or aquatic resources, or habitat. Attach analysis from the Montana Natural Heritage Program (MNHP) and any applicable maps or analysis from the Natural Resource Information System (NRIS).

B. Describe the potential impact of the proposed facility/activity on any historical, cultural, or archeological resources. Attach analysis from the Montana State Historic Preservation Office (SHPO).

Section J – Supplemental Information (*For Permit Modification Only – leave blank except for modification*):

Section K – CERTIFICATION

Applicant Information: This form must be completed, signed, and certified as follows:

- For a corporation, by a principal officer of at least the level of vice president;
- For a partnership or sole proprietorship, by a general partner or the proprietor, respectively; or
- For a municipality, state, federal, or other public facility, by either a principal executive officer or ranking elected official.

All Applicants Must Complete the Following Certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information; including the possibility of fine and imprisonment for knowing violations. [75-5-633, MCA].

Name (Type or Print)**Title (Type or Print)****Phone Number****Signature****Date Signed**

DEQ will not process this form until all of the requested information is supplied, and the appropriate fees are paid. Return this NOI-31 Form, a complete and signed PW-1 Form, and the applicable fee to:

Department of Environmental Quality
Water Protection Bureau
PO Box 200901
Helena, MT 59620-0901
(406) 444-3080

INSTRUCTIONS FOR

Form NOI-31 – Produced Water Notice of Intent Form for Oil and Gas Produced Water Discharge to Ephemeral Drainages under the Produced Water General Permit (MTG310000)

IMPORTANT Your NOI Form will not be considered complete unless you answer every question on this form. If an item does not apply to you, enter “NA” (not applicable) to show that you considered the question. Responses must be self-explanatory and must not refer exclusively to attached maps, plans, or documents. The appropriate fees must accompany this NOI Form. Do not submit these items separately. Mail this NOI Form to the DEQ address stated on the NOI Form. Forms and additional information on produced water discharges are available from the Water Protection Bureau at (406) 444-3080 or on the DEQ website at: <http://www.deq.mt.gov>

Please type or print legibly; NOI Forms that are not legible, incomplete, or unsigned will be returned.

SPECIFIC ITEM INSTRUCTIONS

Section A – Application Status

Check the box that applies and provide the requested information. If an NOI Form has not been previously submitted for this facility, check the box next to “New”. DEQ will assign a permit number when you submit the NOI Form. The permit number is a 9-digit code beginning with MTG31 that is unique to your facility or site. If you submitted a NOI Form and DEQ returned it to you as deficient or incomplete, check the box next to “Resubmitted”. If your current discharge permit or authorization is due to expire and you want to maintain coverage, check the box next to “Renewal”. If there is a change in the facility or site information (Section J), check the box next to “Modification.” If an NOI Form has been submitted and returned as incomplete the permit number appears in the upper right hand corner of the NOI Form and on any correspondence sent to you by DEQ. The permit number must be included on any correspondence with DEQ regarding this facility.

Section B – Facility or Site Information

Identify the name of the facility or activity at this site that is the source of produced water discharge. The site is the land or property where the facility or activity is physically located or conducted, including other land used in connection with the facility or activity. Give the address or location of this facility or site and the geographical coordinate information. Sources for geographical coordinate information include: a “Global Positioning System (GPS)” handheld navigation device, a USGS topographic map, and/or “Topofinder” from <http://nris.mt.gov/gis/>. The location may be a physical mailing address or description of how the site may be accessed (PO Boxes are not acceptable).

If the facility or site is located on or within the boundaries of a federally recognized Indian Reservation the Montana DEQ is not the permitting authority. You must contact the Environmental Protection Agency (EPA) Montana’s Region 8 Operation Office in Helena at (406) 457-5000.

Section C – Applicant (Owner/Operator) Information

Give the name, as it is legally referred to, of the person, business, public organization, or other entity that owns, operates, controls or supervises the site or activity described in Section B of this form. The permit will be issued to the entity identified in this section (Section C). The owner or operator assumes all liability for discharges from the site and compliance with the terms and conditions of the permit and applicable regulations. If the owner or operator is other than a person or government entity it must be registered with the Montana Secretary of State’s office.

Section D – Nature of the Business or Activity and Standard Industrial Classification (SIC)

List in descending order of significance, the four-digit SIC codes that best describes your facility in terms

of the principal products or services you produce or provide. Indicate only one SIC code in the space provided in each box (i.e., only one primary SIC code). A complete list of SIC codes can be obtained from the Internet at <http://www.census.gov/epcd/www/naics.html> or in paper form from the document entitled "Standard Industrial Classification Manual", Office Management and Budget, 1987. SIC Code listings may also be found at <http://www.osha.gov/pls/imis/sicsearch.html> . At least one SIC code must be provided

Section E – Authorized Representative

Pursuant to ARM 17.30.1323(2) all reports required by permits and other information requested by DEQ must be signed by a person described in ARM 17.30.1323(1) (appropriate signatory for this NOI-31) or by a duly authorized representative of that person. A person is a duly authorized representative only if:

1. The authorization is made in writing by a person described in [ARM 17.30.1323(1)] (appropriate signatory for this NOI-31);
2. The authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity such as the position of plant manager, operator of a well or a well field, superintendent, position of equivalent responsibility, or an individual or position having overall responsibility for environmental matters for the company (a duly authorized representative may thus be either a named individual or any individual occupying a named position); and
3. The written authorization is submitted to DEQ.

If the authorization made in this NOI is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, a new authorization satisfying the requirements above must be submitted to DEQ prior to or together with any reports, information, or applications to be signed by an authorized representative.

Any authorized representative shall make the following certification:

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Section F – Facility, Treatment Process, and Flow Rate Description

Please describe the nature of your operations, the source(s) of produced water, and the treatment process. Include a Facility Design Diagram which details how oil & gas and produced water moves through the facility, the layout of the facility, any treatment processes, and the outfall location(s). On the diagram label where effluent monitoring will take place (outfall). The outfall is the discharge location prior to produced water entering the receiving water and after all treatment.

Section G – Receiving Ephemeral Surface Water(s)

An outfall location is considered to be a discrete channel, conveyance, structure, or flow path from which produced water discharge leaves the facility, prior to discharge into state surface waters and after all treatment. Water bodies used solely for treating, transporting, or impounding pollutants shall not be considered surface water. Provide the following information in the table on the NOI Form:

1. Assign a number to each outfall starting with 001. For existing permittees, ensure outfall numbers used are consistent with those identified in the past for the same outfall.
2. Latitude/longitude can be derived from a USGS 7.5 minute topographic map and/or “Topofinder” at <http://nris.mt.gov/gis/> or from a “GPS” handheld navigation device. Latitude and longitude must be accurate to the nearest second.
3. Give the name of the ephemeral surface waters that receive the discharge. If the receiving water is unnamed, please indicate the closest named drainage the receiving water flows into (i.e. unnamed tributary to Clear Creek).
4. Certify that the receiving waters listed below are in fact ephemeral, and no discharge of produced water to intermittent or perennial waters will occur.
5. Please attach a USGS topographic quadrangle map or USGS-based topographic map or an aerial photo extending one mile beyond the property boundaries of the site or facility/activity identified in Section B depicting the facility or activity boundaries, and the receiving surface waters stated above.

If additional space is necessary for more outfall locations, attach additional sheets with the requested information.

Section H – Water Quality Analysis Results

Applicants seeking coverage under the PWGP must conduct a water quality analysis of the produced water proposed to be discharged to ensure the water meets the water quality requirements established in the PWGP. The analysis must be done in accordance with EPA test procedures (40 CFR Part 136). Sample for each parameter listed in the table below, ensuring any appropriate required reporting value (RRV) from DEQ-7 is met and the watering criteria maximum concentration in the table is not exceeded. For any parameters that are reported as below the RRV, indicate non-detect (ND) in the table and include the RRV for that parameter. If no RRV is listed, 1/10 of the maximum concentration should be used. Applicants must complete the table below and certify that the proposed discharge meets the water quality requirements established in the PWGP. The sample analysis date must be within 2 years prior to the date on this NOI. Please include the lab analysis with the NOI package.

Section I – New Sources

This section must be completed if your oil and gas facility/activity does not yet exist and will be constructed and initiating operation.

A. Contact the Montana Natural Heritage Program (MNHP), <http://mtnhp.org/>, and request a project review for the proposed sand operation. Attach the MNHP analysis to the NOI Form.

B. Contact the Montana State Historic Preservation Office (SHPO), <http://mhs.mt.gov/shpo/>, and request a project review for the proposed operation. Attach the SHPO analysis to the NOI Form.

Section J – Supplemental Information

Use this space only to provide additional information explaining the basis for a proposed permit modification being submitted.

Section K – Certification

The NOI Form certification must be completed by the applicant (owner/operator) responsible for the authorization as identified in Section C, and as described in ARM 17.30.1323.

The NOI-31 Form and other forms for oil and natural gas produced water discharge permitting or authorization are available at Montana Department of Environmental Quality's Water Protection Bureau website: <http://deq.mt.gov/wqinfo/MPDES/ProducedWater.mcp>. If you have any questions concerning how to fill out this form, or other forms related to the Montana Pollutant Discharge Elimination System (MPDES) discharge permitting program, please contact DEQ at:

Water Protection Bureau
1520 East Sixth Avenue
P.O. Box 200901
Helena, MT 59620-0901
Phone: (406) 444-3080
Fax: (406) 444-1374