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May 24, 2011

Via Overnight Mail and Email

Ms. Jacqueline Morrison (3LC00) Land and Chemicals Division U.S. Environmental Protection Agency, Region III 1650 Arch Street Philadelphia, PA 19103

Re: Response to Request for Information on Marcellus Shale Flowback Water

Dear Ms. Morrison:

This letter is in response to the United States Environmental Protection Agency's ("EPA") request for information dated May 12, 2011 ("RFI") regarding Gas Extraction Wastewater in the Marcellus Shale of Pennsylvania. More specifically, our reply is solely and directly related to that wastewater generated by gas extraction operations owned or operated by Talisman Energy USA Inc. ("Talisman").

Talisman respects the mission of the EPA and is committed to conducting its business safely, as well as in a manner which is environmentally, socially and ethically responsible -- values which are upheld by our employees. Talisman supports all Pennsylvania state regulatory efforts to ensure that wastewater, from any source related to our operations, is properly managed and disposed of in accordance with the governing regulations.

As a company, we are in full support of these public concerns and we appreciate the EPA's interest in the issues related to wastewater disposal. Talisman takes regulatory compliance very seriously and continues to work cooperatively with the Pennsylvania Department of Environmental Protection ("DEP") on various gas extraction issues and concerns. We encourage continued cooperation between DEP and the EPA in their respective efforts to protect human health and the environment, to streamline regulations, and to deliver a vital source of energy to Pennsylvania and the Nation.

We look forward to our continued work with the DEP, the EPA, industry, environmental organizations, and policy makers as, together, we strive to ensure that wastewater disposal practices are managed appropriately throughout the Marcellus Shale in Pennsylvania.

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General Objections

Talisman asserts the following general privileges, protections, and objections with respect to the RFI and each information request therein.

1. Talisman asserts that nine business days is an unrealistically short amount of time to respond to the RFI and does not reasonably reflect the volume of responsive information that EPA has requested. Therefore, Talisman objects to the deadline and reserves the right to supplement this response with any materials that it was unable to submit by the requested deadline.

2. Talisman asserts all privileges and protections it has in regard to the documents and other information sought by EPA, including the attorney-client privilege, the attorney work product doctrine, all privileges and protections related to materials generated in anticipation of litigation, the settlement communication protection, the confidential business information ("CBF") and trade secret protections, and any other privilege or protection available to it under law.

3. In the event that a document containing CBI or trade secrets has been inadvertently included among the documents provided in response to the RFI, Talisman asks that any such documents be returned to Talisman immediately so that Talisman may resubmit the document in accordance with the applicable requirements for the submission of confidential information. Talisman states for the record that it is not thereby waiving any available privilege or protection as to any such document.

4. Talisman objects to any requirement to produce documents or information already in the possession of a government agency, including the DEP or already in the public domain. Notwithstanding this objection, and without waiving it, Talisman is producing information that is otherwise available to EPA.

5. Talisman objects to Instruction 3 on the ground that EPA has no authority to impose a continuing obligation of Talisman to supplement these responses. Talisman will, of course, comply with any lawful requests that are within EPA's authority.

6. Talisman objects to the definition of "you" contained in Enclosure 2 because the term is overbroad and purports to require Talisman to seek and collect information and documents in the possession, custody, or control of individuals not within the custody or control of Talisman. Notwithstanding this objection, and without waiving it, Talisman has undertaken a diligent and good faith effort to locate and furnish documents and information in its possession, custody, and control that are responsive to the RFI.

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Responses to the Request for Information

1. Provide a list identifying each state permitted Well that you own or operate in EPA Region III and include the latitude and longitude for each Well and identify whether each well is actively being drilled, is completed, or is producing natural gas.

RESPONSE:

Talisman is providing information regarding Wells that it owns or operates in Pennsylvania that are permitted by the state and are actively being drilled, are complete, or are producing gas. Although not within the scope of the RFI, Talisman is also providing EPA information on wells that Talisman has obtained permits for, but has not yet drilled.

Talisman's Wells fall under four main classifications:

- (a) Wells in which Talisman holds a 100% ownership interest and has drilled, completed and produced to date - See Appendix 1(a);
- (b) Wells in which Talisman holds a 100% ownership interest and has obtained permits but has not yet drilled See Appendix 1(b);
- (c) Wells in which Talisman holds a 50% ownership interest that were drilled and completed by a third party entity and have been transferred to Talisman to manage production operations - See Appendix 1(c); and
- (d) Wells that have been, or are presently in process of being drilled, completed and produced by a third party and where Talisman retains an ownership interest without an operating interest - See Appendix 1(d).
- 2. Provide all Pennsylvania "26R" forms completed and submitted to the Commonwealth of Pennsylvania for all Gas Extraction Wastewaters associated with your Wells for the calendar year 2010, including complete Chemical Analysis Attachments associated with each.

RESPONSE:

Talisman has attached copies of its 26R forms that were submitted to the DEP in 2010 for all Gas Extraction Wastewaters (See Appendix 2). By letter dated May 13, 2011 and received on May 20, 2011, the DEP notified Talisman that a portion of its submitted 26R forms that were filed under the 802 waste code should have been classified under the 804 code. The substance of the identified 26R forms will not change – only the waste code noted on the form. Talisman will forward a copy of the revised 26Rs to EPA when the revisions are completed. Talisman files 26R Forms with DEP for four types of Gas Extraction Wastewater and solid sources. Although not within the defined scope of the RFI, Talisman has included 26R forms for Waste Codes 804 and 810 filed for 2010.

(a) Appendix 2(a) Wastewater reported under residual waste code 802 (brine and wastewater) (which as noted above, some will be recoded to waste code 804) represents "Produced Water and Flowback Fluids" which is wastewater that is generated as a result of the well completion or fracturing process and during the gas production phase of operations.

Chemical Analysis: DEP does not require that an individual chemical analysis be submitted with each 26R under this waste code. Rather, at the direction of the DEP, Talisman calculated a statistical 95% upper confidence level (UCL) average to represent the constituents of Talisman's Produced Water and Flowback Fluid. The most recent Produced Water and Flowback Fluid sampling that comprise the current 95% UCL was conducted on August 18, 2010. Talisman continues to work cooperatively with DEP and to refine the statistical analysis on a periodic basis to ensure that the 95% UCL represents our Produced Water and Flowback Fluid. Talisman's 95% UCL analysis is included in the Appendix 2(a) Part 1 which is attached to the 26R Forms.

- (b) Appendix 2(b) Waste solids reported under residual code 804 (fracking fluid waste) represents "Waste Flowback Sand" which is sand that was pumped down the well during the fracturing process and has returned to surface with flowback water. This sand is separated from the flowback fluid at the well site and is sent to a permitted landfill for disposal.
- (c) Appendix 2(c) Wastewater and solids reported under residual waste code 808 (servicing fluid, oil/water emulsion) represents "Oily Wastewater and Solids" which are removed from the gas stream at compressor stations through the process of free-water knock-out, scrubbing, filtration, condensation and dehydration.
- (d) Appendix 2(d) Waste solids reported under residual waste code 810 (oil and gas drill cuttings) represents "Drill Cuttings" that are generated as the drilling process encounters formation rock cuttings, natural water formations and includes water used for dust suppression. Solids are stabilized with sawdust and disposed at permitted landfills.
- 3. For the Period of April 19, 2011 to present, identify your Gas Extraction Wastewater management activities, including disposal, reuse, treatment, recycling, and reclamation for your Wells. In so doing, provide the following:
 - a. For each Well, the actual or estimated amount of Gas Extraction Wastewater generated;
 - b. For each facility that has received your Gas Extraction Wastewater, including but not limited to, underground injection wells, wastewater treatment plants, and recycling facilities, provide the name and address for each such facility, the name and address of any entity that transported your Gas Extraction Wastewater to

each facility, and the volume (in gallons) of such Gas Extraction Wastewater sent to each such facility;

- c. The total volume (in gallons) of Gas Extraction wastewater that you treated and recycled or caused to be treated or recycled for all your Well sites;
- d. A description of the method or methods by which you or any third party recyclers recycled such Gas Extraction Wastewater; and
- e. All modified disposal plans that you submitted after April 19, 2011 to the Commonwealth pursuant to the Pennsylvania Code Title 52 Section 78.55.
- f. Describe your use of pits, lagoons, impoundments or other land-based units for the storage or disposal of such Gas Extraction Wastewater associated with your gas extraction activities.
- g. Provide the latitude and longitude for all pits, lagoons, impoundments or other land based units used for the storage of Gas Extraction Wastewater associated with your gas extraction activities.

RESPONSE:

For the period April 19, 2011 through May 12, 2011 ("RFI period"), Talisman recycled all of its Gas Extraction Wastewater. Wastewater is either (1) pretreated before recycling (i.e. Gas Extraction Wastewater fluid is transported from an originating well to an approved treatment facility before transportation to a receiving well for recycling in a subsequent fracturing operations), or (2) not pretreated before recycling, (i.e., Gas Extraction Wastewater fluid is taken directly from the well of generation to the receiving well for a subsequent fracturing operations).

The total amount of Gas Extraction Wastewater generated at Talisman owned and (a) operated wells (See Response to Question 1(a) and 1(c) for the Wells included in this Response) is identified in the attached Appendix 3(a). There is no volumetric measurement of Gas Extraction Wastewater at the well pads. Therefore, the wastewater volumes are estimated based on the following: Talisman well pads have one or two interconnected above ground storage tanks ("AGST") with a range of 100-800 bbl total AGST capacity. Gas Extraction Wastewater is collected in the storage tanks and then transported for treatment and/or recycling when the volume is sufficient to fill trucking capacity. Talisman calculates an estimated total volumetric amount of Talisman's Gas Extraction Wastewater using the volumes reported by the transportation company or the Talisman then allocates the total volume of Gas Extraction treatment facility. Wastewater to individual wells by dividing the total volume by the number of days collected prior to transportation to determine the estimated pad production per day. Then the pad production volume is allocated to each well as a percentage of total volume.

b) Talisman did not dispose of any Gas Extraction Wastewater at underground injection wells or wastewater treatment facilities during the RFI period. Talisman utilized the treatment recycling facility, TerrAqua Resource Management (TARM), located at Suite 201, 1000 Commerce Park Drive, Williamsport, PA 17701. The total volume of Gas Extraction Wastewater fluid treated at TARM (based on the volume received as reported by TARM) over the RFI period was 2,155,921 gallons. All fluid was transported by Gas Field Specialists, Inc. which is located at 1171 SR 44, Shinglehouse, PA 16748.

c) The total volume of untreated Gas Extraction Wastewater fluid recycled during the RFI period was 2,959,992 gallons. The total volume of Gas Extraction Wastewater fluid treated for recycle at TARM (see Response 3(b) above) during the RFI period was 2,155,921 gallons. Therefore, the total volume of Gas Extraction Wastewater that Talisman treated and/or recycled during the RFI period was 5,115,913 gallons.

d) Talisman first performs a field test to evaluate the quality of the wastewater to determine whether the fluid is suitable for untreated recycling or whether treatment is necessary. Untreated Gas Extraction Wastewater fluid is transported by Gas Field Specialists, Inc. directly from the well site of origination to receiving well locations for recycling in subsequent fracturing operations without any form of pre-treatment. Recycled Gas Extraction Wastewater fluid requiring treatment is taken to TARM and is treated for the selected removal of scaling constituents. TARM utilizes a chemical pre-treatment process whereby heavy metals and hardness are removed. The treated wastewater is a high chloride brine which is transported via trucking back to subsequent fracturing locations for recycling. TARM also manages the disposal of a solid byproduct (non-hazardous dry filter cake) which is properly disposed of at certified landfills.

e) Talisman has not been requested to submit a modified disposal plan pursuant to 25 Pa. Code §78.55 since April 19, 2011.

f) Talisman's Marcellus operations have not used pits, lagoons, impoundments, or other land-based units for the storage or disposal of any Gas Extraction Wastewater fluids.

g) Not applicable.

4. Identify your intentions for disposal, reuse, treatment, recycling, and reclamation of Gas Extraction Wastewater after May 19, 2011, including your expected methods and location for disposal, treatment, or recycling during calendar year 2011. Provide the expected percentage of your Gas Extraction Wastewater by disposal, treatment, or recycling method.

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RESPONSE:

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> After May 19, 2011, Talisman intends to continue its recycling practices described in response to Question 3 above. Talisman's goal has been, and will continue to be, to recycle 100% of its Gas Extraction Wastewater, with no fluid disposal under standard operating conditions. However, in the event there is an operational disruption (i.e. there is no available well to receive and use recycled wastewater), Talisman has sufficient storage capacity to bridge an isolated shutdown of our recycle program until normal operations are restored.

> Talisman will manage untreated Gas Extraction Wastewater through its recycling program including the utilization of TARM for treatment of recycled Gas Extraction Wastewater fluid as necessary. To prepare for the possibility that operational disruptions (i.e. there is no available Well available to receive and use recycled wastewater) could exceed our short term storage capacity, Talisman has the option of using disposal facilities that are permitted to meet the updated DEP Chapter 95 discharge regulations. Talisman expects that it will achieve greater than a 90% recycle rate in 2011.

- 5. Submit quarterly reports to EPA on your waste disposal and recycling practices commencing on July 1, 2011 and continuing on a quarterly basis thereafter until June 30, 2012, for a total of four (4) reports. Such quarterly reports shall include the following information for the prior quarter:
 - For each Well, the actual or estimated volume (in gallons) of Gas Extraction a. Wastewater generated;
 - For each facility that has received your Gas Extraction Wastewater, including but b. not limited to, underground injection wells, wastewater treatment plants, and recycling facilities, provide the name and address for each such facility, the name and address of any entity that transported your Gas Extraction Wastewater to each facility, and the volume (in gallons) of such Gas Extraction Wastewater sent to each such facility;
 - The total volume (in gallons) of Gas Extraction wastewater that you or any third С. parties treated and recycled or caused to be treated or recycled for all your Well sites;
 - A description of the method or methods by which you or any third party recyclers d. recycled such Gas Extraction Wastewater; and
 - Describe your use of pits, lagoons, impoundments or other land-based units for e. the storage or disposal of such Gas Extraction Wastewater for your gas extraction activities.

f. Provide the latitude and longitude for all pits, lagoons, impoundments, or other land based units used for the storage of Gas Extraction Wastewater associated with your gas extraction activities.

RESPONSE:

In addition to the objections set forth above, Talisman objects to EPA's imposition of new reporting requirements absent any demonstration that Talisman has discharged or released or is likely to discharge or release a regulated substance that would subject Talisman to reporting requirements under the Clean Water Act, the Comprehensive Environmental Response, Compensation and Liability Act, or the Resource Conservation and Recovery Act.

Talisman strongly objects to the imposition of any duplicative regulatory reporting requirements that in whole, or in part overlap with existing state regulations/programs. This will lead to confusion and the expenditure of unnecessary resources to reconcile differences in reporting format or scope. Talisman proposes that EPA and DEP meet and confer on this issue and develop a single source of reporting requirements using existing DEP reporting requirements as a foundation.

Notwithstanding these objections, Talisman is willing to work with EPA to assist it to better understand Talisman's Marcellus Shale operations and its wastewater management practices. Therefore, Talisman will submit the requested reports subject to the following clarification. Talisman contends that it is impractical to request reporting to be submitted quarterly starting on July 1 for the preceding quarter (April, May and June) without sufficient time to compile the required information. Talisman will submit the quarterly reports within 60 days after the close of the quarter, (i.e. August 30th, November 30th, February 28th and May 30th) for the period of time requested in the RFI.

6. Identify any and all discharges or releases of any substances, wastes, and/or Gas Extraction Wastewater from facilities that contain Wells that you own or operate and all media (air, water, or land) that were affected by such discharges or releases and the estimated quantities of all substances discharged or released for the past five (5) years.

RESPONSE:

In addition to the General Objections set forth above, Talisman objects to this request as overbroad in scope, unauthorized by law to the extent it is overbroad, and unduly burdensome. The request to provide information related to "all discharges or releases of any substances," "all media that were affected," and their "estimated quantities" for "the past five years" is beyond the scope of EPA's stated purpose and authority to collect information regarding wastewater generated by Talisman's Marcellus Shale operations. In particular, the term "substances" is undefined and ambiguous and as such, is overly broad and beyond the scope of EPA's regulatory authority to seek information related to the actual and/or threatened discharge of pollutants or hazardous substances. For the purposes of this Response, Talisman will identify any regulated substances or fluids that were released beyond secondary containment.

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Notwithstanding this objection, in Appendix 6, Talisman is providing a list of all releases of regulated substances or fluids at Wells that Talisman has owned or operated as set forth in the Response to Question 1(a) and 1(c) and which all were reported to DEP.

All of the above referenced appendices have been saved in Adobe PDF format and are included in the attached cd-rom.

Sincerely,

Todd L. Normane Associate General Counsel

cc: Robert A. Broen, President, Talisman Energy USA Inc. Nels Tabor, Director, PADEP (w/o attachments) Geoff Ayers, Regional Counsel, PADEP (w/o attachments)

CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages one through nine, and based on my inquiry of those individuals responsible for the obtaining the information, I believe that the submitted information is true, accurate and complete.

Talisman Energy USA Inc.

By:

Todd L. Normane Associate General Counsel Date: May 24, 2011

Well Name		Status	Wellcode Lat	Long
85802 -	(01-023-08) R 8H	Completion	(01-023-08) 41° 41' 42.44" N	76° 46' 43.06" W
85887 -	(03-036-02) J 2H	Completion	(03-036-02) 41° 57' 1.48" N	76° 53' 58.42" W
85915 -	(03-035-01) D 1H	Completion	(03-035-01) 41° 54' 49.74" N	76° 53' 26.87" W
85994 -	058-06) M 6H	Completion	(03-058-06) 41° 58' 12.74" N	76° 53' 28.2" W
85999 -	03-067-01) O 1H	Completion	(03-067-01) 41° 48' 59.81" N	76° 53' 44.27" W
86000 -	03-067-02) O 2H	Completion	(03-067-02) 41° 48' 59.59" N	76° 53' 44.4" W
86001 -	03-067-03) O 3H	Completion	(03-067-03) 41° 48' 59.36" N	76° 53' 44.55" W
86002 -	03- <u>06</u> 7-04) O 4H	Completion	(03-067-04) 41° 48' 59.4" N	76° 53' 43.54" W
86062 -	(03-054-01) J 1H	Completion	(03-054-01) 41° 52' 8.58" N	76° 51' 30.79" W
86063 -	(03-054-03) J 3H	Completion	(03-054-03) 41° 52' 9.07" N	76° 51' 30.73" W
86064 -	(03-054-02) J 2H	Completion	(03-054-02) 41° 52' 8.82" N	76° 51' 30.76" W
86065 -	(03-054-04) J 4H	Completion	(03-054-04) 41° 52' 9.32" N	76° 51' 30.7" W
86092 -	-046-08) B 8H	Completion	(03-046-08) 41° 54' 14.75" N	76° 51' 59.28" W
86173 -	(03-014-04) J 4H	Completion	(03-014-04) 41° 51' 46.61" N	76° 52' 55.49" W
86394 -	A (05-006-06) L 6H	Completion	(05-006-06) 41° 49' 36.3" N	76° 12' 1.41" W
	NR 587 (02-004-04)	Drilling	(02-004-04) 41° 42' 19.25" N	76° 59' 30.71" W
	587 (02-006-04) 4H	Drilling	(02-006-04) 41° 41' 15.55" N	76° 59' 43.93" W
	587 (02-005-01) 1H	Drilling	(02-005-01) 41° 41' 38.42" N	76° 59' 40.17" W
	587 (02-005-02) 2H	Drilling	(02-005-02) 41° 41' 38.24" N	76° 59' 40.49" W
	587 (02-005-03) 3H	Drilling	(02-005-03) 41° 41' 38.07" N	76° 59' 40.8" W
	587 (02-005-04) 4H	Drilling	(02-005-04) 41° 41' 37.89" N	76° 59' 41.12" W
	587 (02-005-05) 5H	Drilling	(02-005-05) 41° 41' 37.71" N	76° 59' 41.43" W
	587 (02-005-06) 6H	Drilling	(02-005-06) 41° 41' 37.53" N	76° 59' 41.75" W
85655 -	(03-001-01) E 1H	Drilling	(03-001-01) 41° 50' 20.6" N	76° 50' 46.22" W
85683 -	1-032-02) G 2H	Drilling	(01-032-02) 41° 42' 39.94" N	76° 50' 17.69" W
85684 -	01-032-03) G 3H	Drilling	(01-032-03) 41° 42' 40.19" N	76° 50' 17.63" W
85685 -	01-032-04) G 4H	Drilling	(01-032-04) 41° 42' 40.43" N	76° 50' 17.56" W
85778 -	k (03-006-03) A 3H	Drilling	(03-006-03) 41° 49' 16.96" N	76° 52' 29.69" W
85779 -	k (03-006-04) A 4H	Drilling	(03-006-04) 41° 49' 17.21" N	76° 52' 29.89" W
85923 -	(03-029-01) S 1H	Drilling	(03-029-01) 41° 56' 11.45" N	76° 52' 3.98" E
85924 -	(03-029-03) S 3H	Drilling	(03-029-03) 41° 56' 11.28" N	76° 52' 3.36" W
85925 -	(03-029-02) S 2H	Drilling	(03-029-02) 41° 56' 11.45" N	76° 52' 3.98" E
85926 -	(03-029-04) S 4H	Drilling	(03-029-04) 41° 56' 11.19" N	76° 52' 0.05" W
85970 -	(03-065-01) W 1H	Drilling	(03-065-01) 41° 53' 54.91" N	76° 53' 42.22" W
85971 -	(03-065-02) W 2H	Drilling	(03-065-02) 41° 53' 54.88" N	76° 53' 42.68" W
85972 -	(03-065-03) W 3H	Drilling	(03-065-03) 41° 53' 54.84" N	76° 53' 43.14" W

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85973 -	(03-065-04) W 4H	Drilling	(03-065-04) 41° 53' 54.8" N	76° 53' 43.6" W
86040 -	(01-003-02) J 2H	Drilling	(01-003-02) 41° 43' 29.32" N	76° 46' 58,12" W
86049 -	(01-003-03) J 3H	Drilling	(01-003-03) 41° 43' 29.33" N	76° 46' 58.45" W
86125 - 1	-066-01) J 1H	Drilling	(01-066-01) 41° 42' 9.26" N	76° 48' 20.05" W
86131 - TE		Drilling	(01-075-03) 41° 41' 50.53" N	76° 44' 50.8" W
86132 - TE	USA (01-075-04) L 4H	Drilling	(01-075-04) 41° 41' 50.87" N	76° 44' 50.83" W
86144 -	(03-053-06) J 6H	Drilling	(03-053-06) 41° 49' 34.47" N	76° 51' 24.29" W
86145 -		Drilling	(03-053-07) 41° 49' 34.96" N	76° 51' 24.27" W
86147 -	08) J 8H	Drilling	(03-053-08) 41° 49' 34.96" N	76° 51' 24.27" W
86158 -	(03-040-04) B 4H	Drilling	(03-040-04) 41° 54' 8.77" N	76° 51' 20.24" W
86183 - TE		Drilling	(03-025-01) 41° 52' 59.17" N	76° 49' 10.86" W
86253 - TE	USA CUMMINGS LUMBER (01-081-01) 1H	Drilling	(01-081-01) 41° 48' 36.65" N	76° 46' 22.7" W
	USA CUMMINGS LUMBER (01-081-03) 3H	Drilling	(01-081-03) 41° 48' 36.17" N	76° 46' 22.56" W
	USA CUMMINGS LUMBER (01-081-04) 4H	Drilling	(01-081-04) 41° 48' 35.92" N	76° 46' 22.5" W
	USA CUMMINGS LUMBER (01-081-05) 5H	Drilling	(01-081-05) 41° 48' 35.68" N	76° 46' 22.43" W
86373 -	olew (25-004-01) P 1H	Drilling	(05-004-01) 41° 50' 11.85" N	76° 14' 18.43" W
86382 -	05-001-01) J 1H	Drilling	(05-001-01) 41° 49' 0.03" N	76° 13' 26.083" V
86387 -	5-005-01) K 1H	Drilling	(05-005-01) 41° 50' 13.61" N	76° 13' 32.13" W
86395 -	h (05-009-01) V 1H	Drilling	(05-009-01) 41° 49' 52.046" N	76° 7' 52.273" W
86411 -	05-026-01) G 1H	Drilling	(05-026-01) 41° 57' 38.88" N	76° 15' 23.21" W
86420 -	05-080-01) R 1H	Drilling	(05-080-01) 41° 56' 4.33" N	76° 11' 41.25" W
86542 -	i (05-074-01) D 1H	Drilling	(05-074-01) 41° 55' 8.18" N	76° 16' 57,94" W
86565 -	(05-031-01) M 1H	Drilling	(05-031-01) 41° 52' 19.16" N	76° 12' 27.21" W
86570 -	05-034-01) H 1H	Drilling	(05-034-01) 41° 53' 15.63" N	76° 9' 39.24" W
86586 -	5-040-01) C 1H	Drilling	(05-040-01) 41° 54' 1.39" N	76° 15' 41.31" W
86592 -	(05-082-01) 1H	Drilling	(05-082-01) 41° 57' 24.2" N	76° 9' 55.42" W
86665 -	05-180-01) 1H	Drilling	(05-180-01) 41° 56' 32.96" N	76° 18' 53.9" W
86726 -	(05-165-01) R 1H	Drilling	(05-165-01) 41° 59' 7.75" N	76° 15' 0.22" W
86732 -	5-223-01) W 1H	Drilling	(05-223-01) 41° 57' 53.99" N	76° 16' 47.98" W
86852 -	-95-046-01) W 1H	Drilling	(05-046-01) 41" 54' 38.15" N	76° 10' 59.2" W
86953 -	03-049-01) D 1H	Drilling	(03-049-01) 41° 57' 7.07" N	76° 51' 6.76" W
86154 -	B-040-03) B 3H	Drilling	(03-040-03) 41° 54' 8.68" N	76° 51' 20.54" W
84356 -	T (01-003-01) J 1H	Production	(01-003-01) 41° 43' 29.561" N	The second se
84358 -	E (01-007-01) T2H	Production	(01-007-01) 41° 43' 28.2" N	76° 48' 20.72" W
84359 -	MAS (01-001-01) FT1H	Production	(01-001-01) 41° 43' 26.96" N	76° 48' 41.34" W
84360 -	S (01-002-01) FT2H	Production	(01-002-01) 41° 43' 28.43" N	76° 49' 11.32" W
84778 - 1-1	(01-004-01) M 1H	Production	(01-004-01) 41° 43' 5.28" N	76° 51' 20.68" W

	84830 -	01-008-01) R2H	Production	(01-008-01) 41° 44' 49.14" M	76° 48' 47.62" W
	85117 -	EN D 1H (01-026-01)	Production	(01-026-01) 41° 44' 5.78" N	
	85125 -	(01-004-02) M 3H	Production	(01-004-02) 41° 43' 5.57" N	76° 51' 20.41" W
	85163 -	(01-012-01) A1H	Production	(01-012-01) 41° 43' 44.55" M	
	85165 -	(01-012-02) A2H	Production	(01-012-02) 41° 43' 44.59" M	
	85166 -	D 2H (01-026-02)	Production	(01-026-02) 41° 44' 5.8" N	76° 47' 34.31" W
	85167 -	(01-027-01) D 3H	Production	(01-027-01) 41° 44' 5.82" N	76° 47' 34.64" W
	85168 -	1-038-01) FT3H	Production	(01-038-01) 41° 43' 18.4" N	76° 49' 31.8" W
	85169 -	1-038-02) FT4H	Production	(01-038-02) 41° 43' 18.43" M	
	85170 -	TS (01-044-02) L 2H	Production	(01-044-02) 41° 45' 46.22" M	
	85171 -	S (01-044-01) L 1H	Production	(01-044-01) 41° 45' 46.25" N	
	85172 -	(01-005-02) R3H	Production	(01-005-02) 41° 44' 49.09" M	
	85182 -	B 1H (01-025-01)	Production	· (01-025-01) 41° 46' 24.76" M	
	85183 -	B 2H (01-025-02)	Production	(01-025-02) 41° 46' 24.79" M	76° 48' 11.75" W
	85184 -	B 4H (01-070-02)	Production	(01-070-02) 41° 46' 24.9" N	
	85185 -	B 3H (01-070-01)	Production	(01-070-01) 41° 46' 24.88" M	
9	85220 -	01-041-01) R 1H	Production	(01-041-01) 41° 44' 56.56" M	
	85222 -	(01-005-01) R1H	Production	(01-005-01) 41° 44' 49.20" M	76° 48' 47.94" W
	85232 -	R 1H (01-014-01)	Production	(01-014-01) 41° 45' 1.13" N	76° 51' 0.36" W
	85248 -	1H (01-006-01)	Production	(01-006-01) 41° 43' 57.46" N	76° 49' 6.18" W
	85249 -	2H (01-006-02)	Production	(01-006-02) 41° 43' 57.46" M	76° 49' 4.7" W
	85250	3H (01-006-03)	Production	(01-006-03) 41° 43' 57.46" M	76° 49' 4.37" W
	85251 - 1	(01-006-04)	Production	(01-006-04) 41° 43' 57.45" N	76° 49' 4.04" W
	85252 - TV	/L ASSOCIATES (01-016-02) 2H	Production	(01-016-02) 41° 46' 13.76" N	76° 50' 26.88" W
	85253 - TW	LASSOCIATES (01-016-01) 1H	Production	(01-016-01) 41° 46' 13.04" M	76° 50' 25.31" W
	85254 - TW	L ASSOCIATES (01-016-03) 3H	Production	(01-016-03) 41° 46' 13.75" M	76° 50' 26.55" W
	85255 - TW	/L ASSOCIATES (01-016-04) 4H	Production	(01-016-04) 41° 46' 13.74" N	76° 50' 26" W
	85256	4H (01-043-01)	Production	(01-043-01) 41° 44' 45.46" M	76° 47' 12.08" W
	85257 -	5H (01-043-02)	Production	(01-043-02) 41° 44' 45.26" M	V 76° 47' 11.88" W
	85258 -	D 6H (01-013-01)	Production	(01-013-01) 41° 44' 45.07" 1	V 76° 47' 11.68" W
	85259 -	D 7H (01-013-02)	Production	(01-013-02) 41° 44' 44.87" M	V 76° 47' 11.48" W
	85260 -	D 8H (01-013-03)	Production	(01-013-03) 41° 44' 44.67" N	V 76° 47' 11.27" W
	85278 -	P1=017-05) G 5H	Production	(01-017-05) 41° 41' 41.32" M	V 76° 50' 34.8" W
	85349 -	01-041-02) R 3H	Production	(01-041-02) 41° 44' 56.24" M	76° 48' 23.1" W
	85350 -	01-042-01) R 2H	Production	(01-042-01) 41° 44' 56.55" M	76° 48' 23.43" W
	85377	5 (01-004-03) M 5H	Production	(01-004-03) 41° 43' 5.68" N	76° 51' 20.11" W
	85440 - F1	91-014-03) R 3H	Production	(01-014-03) 41° 45' 1.16" N	76° 51' 1.68" W

85441 - (01-014-04) R 4H	Production	(01-014-04) 41° 45' 1.17" N	76° 51' 2.34" W
85454 - (01-014-02) R 2H	Production	(01-014-02) 41° 45' 1.14" N	76° 51' 1.03" W
85477 - FEI DCNR 587 (02-001-04)	Production	(02-001-04) 41° 42' 6.54" N	76° 58' 21.07" V
85478 - FEI DCNR 587 (02-001-06)	Production	(02-001-06) 41° 42' 6.63" N	76° 58' 20.42" V
85479 - FEI DCNR 587 (02-001-05)	Production	(02-001-05) 41° 42' 6.58" N	76° 58' 20.75" V
85482 - FEI DCNR 587 (02-017-01)	Production	(02-017-01) 41° 42' 37.54" N	76° 59' 9.63" W
85483 - FEI DCNR 587 (02-017-02)	Production	(02-017-02) 41° 42' 37.57" N	76° 59' 9.3" W
85484 - FEI DCNR 587 (02-017-03)	Production	(02-017-03) 41° 42' 37.61" N	76° 59' 8.98" W
85485 - FEI DCNR 587 (02-017-04)	Production	(02-017-04) 41° 42' 37.65" N	76° 59' 8.65" W
85492 - FEI DCNR 587 (02-004-06)	Production	(02-004-06) 41° 42' 19.16" N	76° 59' 31.02" V
85494 - FEI DCNR 587 (02-004-02)	Production	(02-004-02) 41° 42' 19.35" N	76° 59' 30.41" V
85525 - 1000 CONTROL ND 9H (01-043-03)	Production	(01-043-03) 41° 44' 44.28" N	76° 47' 10.88" V
85528 - FEI DCNR 587 (02-002-04)	Production	(02-002-04) 41° 41' 52.91" N	76° 57' 54.76" V
85529 - FEI DCNR 587 (02-002-03)	Production	(02-002-03) 41° 41' 53.01" N	76° 57' 54.12" V
85530 - (01-042-02) R 4H	Production	(01-042-02) 41° 41' 56.54" N	76° 48' 23.1" W
85531 - 100 (01-042-03) R 6H	Production	(01-042-03) 41° 44' 56.51" N	76° 48' 22.44" V
85532 - Manager (01-041-03) R 5H	Production	(01-041-03) 41° 44' 56.52" N	76° 48' 22.77" V
85536 - FEI DCNR 587 (02-009-01)	Production	(02-009-01) 41° 40' 22.49" N	76° 58' 10.73" V
85537 - FEI DCNR 587 (02-009-02)	Production	(02-009-02) 41° 40' 22.46" N	76° 58' 11.06" V
85538 - FEI DCNR 587 (02-009-03)	Production	(02-009-03) 41° 40' 22.44" N	76° 58' 11.39" V
85539 - FEI DCNR 587 (02-009-04)	Production	(02-009-04) 41° 40' 21.41" N	76° 58' 11.74" V
85540 - FEI DCNR 587 (02-009-05)	Production	(02-009-05) 41° 40' 21.44" N	76° 58' 11.41" V
85541 - FEI DCNR 587 (02-009-06)	Production	(02-009-06) 41° 40' 21.46" N	76° 58' 11.09" V
85548 - Harrison 1-015-01) T 3H	Production	(01-015-01) 41° 43' 22.68" N	76° 47' 57.72" V
85549 - 01-015-02) T 4H	Production	(01-015-02) 41° 43' 22.61" N	76° 47' 58.04" V
85550 - 1-015-03) T 5H	Production	' (01-015-03) 41° 43' 22.54" N	76° 47' 58.35" V
85577 - DCNR 587 (02-018-01) 1H	Production	(02-018-01) 41° 41' 34.3" N	76° 58' 53.22" V
85578 - DCNR 587 (02-018-02) 2H	Production	(02-018-02) 41° 41' 34.35" N	76° 58' 52.9" W
85579 - DCNR 587 (02-018-03) 3H	Production	(02-018-03) 41° 41' 34.4" N	76° 58' 52.57" V
85580 - DCNR 587 (02-018-04) 4H	Production	(02-018-04) 41° 41' 35.95" N	76° 58' 52.29" V
85581 - DCNR 587 (02-018-05) 5H	Production	(02-018-05) 41° 41' 35.9" N	76° 58' 52.62" V
85583 - DCNR 587 (02-018-06) 6H	Production	(02-018-06) 41° 41' 35.85" N	76° 58' 52.94" V
85596 - DCNR 587 (02-008-03) 3H	Production	(02-008-03) 41° 40' 32.12" N	76° 58' 42.05" V
85597 - DCNR 587 (02-008-04) 4H	Production	(02-008-04) 41° 40' 31.12" N	76° 58' 41.64" V
85598 - DCNR 587 (02-008-05) 5H	Production	(02-008-05) 41° 40' 31.13" N	76° 58' 41.97" V
85599 - DCNR 587 (02-008-06) 6H	Production	(02-008-06) 41° 40' 31.15" N	76° 58' 42.3" W
85600 - DCNR 587 (02-013-01) 1H	Production	(02-013-01) 41° 40' 55.96" N	76° 57' 30.96" V

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85601 - DCNR 587 (02-013-02) 2H	Developeties	100 040 001 440 401 55 000 14	man and the states
85602 - DCNR 587 (02-013-02) 2H	Production	(02-013-02) 41° 40' 55.96" N	76° 57' 30.96" W
85603 - DCNR 587 (02-013-04) 4H	Production	(02-013-03) 41° 40' 55.93" N	76° 57' 31.29" W
85604 - DCNR 587 (02-014-01) 1H	Production	(02-013-04) 41° 40' 55.91" N	76° 57' 31.62" W
85605 - DCNR 587 (02-014-02) 2H	Production	(02-014-01) 41° 40' 56.92" N	76° 57' 55.39" W
85606 - DCNR 587 (02-014-02) 2H	Production	(02-014-02) 41° 40' 56.88" N	76° 57' 55.71" W
	Production	(02-014-03) 41° 40' 56.83" N	76° 57' 56.03" W
	Production	(03-009-05) 41° 50' 12.72" N	76° 53' 34.32" W
85624 - (03-009-06) L 6H	Production	(03-009-06) 41° 50' 12.79" N	76° 53' 34" W
85625 - (03-009-07) L 7H	Production	(03-009-07) 41° 50' 12.85" N	76° 53' 33.68" W
85626 - (03-009-08) L 8H	Production	(03-009-08) 41° 50' 12.92" N	76° 53' 33.36" W
85627 - (03-008-01) G 1H	Production	(03-008-01) 41° 52' 55.53" N	76° 51' 55.53" W
85628 - 📴 🖓 (03-008-02) G 2H	Production	(03-008-02) 41° 52' 46.3" N	76° 51' 55.86" W
85629 - H (03-008-03) G 3H	Production	(03-008-03) 41° 52' 46.29" N	76° 51' 56.19" W
85630 - Contraction (03-008-04) G 4H	Production	(03-008-04) 41° 52' 46.29" N	76° 51' 56.52" W
65631 - C (03-008-05) G 5H	Production	(03-008-05) 41° 52' 55.27" N	76° 51' 55.27" W
85632 - (03-008-06) G 6H	Production	(03-008-06) 41° 52' 45.05" N	76° 51' 55.6" W
85633 - R (03-008-07) G 7H	Production	(03-008-07) 41° 52' 45.04" N	76° 51' 55.93" W
85634 - R (03-008-08) G 8H	Production	(03-008-08) 41° 52' 45.04" N	76° 51' 56.26" W
85635 - 013-01) W 1H	Production	(03-013-01) 41° 51' 42.99" N	76° 50' 51.78" W
85636 - 1013-02) W 2H	Production	(03-013-02) 41° 51' 42.93" N	76° 50' 51.46" W
85637 - 000 013-03) W 3H	Production	(03-013-03) 41° 51' 42.88" N	76° 50' 51.14" W
85638 - 100 (013-04) W 4H	Production	(03-013-04) 41° 51' 42.82" N	76° 50' 50.81" W
85639 - 013-05) W 5H	Production	(03-013-05) 41° 51' 41.75" N	76° 50' 51.93" W
85640 - 013-06) W 6H	Production	(03-013-06) 41° 51' 41.69" N	76° 50' 51.61" W
85641 - 013-07) W 7H	Production	(03-013-07) 41° 51' 41.63" N	76° 50' 51.29" W
85642 - 013-08) W 8H	Production	(03-013-08) 41° 51' 41.58" N	76° 50' 50.97" W
85648 - M (03-004-01) R 1H	Production	(03-004-01) 41° 51' 27.66" N	76° 50' 4.12" W
85649 - M (03-004-02) R 2H	Production	(03-004-02) 41° 51' 27.68" N	76° 50' 3.79" W
85650 - M (03-004-03) R 3H	Production	(03-004-03) 41° 51' 27.7" N	76° 50' 3.46" W
85651 - (03-004-04) R 4H	Production	(03-004-04) 41° 51' 27.71" N	76° 50' 3.13" W
85652 - (03-004-05) R 5H	Production	(03-004-05) 41° 51' 26.46" N	76° 50' 4.64" W
85656 - 3-001-02) E 2H	Production	(03-001-02) 41° 50' 20.58" N	76° 50' 46.55" W
85657 - (03-001-03) E 3H	Production	(03-001-03) 41° 50' 20.56" N	76° 50' 46.88" W
85658 - 03-001-04) E 4H	Production	(03-001-04) 41° 50' 20.55" N	76° 50' 47.21" W
85665 - (01-024-03) L 8H	Production	(01-024-03) 41° 45' 43.72" N	76° 48' 32.39" W
85666 - (01-024-04) L 9H	Production	(01-024-04) 41° 45' 43.63" N	76° 48' 32.7" W
85667 - 01-047-01) J 1H	Production	(01-047-01) 41° 44' 58.21" N	76° 50' 0.27" W

35668 -	1-047-02) J 2H	Production	(01-047-02) 41° 44' 58.27" N	76° 49' 59.94" W
85669 -	-047-03) J 3H	Production	(01-047-03) 41° 44' 58.33" N	76° 49' 59,63" W
85670 -	-047-04) J 4H	Production	(01-047-04) 41° 44' 58.71" N	76° 50' 0.27" W
85671 -	-047-05) J 5H	Production	(01-047-05) 41° 44' 58.77" N	76° 49' 59.95" W
85672 -	-047-06) J 6H	Production	(01-047-06) 41° 44' 58.83" N	76° 49' 59.63" W
35691 -	01-074-01) W 1H	Production	(01-074-01) 41° 46' 9.87" N	76° 51' 35.68" W
35693 -	01-074-02) W 2H	Production	(01-074-02) 41° 46' 9.89" N	76° 51' 35.35" W
85694 -	01-074-03) W 3H	Production	(01-074-03) 41° 46' 9.91" N	76° 51' 35.02" W
35695 -	01-074-04) W 4H	Production	(01-074-04) 41° 46' 9.92" N	76° 51' 34.69" W
85700 -	(01-071-01) D 1H	Production	(01-071-01) 41° 45' 55.06" N	76° 48' 48.6" W
85701 -	(01-071-02) D 2H	Production	(01-071-02) 41° 45' 55.06" N	76° 48' 48.6" W
85702 -	(01-071-03) D 3H	Production	(01-071-03) 41° 45' 55.4" N	76° 48' 47.79" W
	VEST HOLDINGS (01-036-01) 1H	Production	(01-036-01) 41° 41' 23.83" N	76° 51' 9.7" W
	VEST HOLDINGS (01-036-03) 3H	Production	(01-036-03) 41° 41' 24.51" N	76° 51' 9.56" W
85729 - HAR	VEST HOLDINGS (01-036-02) 2H	Production	(01-036-02) 41° 41' 24.17" N	76° 51' 9.63" W
	VEST HOLDINGS (01-036-04) 4H	Production	(01-036-04) 41° 41' 24.85" N	76° 51' 9.49" W
85733 -	(01-077-01) L 1H	Production	(01-077-01) 41° 45' 0.33" N	76° 50' 19.62" W
85735 -	(01-077-05) L 5H	Production	(01-077-05) 41° 45' 0.92" N	76° 50' 19.07" W
35736 -	(01-077-02) L 2H	Production	(01-077-02) 41° 45' 0.4" N	76° 50' 19.16" W
85737 -	(01-077-04) L 4H	Production	(01-077-04) 41° 45' 0.85" N	76° 50' 19.52" W
85738 -	(01-077-06) L 6H	Production	(01-077-06) 41° 45' 0.99" N	76° 50' 18.62" W
85744 - FEI [DCNR 587 (02-002-01)	Production	(02-002-01) 41° 41' 53.05" N	76° 57' 53.79" W
	DCNR 587 (02-002-02)	Production	(02-002-02) 41° 41' 53.01" N	76° 57' 54.12" W
85747 -	(01-038-03) FT5H	Production	(01-038-03) 41° 43' 18.55" N	76° 49' 31.54" W
85751 -	01-038-05) FT7H	Production	(01-038-05) 41° 43' 18.26" N	76° 49' 32.07" W
85784 -	01-076-01) L 7H	Production	(01-076-01) 41° 45' 21.26" N	76° 49' 36.81" W
35785 -	D1-076-03) L 9H	Production	(01-076-03) 41° 45' 21.59" N	76° 49' 36.32" W
35786 -	01-076-05) L 11H	Production	(01-076-05) 41° 45' 21.71" N	76° 49' 37.13" W
35787 -	01-076-07) L 13H	Production	(01-076-07) 41° 45' 22.04" N	76° 49' 36.65" W
35788 -	01-076-02) L 8H	Production	(01-076-02) 41° 45' 21.42" N	76° 49' 36.57" W
85789 -	01-076-04) L 10H	Production	(01-076-04) 41° 45' 21.76" N	76° 49' 36.08" W
85790 -	01-076-06) L 12H	Production	(01-076-06) 41° 45' 21.87" N	76° 49' 36.89" W
85845 -	01-017-06) G 6H	Production	(01-017-06) 41° 41' 40.65" N	76° 50' 33.81" W
85846 -	01-017-07) G 7H	Production	(01-017-07) 41° 41' 40.94" N	76° 50' 33.55" W
85847 -	01-017-08) G 8H	Production	(01-017-08) 41° 41' 41.23" N	76° 50' 33.29" W
85867 -	015-01) J 1H	Production	(03-015-01) 41° 52' 36.11" N	76° 52' 44.04" W
85868 -	015-02) J 2H	Production	(03-015-02) 41° 52' 36.36" N	76° 52' 43.82" W

85869 -	(03-015-03) J 3H	Production	(03-015-03)	41° 52' 36.6" N	76° 52' 43.59" W
85870 -	(03-015-04) J 4H	Production	(03-015-04)	41° 52' 36.84" N	76° 52' 43.37" W
86172 -	T (03-045-01) J 1H	Production	(03-045-01)	41° 48' 55.35" N	76° 49' 52.09" W
86174 -	er (03-045-02) J 2H	Production	(03-045-02)	41° 48' 55.6" N	76° 49' 52.05" W
1	(AREA S24V1)	Production	LUTZ	41° 43' 43.53" N	76° 49' 4.86" W
A	6 (01-044-03) L 3H	Stopped Duri	ng (01-044-03)	41° 45' 46.18" N	76° 48' 8.32" W
5	5 (01-024-02) L 7H	Stopped Duri	ng (01-024-02)	41° 45' 43.82" N	76° 48' 32.09" W
	6 (01-024-01) L 6H	Stopped Duri	n; (01-024-01)	41° 45' 43.92" N	76° 48' 31.78" W
-	87 (02-006-01)	Completion	(02-006-01)	41° 41' 15.13" N	76° 59' 42.66" W
		and the second se			

API#	Well Name	Status	Wellcode	Lat	Long
37-015-20596-00	01 032 05 G 5H OG WELL	Permitted	(01-032-05)	41° 42' 39.98" N	76° 50' 18.35" W
37-015-20597-00	01 032 06 G 6H OG WELL	Permitted	(01-032-06)	41° 42' 40.22" N	76° 50' 18.29" W
37-015-20599-00	01 032 08 G 8H OG WELL	Permitted	(01-032-08)	41° 42' 40.70" N	76° 50' 18.17" W
37-015-20598-00	01 032 07 G 7H OG WELL	Permitted	(01-032-07)	41° 42' 40.46" N	76° 50' 18.23" W
37-015-20874-00	01 002 02 FT 8H OG WELL	Permitted	(01-002-02)	41° 43' 28.71" N	76° 49' 11.69" W
37-015-20950-00	01 075 01 L 1H OG WELL	Permitted	(01-075-01)	41° 41' 49.84" N	76° 44' 50.75" W
37-015-20947-00	01 075 02 L 2H OG WELL	Permitted	(01-075-02)	41° 41' 50.19" N	76° 44' 50.78" W
37-015-20972-00	03 051 01 B 1H OG WELL	Permitted	(03-051-01)	41° 52' 18.82" N	76° 48' 8.97" W
37-015-20973-00	03 051 02 B 2H OG WELL	Permitted	(03-051-02)	41° 52' 19.04" N	76° 48' 8.81" W
37-015-20974-00	03 051 03 B 3H OG WELL	Permitted	(03-051-03)	41° 52' 19.25" N	76° 48' 8.64" W
37-015-20975-00	03 051 04 B 4H OG WELL	Permitted	(03-051-04)	41° 52' 19.47" N	76° 48' 8.48" W
37-015-20976-00	03 051 05 B 5H OG WELL	Permitted	(03-051-05)	41° 52' 18.25" N	76° 48' 7.88" W
37-015-20977-00	03 051 06 B 6H OG WELL	Permitted	(03-051-06)	41° 52' 18.46" N	76° 48' 7.72" W
37-015-20978-00	03 051 07 B 7H OG WELL	Permitted	(03-051-07)	41° 52' 18.68" N	76° 48' 7.56" W
37-015-20979-00	N 03 051 08 B 8H OG WELL	Permitted	(03-051-08)	41° 52' 18.89" N	76° 48' 7.39" W
37-015-20615-00	01 077 03 L 3H OG WELL	Permitted	(01-077-03)	41° 45' 0.47" N	76° 50' 18.71" W
37-015-20658-00	03 015 05 J 5H OG WELL	Permitted	(03-015-05)	41° 52' 36.44" N	76° 52' 42.94" W
37-015-20659-00	03 015 06 J 6H OG WELL	Permitted	(03-015-06)	41° 52' 36.20" N	76° 52' 43.16" W
37-015-20660-00	03 015 07 J 7H OG WELL	Permitted	(03-015-07)	41° 52' 35.95" N	76° 52' 43.39" W
37-015-20669-00	03 036 01 J 1H OG WELL	Permitted	(03-036-01)	41° 57' 1.45" N	76° 53' 58.88" W
37-015-20671-00	03 036 03 J 3H OG WELL	Permitted	(03-036-03)	41° 57' 1.52" N	76° 53' 57.96" W
37-015-20672-00	03 036 04 J 4H OG WELL	Permitted	(03-036-04)	41° 57' 1.56" N	76° 53' 57.50" W
37-015-20744-00	03 035 03 D 3H OG WELL	Permitted	(03-035-03)	41° 54' 49.89" N	76° 53' 26.10" W
37-015-20745-00	03 035 04 D 4H OG WELL	Permitted	(03-035-04)	41° 54' 49.96" N	76° 53' 25.72" W
37-015-20746-00	03 035 05 D 5H OG WELL	Permitted	(03-035-05)	41° 54' 50.86" N	76° 53' 26.75" W
37-015-20747-00	03 035 06 D 6H OG WELL	Permitted	(03-035-06)	41° 54' 50.80" N	76° 53' 27,07" W
37-015-20748-00	03 035 07 D 7H OG WELL	Permitted	(03-035-07)	41° 54' 50.73" N	76° 53' 27.39" W
37-015-20749-00	03 035 08 D 8H OG WELL	Permitted	(03-035-08)	41° 54' 50.67" N	76° 53' 27.71" W
37-015-20955-00	01 082 01 S 1H OG WELL	Permitted	(01-082-01)	41° 40' 49.45" N	76° 46' 48.45" W
37-015-20956-00	01 082 02 S 2H OG WELL	Permitted	(01-082-02)	41° 40' 49.44" N	76° 46' 48.92" W
37-015-20957-00	01 082 03 S 3H OG WELL	Permitted	(01-082-03)	41° 40' 49.42" N	76° 46' 49.38" W
37-015-21055-00	01 066 02 J 2H OG WELL	Permitted	(01-066-02)	41° 42' 9.22" N	76° 48' 20.37" W

37-015-21056-00	1 01 066 03 J 3H OG WELL	Permitted	(01-066-03)	41° 42' 9.19" N	76° 48' 20.70" V
37-015-21053-00	01 066 04 J 4H OG WELL	Permitted	(01-066-04)	41° 42' 9.15" N	76° 48' 21.03" V
37-015-20592-00	01 032 01 G 1H OG WELL	Permitted	(01-032-01)	41° 42' 39.70" N	76° 50' 17.75" W
37-015-20743-00	03 035 02 D 2H OG WELL	Permitted	(03-035-02)	41° 54' 49.81" N	76° 53' 26.48" W
37-117-20197-00	1 OG WELL	Permitted		41° 59' 2.88" N	77° 1' 34.79" W
37-117-20330-00	264 1H OG WELL	Permitted		41° 59' 28.22" N	76° 57' 22.96" W
37-015-20524-00	03 009 01 L 1H OG WELL	Permitted	(03-009-01)	41° 50' 13.87" N	76° 53' 34.96" V
37-015-20525-00	03 009 02 L 2H OG WELL	Permitted	(03-009-02)	41° 50' 13.94" N	76° 53' 34.64" W
37-015-20526-00	03 009 03 L 3H OG WELL	Permitted	(03-009-03)	41° 50' 14.00" N	76° 53' 34.32" V
37-015-20527-00	03 009 04 L 4H OG WELL	Permitted	(03-009-04)	41° 50' 14.07" N	76° 53' 34.00" V
37-117-20391-00	410 5H OG WELL	Permitted		41° 57' 8.48" N	76° 57' 14.66" W
37-117-20327-00	404 1H OG WELL	Permitted		41° 56' 10.34" N	77° 1' 9.88" W
37-015-20433-00	03 002 01 R 1H OG WELL	Permitted	(03-002-01)	41° 50' 28.59" N	76° 49' 30.64" V
37-015-20434-00	03 002 02 R 2H OG WELL	Permitted	(03-002-02)	41° 50' 28.50" N	76° 49' 30.33" W
37-015-20435-00	03 002 03 R 3H OG WELL	Permitted	(03-002-03)	41° 50' 28.40" N	76° 49' 30.03" V
37-015-20465-00	03 002 04 R 4H OG WELL	Permitted	(03-002-04)	41° 50' 28.99" N	76° 49' 30.20" W
37-015-20466-00	03 002 05 R 5H OG WELL	Permitted	(03-002-05)	41° 50' 28.90" N	76° 49' 29.89" W
37-015-20532-00	03 010 01 J 1H OG WELL	Permitted	(03-010-01)	41° 50' 46.06" N	76° 52' 19.66" V
37-015-20533-00	03 010 02 J 2H OG WELL	Permitted	(03-010-02)	41° 50' 46.13" N	76° 52' 19.34" V
37-015-20534-00	03 010 03 J 3H OG WELL	Permitted	(03-010-03)	41° 50' 46.20" N	76° 52' 19.03" V
37-015-20535-00	03 010 04 J 4H OG WELL	Permitted	(03-010-04)	41° 50' 46.27" N	76° 52' 18.71" V
37-015-20536-00	03 010 05 J 5H OG WELL	Permitted	(03-010-05)	41° 50' 44.92" N	76° 52' 18.98" V
37-015-20537-00	03 010 06 J 6H OG WELL	Permitted	(03-010-06)	41° 50' 44.99" N	76° 52' 18.66" V
37-015-20538-00	03 010 07 J 7H OG WELL	Permitted	(03-010-07)	41° 50' 45.06" N	76° 52' 18.34" V
37-015-20539-00	03 010 08 J 8H OG WELL	Permitted	(03-010-08)	41° 50' 45.13" N	76° 52' 18.03" V
37-117-20325-00	408 1H OG WELL	Permitted	1	41° 56' 49.28" N	76° 58' 38.16" V
37-117-20324-00	406 1H OG WELL	Permitted		41° 55' 53.24" N	76° 59' 34.64" V
37-117-20328-00	402 1H OG WELL	Permitted		41° 55' 47.71" N	77° 2' 28.74" W
37-117-20285-00	DCNR 587 02 001 01 1H OG WELL	Permitted	(02-001-01)	41° 42' 7.27" N	76° 58' 21.24" V
37-117-20286-00	DCNR 587 02 001 02 2H OG WELL	Permitted	(02-001-02)	41° 42' 7.31" N	76° 58' 20.91" V
37-117-20287-00	DCNR 587 02 001 03 3H OG WELL	Permitted	(02-001-03)	41° 42' 7.36" N	76° 58' 20.59" V
37-117-20448-00	DCNR 587 02 006 02 OG WELL	Permitted	(02-006-02)	41° 41' 15.27" N	76° 59' 43.09" V
37-117-20449-00	DCNR 587 02 006 03 OG WELL	Permitted	(02-006-03)	41° 41' 15.41" N	76° 59' 43.51" V
37-117-20369-00	DCNR 587 02 008 01 OG WELL	Permitted	(02-008-01)	41° 40' 32.09" N	76° 58' 41.39" V
37-117-20370-00	DCNR 587 02 008 02 OG WELL	Permitted	(02-008-02)	41° 40' 32.11" N	76° 58' 41.72" V

37-117-20419-00	DCNR 587 02 014 04 OG WELL	Permitted	(02-014-04)	41° 40' 56.79" N	76° 57' 56.36" W
37-117-20418-00	DCNR 587 02 014 05 OG WELL	Permitted	(02-014-05)	41° 40' 55.92" N	76° 57' 55.32" W
37-117-20420-00	DCNR 587 02 014 06 OG WELL	Permitted	(02-014-06)	41° 40' 55.88" N	76° 57' 55.64" W
37-117-20421-00	DCNR 587 02 014 07 OG WELL	Permitted	(02-014-07)	41° 40' 55.84" N	76° 57' 55.97" W
37-015-20545-00	01 023 01 R 1H OG WELL	Permitted	(01-023-01)	41° 41' 42.04" N	76° 46' 44.72" W
37-015-20546-00	01 023 02 R 2H OG WELL	Permitted	(01-023-02)	41° 41' 42.01" N	76° 46' 44.26" W
37-015-20547-00	01 023 03 R 3H OG WELL	Permitted	(01-023-03)	41° 41' 41.98" N	76° 46' 43.80" W
37-015-20548-00	01 023 04 R 4H OG WELL	Permitted	(01-023-04)	41° 41' 41.96" N	76° 46' 43.34" W
37-015-20549-00	01 023 05 R 5H OG WELL	Permitted	(01-023-05)	41° 41' 43.01" N	76° 46' 44.39" W
37-015-20550-00	01 023 06 R 6H OG WELL	Permitted	(01-023-06)	41° 41' 42.98" N	76° 46' 43.93" W
37-015-20551-00	01 023 07 R 7H OG WELL	Permitted	(01-023-07)	41° 41' 42.96" N	76° 46' 43.47" W
37-015-20166-00	M 2H OG WELL	Permitted		41° 43' 5.54" N	76° 51' 20.5" W
37-015-20512-00	01 017 01 G 1H OG WELL	Permitted	(01-017-01)	41° 41' 40.23" N	76° 50' 33.39" W
37-015-20513-00	01 017 02 G 2H OG WELL	Permitted	(01-017-02)	41° 41' 40.52" N	76° 50' 33.13" W
37-015-20514-00	01 017 03 G 3H OG WELL	Permitted	(01-017-03)	41° 41' 40.80" N	76° 50' 32.87" W
37-015-20515-00	01 017 04 G 4H OG WELL	Permitted	(01-017-04)	41° 41' 41.09" N	76° 50' 32.62" W
37-117-20304-00	1 OG WELL	Permitted	2	41° 59' 16.66" N	77° 3' 5.68" W
37-117-20297-00	261 1H OG WELL	Permitted		41° 59' 18.32" N	76° 59' 26.85" W
37-117-20406-00	261 2H OG WELL	Permitted		41° 59' 18.32" N	76° 59' 27.05" W
37-117-20407-00	261 3H OG WELL	Permitted		41° 59' 18.32" N	76° 59' 26.66" W
37-117-20408-00	261 4H OG WELL	Permitted		41° 59' 18.17" N	76° 59' 26.86" W
37-117-20409-00	261 5H OG WELL	Permitted		41° 59' 18.17" N	76° 59' 27.05" W
37-117-20410-00	261 6H OG WELL	Permitted		41° 59' 18.17" N	76° 59' 26.66" W
37-117-20296-00	271 1H OG WELL	Permitted		41° 57' 48.51" N	77° 0' 0.22" W
37-015-20390-00	01 44 04 L 4H OG WELL	Permitted		41° 45' 46.14" N	76° 48' 8.65" W
37-015-20391-00	01 44 05 L 5H OG WELL	Permitted	1 martin	41° 45' 46.10" N	76° 48' 8.97" W
37-015-20584-00	01 073 01 K 1H OG WELL	Permitted	(01-073-01)	41° 46' 26.28" N	76° 52' 24.30" W
37-015-20585-00	01 073 02 K 2H OG WELL	Permitted	(01-073-02)	41° 46' 26.23" N	76° 52' 24.63" W
37-015-20586-00	01 073 03 K 3H OG WELL	Permitted	(01-073-03)	41° 46' 26.19" N	76° 52' 24.95" W
37-015-20587-00	01 073 04 K 4H OG WELL	Permitted	(01-073-04)	41° 46' 26.14" N	76° 52' 25.28" W

37-015-20588-00	01 073 05 K 5H OG WELL	Permitted	(01-073-05)	41° 46' 25.39" N	76° 52' 25.25" W
37-015-20589-00	01 073 06 K 6H OG WELL	Permitted	(01-073-06)	41° 46' 25.44" N	76° 52' 24.93" W
37-015-20590-00	01 073 07 K 7H OG WELL	Permitted	(01-073-07)	41° 46' 25.48" N	76° 52' 24.61" W
37-015-20591-00	01 073 08 K 8H OG WELL	Permitted	(01-073-08)	41° 46' 25.53" N	76° 52' 24.28" W
37-015-20577-00	01 074 05 W 5H OG WELL	Permitted	(01-074-05)	41° 46' 10.84" N	76° 51' 36.02" W
37-015-20578-00	01 074 06 W 6H OG WELL	Permitted	(01-074-06)	41° 46' 10.86" N	76° 51' 35.69" W
37-015-20579-00	01 074 07 W 7H OG WELL	Permitted	(01-074-07)	41° 46' 10.88" N	76° 51' 35.36" W
37-015-20580-00	01 074 08 W 8H OG WELL	Permitted	(01-074-08)	41° 46' 10.89" N	76° 51' 35.03" W
37-117-20298-00	259 1H OG WELL	Permitted		41° 59' 18.09" N	77° 0' 54.64" W
37-015-20565-00	03 006 01 A 1H OG WELL	Permitted	(03-006-01)	41° 49' 16.45" N	76° 52' 29.29" W
37-015-20566-00	03 006 02 A 2H OG WELL	Permitted	(03-006-02)	41° 49' 16.70" N	76° 52' 29.49" W
37-015-20569-00	03 006 05 A 5H OG WELL	Permitted	(03-006-05)	41° 49' 16.33" N	76° 52' 29.96" W
37-015-20570-00	03 006 06 A 6H OG WELL	Permitted	(03-006-06)	41° 49' 16.58" N	76° 52' 30.16" V
37-015-20571-00	03 006 07 A 7H OG WELL	Permitted	(03-006-07)	41° 49' 16.84" N	76° 52' 30.36" V
37-015-20572-00	03 006 08 A 8H OG WELL	Permitted	(03-006-08)	41° 49' 17.09" N	76° 52' 30.56" V
37-117-20299-00	269 1H OG WELL	Permitted		41° 58' 6.17" N	77° 1' 34.38" W
37-015-20468-00	03 004 06 R 6H OG	Permitted	(03-004-06)	41° 51' 26.74" N	76° 50' 3.15" W
37-015-20469-00	03 004 07 R 7H OG	Permitted	(03-004-07)	41° 51' 26.76" N	76° 50' 2.82" W
37-117-20301-00	268 1H OG WELL	Permitted		41° 58' 0.06" N	77° 2' 17.74" W
37-117-20295-00	262 1H OG WELL	Permitted	1	41° 59' 21.29" N	76° 58' 46.42" W
37-015-20500-00	03 001 05 E 5H OG WELL	Permitted	(03-001-05)	41° 50' 19.43" N	76° 50' 46.28" V
37-015-20501-00	03 001 06 E 6H OG WELL	Permitted	(03-001-06)	41° 50' 19.43" N	76° 50' 46.61" W
37-015-20502-00	03 001 07 E 7H OG WELL	Permitted	(03-001-07)	41° 50' 19.42" N	76° 50' 46.94" V
37-015-20503-00	03 001 08 E 8H OG WELL	Permitted	(03-001-08)	41° 50' 19.41" N	76° 50' 47.27" V

37-015-20606-00	HARVEST HOLDINGS 01 036 05 5H OG WELL	Permitted	(01-036-05)	41° 41' 24.08" N	76° 51' 10.32" W
37-015-20607-00	HARVEST HOLDINGS 01 036 06 6H OG WELL	Permitted	(01-036-06)	41° 41' 24.42" N	76° 51' 10.25" W
37-015-20608-00	HARVEST HOLDINGS 01 036 07 7H OG WELL	Permitted	(01-036-07)	41° 41' 24.76" N	76° 51' 10.17" W
37-015-20609-00	HARVEST HOLDINGS 01 036 08 8H OG WELL	Permitted	(01-036-08)	41° 41' 25.10" N	76° 51' 17.43" W
37-015-20780-00	03 016 01 T 1H OG WELL	Permitted	(03-016-01)	41° 52' 50.87" N	76° 51' 10.10" W
37-015-20781-00	03 016 02 T 2H OG WELL	Permitted	(03-016-02)	41° 52' 50.86" N	76° 51' 16.97" W
37-015-20782-00	03 016 03 T 3H OG WELL	Permitted	(03-016-03)	41° 52' 50.85" N	76° 51' 16.50" W
37-015-20783-00	03 016 04 T 4H OG WELL	Permitted	(03-016-04)	41° 52' 50.84" N	76° 51' 16.04" W
37-015-20775-00	01 003 05 J 5H OG WELL	Permitted	(01-003-05)	41° 43' 29.34" N	76° 46' 59.21" W
37-015-20776-00	T 01 003 06 J 6H OG WELL	Permitted	(01-003-06)	41° 43' 29.35" N	76° 46' 59.54" W
37-015-20804-00	03 065 05 W 5H OG WELL	Permitted	(03-065-05)	41° 53' 55.42" N	76° 53' 42.06" W
37-015-20805-00	03 065 06 W 6H OG WELL	Permitted	(03-065-06)	41° 53' 55.39" N	76° 53' 42.52" W
37-015-20806-00	03 065 07 W 7H OG WELL	Permitted	(03-065-07)	41° 53' 55.35" N	76° 53' 42.98" W
37-015-20807-00	03 065 08 W 8H OG WELL	Permitted	(03-065-08)	41° 53' 55.32" N	76° 53' 43.44" W
37-015-20826-00	03 067 05 O 5H OG WELL	Permitted	(03-067-05)	41° 48' 59.97" N	76° 53' 42.47" W
37-015-20827-00	03 067 06 Q 6H OG WELL	Permitted	(03-067-06)	41° 48' 59.74" N	76° 53' 42.61" W
37-015-20828-00	03 067 07 0 7H OG WELL	Permitted	(03-067-07)	41° 48' 59.52" N	76° 53' 42.75" W
37-015-20829-00	03 067 08 O 8H OG WELL	Permitted	(03-067-08)	41° 48' 59.29" N	76° 53' 42.88" W
37-015-20831-00	D3 058 01 M 1H OG WELL	Permitted	(03-058-01)	41° 58' 12.60" N	76° 53' 46.56" W
37-015-20832-00	03 058 02 M 2H OG WELL	Permitted	(03-058-02)	41° 58' 12.81" N	76° 53' 46.72" W
37-015-20833-00	03 058 03 M 3H OG WELL	Permitted	(03-058-03)	41° 58' 13.03" N	76° 53' 46.88" W
37-015-20834-00	03 058 04 M 4H OG WELL	Permitted	(03-058-04)	41° 58' 12.31" N	76° 53' 47.10" W
37-015-20835-00	03 058 05 M 5H OG WELL	Permitted	(03-058-05)	41° 58' 12.53" N	76° 53' 47.26" W
37-015-20875-00	01 002 03 FT 9H OG WELL	Permitted	(01-002-03)	41° 43' 28.50" N	76° 49' 11.85" W
37-015-20876-00	01 002 04 FT 10H OG WELL	Permitted	(01-002-04)	41° 43' 28.28" N	76° 49' 12.01" W
37-015-20877-00	01 002 05 FT 11H OG WELL	Permitted	(01-002-05)	41° 43' 28.06" N	76° 49' 12.16" W
37-015-20878-00	01 002 06 FT 12H OG WELL	Permitted	(01-002-06)	41° 43' 27.85" N	76° 49' 12.32" W
37-015-20891-00	03 039 01 J 1H OG WELL	Permitted	(03-039-01)	41° 54' 54.14" N	76° 50' 11.62" W
37-015-20892-00	03 039 02 J 2H OG WELL	Permitted	(03-039-02)	41° 54' 54.22" N	76° 50' 11.31" W

37-015-20893-00	03 039 03 J 3H OG WELL	Permitted	(03-039-03)	41° 54' 54.31" N	76° 50' 10.99" W
37-015-20894-00	03 039 04 J 4H OG WELL	Permitted	(03-039-04)	41° 54' 54.39" N	76° 50' 10.68" W
37-015-20895-00	03 039 05 J 5H OG WELL	Permitted	(03-039-05)	41° 54' 55.11" N	76° 50' 11.93" W
37-015-20896-00	03 039 06 J 6H OG WELL	Permitted	(03-039-06)	41° 54' 55.19" N	76° 50' 11.62" W
37-015-20898-00	03 039 08 J 8H OG WELL	Permitted	(03-039-08)	41° 54' 55.35" N	76° 50' 11.00" W
37-015-20899-00	03 046 01 B 1H OG WELL	Permitted	(03-046-01)	41° 54' 15.68" N	76° 52' 0.24" W
37-015-20900-00	03 046 02 B 2H OG WELL	Permitted	(03-046-02)	41° 54' 15.70" N	76° 51' 59.91" W
37-015-20901-00	03 046 03 B 3H OG WELL	Permitted	(03-046-03)	41° 54' 15.72" N	76° 51' 59.58" W
37-015-20902-00	03 046 04 B 4H OG WELL	Permitted	(03-046-04)	41° 54' 15.74" N	76° 51' 59.25" W
37-015-20907-00	03 040 01 B 1H OG WELL	Permitted	(03-040-01)	41° 54' 8.49" N	76° 51' 21.16" W
37-015-20908-00	03 040 02 B 2H OG WELL	Permitted	(03-040-02)	41° 54' 8.58" N	76° 51' 20.85" W
37-015-20911-00	03 040 05 N 5H OG WELL	Permitted	(03-040-05)	41" 54' 9.45" N	76° 51' 21.52" W
37-015-20912-00	03 040 06 B 6H OG WELL	Permitted	(03-040-06)	41° 54' 9.54" N	76° 51' 21,21" W
37-015-20913-00	03 040 07 B 7H OG WELL	Permitted	(03-040-07)	41° 54' 9.63" N	76° 51' 20.90" W
37-015-20914-00	03 040 08 B 8H OG WELL	Permitted	(03-040-08)	41° 54' 9.72" N	76° 51' 20.60" W
37-015-20903-00	03 046 05 B 5H OG WELL	Permitted	(03-046-05)	41° 54' 14.69" N	76° 52' 0.27" W
37-015-20904-00	03 046 06 B 6H OG WELL	Permitted	(03-046-06)	41° 54' 14.71" N	76° 51' 59.94" W
37-015-20905-00	03 046 07 B 7H OG WELL	Permitted	(03-046-07)	41° 54' 14.73" N	76° 51' 59.61" W
37-015-20897-00	03 039 07 J 7H OG WELL	Permitted	(03-039-07)	41° 54' 55.27" N	76° 50' 11.31" W
37-015-21017-00	03 025 02 E 2H OG WELL	Permitted	(03-025-02)	41° 52' 59.17" N	76° 49' 11.19" W
37-015-21018-00	03 025 03 E 3H OG WELL	Permitted	(03-025-03)	41° 52' 59.17" N	76° 49' 11.52" W
37-015-21019-00	03 025 04 E 4H OG WELL	Permitted	(03-025-04)	41° 52' 59.16" N	76° 49' 11.85" W
37-015-21020-00	03 025 05 E 5H OG WELL	Permitted	(03-025-05)	41° 52' 58.18" N	76° 49' 10.72" W
37-015-21021-00	03 025 06 E 6H OG WELL	Permitted	(03-025-06)	41° 52' 58.18" N	76° 49' 11.05" W
37-015-21022-00	03 025 07 E 7H OG WELL	Permitted	(03-025-07)	41° 52' 58.18" N	76° 49' 11.38" W
37-015-21023-00	03 025 08 E 8H OG WELL	Permitted	(03-025-08)	41° 52' 58.18" N	76° 49' 11.71" W
37-117-20799-00	DCNR 587 02 016 01 OG WELL	Permitted	(02-016-01)	41° 42' 31.66" N	76° 57' 41.86" W
37-117-20800-00	DCNR 587 02 016 02 OG WELL	Permitted	(02-016-02)	41° 42' 31.60" N	76° 57' 42.25" W
37-117-20801-00	DCNR 587 02 016 03 OG WELL	Permitted	(02-016-03)	41° 42' 31.55" N	76° 57' 42.64" W
37-117-20824-00	DCNR 587 02 012 01 OG WELL	Permitted	(02-012-01)	41° 41' 3.26" N	76° 56' 48.53" W
37-117-20826-00	DCNR 587 02 012 03 OG WELL	Permitted	(02-012-03)	41° 41' 3.49" N	76° 56' 47.66" W
37-117-20827-00	DCNR 587 02 012 04 OG WELL	Permitted	(02-012-04)	41° 41' 3.60" N	76° 56' 47.23" W
37-117-20828-00	DCNR 587 02 012 05 OG WELL	Permitted	(02-012-05)	41° 41' 3.71" N	76° 56' 46.79" W
37-117-20825-00	DCNR 587 02 012 02 OG WELL	Permitted	(02-012-02)	41° 41' 3.37" N	76° 56' 48.10" W
37-015-21135-00	03 062 01 L 1H OG WELL	Permitted	(03-062-01)	41° 54' 20.97" N	76° 49' 58.28" W
37-015-21136-00	03 062 02 L 2H OG WELL	Permitted	(03-062-02)	41° 54' 20.87" N	76° 49' 58.58" W
37-015-21137-00	03 062 03 L 3H OG WELL	Permitted	(03-062-03)	41° 54' 20.77" N	76° 49' 58.88" W

37-015-21138-00	ROY 03 062 04 L 4H OG WELL	Permitted	(03-062-04)	41° 54' 20.67" N	76° 49' 59.18" W
37-015-21154-00	5 001 02 J 2H OG WELL	Permitted	(05-001-02)	41° 48' 59.66" N	76° 13' 24.60" W
37-015-21155-00	05 001 03 J 3H OG WELL	Permitted	(05-001-03)	41° 48' 59.69" N	76° 13' 24.14" W
37-015-21156-00	05 001 04 J 4H OG WELL	Permitted	(05-001-04)	41° 49' 0,56" N	76° 13' 25.59" W
37-015-21157-00	S 05 001 05 J 5H OG WELL	Permitted	(05-001-05)	41° 49' 0.59" N	76° 13' 25.13" W
37-015-21158-00	S 05 001 06 J 6H OG WELL	Permitted	(05-001-06)	41° 49' 0.63" N	76° 13' 24.67" W
37-015-21168-00	05 003 01 C 1H OG WELL	Rermitted,	(05-003-01)	41° 48' 3.12" N	76° 11' 22.80" W
37-015-21169-00	05 003 02 C 2H OG WELL		(05-003-02)	41° 48' 4.12" N	76° 11' 22.71" W
37-015-21170-00	05 003 03 C 3H OG WELL		(05-003-03)		76° 11' 23.03" W
37-015-21171-00	05 003 04 C 4H OG WELL	Rermitted	(05-003-04)	41° 48' 4.23" N	76° 11' 23.36" W
37-015-21172-00	05 003 05 C 5H OG WELL	Permitted	(05-003-05)	41° 48' 4.29" N	
37-015-21173-00	05 003 06 C 6H OG WELL	Permitted	(05-003-06)	41° 48' 4:35"'N	76° 11' 24.00" W
37-015-21192-00	05 004 02 P 2H OG WELL	Permitted	(05-004-02)	41° 50' 12.03" N	76° 14' 19.78" W
37-015-21193-00	05 004 03 P 3H OG WELL	Permitted	(05-004-03)	41° 50' 11.77" N	76° 14' 19.96" W
37-015-21194-00	1 05 004 04 P 4H OG WELL	Permitted	(05-004-04)	41° 50' 11.50" N	76° 14' 20.14" W
37-015-21195-00	1 05 004 05 P 5H OG WELL	Permitted	(05-004-05)	41° 50' 11.24" N	76° 14' 20.32" W
37-015-21196-00	1 05 004 06 P 6H OG WELL	Permitted	(05-004-06)	41° 50' 10.97" N	76° 14' 20.49" W
37-015-21197-00	05 006 01 L 1H OG WELL	Permitted	(05-006-01)	41° 49' 36.11" N	76° 12' 3.80" W
37-015-21198-00	05 006 02 L 2H OG WELL	Permitted	(05-006-02)	41° 49' 35.97" N	76° 12' 3:45" W
37-015-21199-00	05 006 03 L 3H OG WELL	Rermitted	(05-006-03)	41° 49' 35.84" N	76° 12' 3.09" W
37-015-21200-00	05 006 04 L 4H OG WELL	Permitted	(05-006-04)	41° 49' 35.71" N	76° 12' 2.74" W
37-015-21201-00	05 006 05 L 5H OG WELL	Permitted	(05-006-05)	41° 49' 35.58" N	76° 12' 2.38" W
37-015-21217-00	011 01 F 1H OG WELL	Permitted	(03-011-01)	41° 52' 50.04" N	76° 50' 52.60" W
37-015-21218-00	011 02 F 2H OG WELL	Permitted	(03-011-02)	41° 52' 50.04" N	76° 50' 53.00" W
37-015-21219-00	011 03 F 3H OG WELL	Permitted	(03-011-03)	41° 52' 50.03" N	76° 50' 53.39" W
37-015-21220-00	011 04 F 4H OG WELL	Permitted	(03-011-04)	41° 52' 49,05" N	76° 50' 52.39" W
37-015-21221-00	011 05 F 5H OG WELL	Permitted	(03-011-05)	41° 52' 49.05" N	76° 50' 52:79" W
37-015-21222-00	011 06 F 6H OG WELL	Permitted	(03-011-06)	41° 52' 49.05" N	76° 50' 53.18" W
37-015-21227-00	03 023 01 K 1H OG	Permitted	(03-023-01)	41° 52' 37.39" N	76° 50' 9.57" W
37-015-21228-00	03 023 02 K 2H OG	Permitted	(03-023-02)	41° 52' 37.26" N	76° 50' 9.85" W

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37-015-21229-00		Permitted	(03-023-03)	41° 52' 37.13" N	76° 50' 10.13" W
37-015-21230-00		Permitted	(03-023-04)	41° 52' 37.00" N	76° 50' 10.41" W
37-015-21231-00		Permitted	(03-023-05)	41° 52' 36.87" N	76° 50' 10.69" W
37-015-21248-00	05.005 02 K-2H OG WELL	Permitted	(05=005-02)	41° 50' 14.1'1" N	76° 13' 33 34'' W
37-015-21249-00	05 005 03 K 3H OG WELL	Permitted	(05-005-03)	41° 50' 13.90" N	76° 13' 33.62" W
37-015-21250-00	05 005 04 K 4H OG WELL	Permitted	(05-005-04)	41° 50' 13.69" N	'76° 1'3' 33.90" V
37-015-21251-00	05 005 05 K 5H OG WELL	Permitted	(05-005-05)	41° 50' 13.48" N	76° 13' 34.18" V
37-015-21252-00	05 005 06 K 6H OG WELL	Permitted		41° 50' 13 28" N'	76° 13' 34.47" V
37-117-20917-00	DCNR 587 02 019 01 OG WELL	Permitted	(02-019-01)	41° 40' 53'64" N	77° 0' 0.92" W
37-117-20918-00	DCNR 587 02 019 02 OG WELL	Permitted	(02-019-02)	.41° 40' 53.36" N	77° 0' 1.19" W
37-117-20919-00	DGNR 587 02 019 03 OG WELL	Permitted	(02-019-03)	41° 40' 53.08" N	77° 0' 1.46" W
37-117-20920-00	DCNR 587 02 019 04 OG WELL	Permitted	(02-019-04)	41° 40' 52.80" N	77° 0' 1.74" W
37-015-21270-00	03.014 01 J 1H OG WELL	Permitted	(03-014-01)	41° 51' 47 48" N	76° 52' 55.75" V
37-015-21271-00	03.014 02 J.2H OG WELL	Permitted	(03-014-02)	41° 51' 47:19" N	76° 52' 55.66" V
37-015-21272-00	03 014 03 J 3H OG WELL	Permitted	(03-014-03)	41° 51' 46.90" N	76° 52' 55.58" V
37-015-21274-00	03 014 05 J 5H OG WELL	Permitted	(03-014-05)	41° 51' 47,86" N	76° 52' 53.42" \
37-015-21275-00	03 014 06 J 6H OG WELL	Permitted	(03-014-06)	41° 51' 47.57" N	76° 52' 53.34" \
37-015-21276-00	03 014 07 J 7H OG WELL	Permitted	(03-014-07)	41° 51' 47.28" N	76° 52' 53.25" \
37-015-21277-00	03 014 08 J 8H OG WELL	Permitted	(03-014-08)	41° 51' 46.99" N	76° 52' 53.17" \
37-015-21377-00	031 02 M 2H OG WELL	Permitted	(05-031-02)	41° 52' 18.40" N	76° 12"28.51" \
37-015-21378-00	031 03 M 3H OG WELL	Permitted	(05-031-03)	41° 52' 18.32" N	76° 12' 28.13" \
37-015-21346-00	5 074 02 D 2H OG WELL	Permitted	(05-074-02)	41° 55' 8.64" N	76° 16' 56.06" \
37-015-21347-00	05 074 03 D 3H OG WELL	Permitted	(05-074-03)	41° 55' 8.92" N	76° 16' 56.18" \
37-015-21348-00	05 074 04 D 4H OG WELL	Permitted	(05-074-04)	41° 55' 9.24" N	76° 16' 56.30" 1

37-015-21459-00	-	05 097 04 R 4H OG WELL	Permitted	(05-097-04)	41° 54' 11.76" N	76° 13' 38.48" W							
37-015-21460-00		05 097 05 R 5H 0G WELL	Permitted	(05-097-05)	41° 54' 11.76" N	76° 13' 38.88" W							
37-015-21461-00		TT 05 097 06 R 6H OG WELL	Permitted	(05-097-06)	41° 54′ 11.75″ N	76° 18' 39.28" W							
37-015-21318-00	No Marine	026 02 G 2H OG WELL	Permitted	(05-026-02)	41° 57' 37.91" N	76° 15' 23.65" W							
37-015-21319-00		26 03 G 3H OG WELL	Permitted	(05-026-03)	41° 57' 37 74" N	76° 15' 23.32" W							
37-015-21320-00	122	26 04 G 4H OG WELL	Permitted	(05-026-04)	41° 57' 37.57" N	76° 15' 23.00" W							
37-015-21321-00	125	026 05 G 5H OG WELL	Permitted	(05-026-05)	41° 57' 37,40" N	76° 15' 22.67" W							
37-015-21381-00		05 092 01 R 1H OG WELL	Permitted	(05-092-01)	41° 52' 19.22" N	76° 8' 14.47" W							
37-015-21382-00	1824	05 092 02 R 2H OG WELL	Permitted	(05-092-02)	41° 52" 19.27" N	76° 8' 13.11" W							
37-015-21383-00	192	05 092 03 R 3H OG WELL	Permitted	(05-092-03)	41° 52' 19.61" N	76° 8' 13.02" W							
37-015-21384-00	EIX	05 092 04 R 4H OG WELL	Permitted	(05-092-04)	41° 52' 19.95" N	76° 8' 12.93" W							
37-015-21466-00	HA	05 129 01 R 1H WELL	Permitted	(05-129-01)	41° 51' 42.29" N	76° 9' 2.56" W							
37-015-21467-00	HA	05 129 02 R 2H WELL	Permitted	(05-129-02)	.41° 51' 43.49" N	76° 9' 3.27" W							
37-015-21468-00	HA	05 129 03 R 3H WELL	Permitted	(05-129-03)	41° 51' 43.20" N	76° 9' 3.34" W							
37-015-21469-00	182	05 129 04 R 4H WELL	Permitted	(05-129-04)	41° 51' 42.91" N	76" 9' 3.41" W							
37-015-21470-00	HIA	05 129 05 R 5H WELL	Permitted	(05-129-05)	41° 51' 42.62" N.	76° 9' 3.48" W							
37-015-21473-00	6	OGWE		4				4	T 05 082 02 2H	Permitted	(05-082-02)	41° 57' 23.27" N	76° 9' 54,84" W
37-015-21474-00	เอ้ ต ณะ	T 05 082 03 3H	Permitted	(05-082-03)	41" 57' 23.33" N	76° 9' 54.45" W							
37-015-21475-00	GIENWE	T 05 082 04 4H	Permitted	(05-082-04)	41° 57' 23.38" N	76* 9' 54.06" W							
37-015-21476-00	OI-AWE	T 05 082 05 5H	Permitted	(05-082-05)	41° 57' 23,44" N	76° 9' 53.67" W							
37-015-21497-00		03 053 01 J 1H OG WELL	Permitted	(03-053-01)	41° 49' 34.50" N.	76° 51' 22.44" W							
37-015-21498-00		03 053 02 J 2H OG WELL	Permitted	(03-053-02)	41° 49' 34,75" N	76° 51' 22,43" W							
37-015-21499-00		03 053 03 J 3H OG WELL	Permitted	(03-053-03)	41* 49' 35.00" N	76° 51' 22.43" W							
37-015-21500-00	R. N	03 053 04 J 4H OG WELL	Permitted	(03-053-04)	41° 49' 35.24" N	76° 51' 22.42" W							
37-015-21501-00		03 053 05 J 5H OG WELL	Permitted	(03-053-05)	41° 49' 34.22" N	76° 51' 24.30" W							

37-015-21459-00	Carls	05 097 04 R 4H OG WEHL	Permitted	(92-082-04)	41° 54' 11.76' N	76° 13° 38.48° W
× 37-015-21460-00		DIS 097 05 R.SH.OG.WEEL	Permitted	(05-007-05)	41° 54' 11 76' N	76° 13' 38.88' W
37-015-21461-00	1.3	TT 05-097 06 R-6H OGWELL	Permitted	(90-260-50)	41° 54' 11,75" N	76° 13' 39.28' W
37-015-21318-00		026 02 G'2H'OG WEEL	Permitted	(05-026-02)	41° 57' 37.91'' N	76° 15' 23.65' W
37-015-21319-00		26 03 G SHIOG WEIL	Permitted	(05-026-03)	41° 57' 3774°N	76° 15' 23,32° W
37-015-21320-00		26 04 6 4H OG WELL	Permitted	(05-026-04)	41° 57' 37' 57' N	76° 15°23.00° W
37-015-21321-00		026.05 G 5H OG WELL	Permitted	(05-026-05)	44° 57' 37,40" N	76° 15' 22.67" W
37-015-21381-00		15 092703 R.114 OG WELL	Reimitted	(02:032:03)	41° 52 19.22" N	76° 8' 14 47" W
37-015-21382-00		05:092:02 R. 2H.OG WELL	Reputted	(05-092:02)	4f° 52' 19:27''N	76° 8' 13.11" W
37-016-21383-00		15.092.037R13H OGWNELL	Rennitted	(05-092-03)	A1252 19.61 N	76° 8: 13.02° W
375015521384400			Remitted	(05-092-04)	AL 62. 19:96 N	76° 8° 12.93" W
37-015-21466-00		05(129:0)# R 4H WEELL ***	Remitted	(05-129-01)	41° 51442 29° N	F 776* 9* 2:56" W
37-015-28467-00		15,129,021R 2H WELL	Permitted:	(05:5129:02)	A1* 51' 43 49' N	Wm22.8/18, 391
37-045-24468-00		051/29.03 R. 3H WELL	Permitted	(05-129-03)	41° 51' 43.20" N	76° 9' 3.34" W
37-015-21469-00		051129104-R.4H.WEEL	Rétmitted	(05-129-04)	41°.51'42.91" N	76° 9' 3.41" W
37-015-21470-00		06/129/05/R.SHWEELE	Permitted	(02-129-05)	41° 51' 42'62' N	76° 9' 3.48" W
37-015-21473-00	0.GWIEEE	TE 082:02 ZH	Permitted	(05-082-02)	412.57:23.27"N	76° 9' 54.84" W
37-015-21474-00	Octavitica was	T 05 082 03 3H	Permitted	(05-082-03)	41° 57' 23,33" N	76° 9' 54.45" W
37-015-21475-00	(6,crwinelet	T 05.082'04 4H	Permitted	(05-082-04)	41° 57' 23.38" N	76° 9' 54.06" W
37-015-21476-00	(O'C-SVVIEIE)	11	Permitted	(05-082-05)	41° 57' 23, 44" N	76° 9' 53.67" W
37-015:21497-00		03.053.01 J. 1H. OG WELL	Permitted:	(03-053-01)	44° 49' 34'50' N	76° 51' 22.44" W
37-015-21498-00		D3 053 02 J 2H 0G WELL	Permitted	(03:02:3-02)	41° 49' 34,75' N	76° 51' 22, 43' W
37-015-21499400		08 053 03 J 3H OG WELL	Renmitted	(03-053-03)	41° 49' 35.00"N	1.11
37-015-21500-00		03 053 04 J 4H OG WELL	Retmitted	(03-053-04)	41° 49' 35.24" N	126° 51' 22.42" W
37-045-24501-00		03 053 05 JISH OC WERE	Rennited	(03-053-05)	N	76°51'24.30°W

37-015-21506-00	165 02 R 2H OG	Permitted	(05-165-02)	41° 59' 7.30" N	76° 15' 1.40" W
37-015-21507-00	05 165 03 R 3H OG	Permitted	(05-165-03)	41° 59' 7.57" N	76° 15' 1.58" W
37-015-21508-00	WELL 165 04 R 4H OG	Permitted	(05-165-04)	41° 59' 7.83" N	76° 15' 1.76" W
37-015-21509-00	05 165 05 R 5H OG	Permitted	(05-165-05)	41° 59' 8.10" N	76° 15' 1.94" W
37-015-21510-00	N 05 165 06 R 6H OG	Permitted	(05-165-06)	41° 59' 8.36" N	76° 15' 2.12" W
37-015-21515-00	05 080 02 R OG WELL	Permitted	(05-080-02)	41° 56' 3.28" Ñ	76° 11' 41.52" W
37-015-21516-00	05-080 03 R OG WELL	Rermitted	(05-080-03)	41° 56' 3.22" N	76° 11' 41.91" W
37-015-21517-00	05.080 04 R OG WELL	Permitted-	(05-080-04)	41° 56' 3.16" N	76° 11' 42.30" W
37-015-21518-00	05 080 05 R OG WELL	Permitted	(05-080-05)	41° 56' 3.10" N	76° 11' 42.69" W
37-015-21519-00	05 080 06 R OG WELL	Permitted	(05-080-06)	41° 56' 3.03" N	76° 11' 43.08" W
37-015-21186-00	- REPERMITTED	Permitted	(05-009-02)	41° 49' 51.08" N	76° 7' 51.80" W
37-015-21187-00	5 009 03 V 3H OG WELL - REPERMITTED	Permitted	(05-009-03)	41° 49' 51.10" N	76° 7' 51.40" W
37-015-21188-00	A 05 009 04 V 4H OG WELL	Permitted	(05-009-04)	41° 49' 51.11" N	76° 7' 51.01" ₩
37-015-21189-00	N 05 009 05-V-5H OG WELL	Permitted	(05-009-05)	41° 49' 51.13" N	76° 7' 50.61" W
37-015-21190-00	A SEPERMITTED	Permitted	(05-009-06)	41° 49' 51.15" N	76° 7' 50.22" W
37-015-21485-00	F 05 180 02 2H OG WELL	Permitted	(05-180-02)	41° 56' 33.73" N	76° 18' 52.19" W
37-015-21486-00	180 03 3H OG	Permitted	(05-180-03)	41° 56' 33.47" N	76° 18' 51.99" W
37-015-21487-00	P 6 180 04 4H OG WELL	Permitted	(05-180-04)	41° 56' 33.22" N	76° 18' 51.78" W
37-015-21488-00	180 05 5H OG.	Permitted	(05-180-05)	41° 56' 32.96" N	76° 18' 51.58" V
37-015-21489-00	05 180 06 6H OG	Permitted	(05-180-06)	41° 56' 32.71" N	76° 18' 51.38" V
37-015-21542-00	1 8 049 02 D 2H OG WELL	Permitted	(03-049-02)	41° 57' 6.83" N	76° 51' 6.87" W
37-015-21543-00	103 049 03 D 3H OG WELL	Permitted	(03-049-03)	41° 57' 6.60" N	76° 51' 6.98" W

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37-015-21544-00	3 049 04 D 4H OG WELL	Permitted	(03-049-04)	41° 57' 6,37" N	76° 51' 7.09" W
37-015-21545-00	3 049 05 D 5H OG WELL	Permitted	(03-049-05)	41° 57' 6.14" N	76° 51' 7.21" W
37-015-21546-00	3 049 06 D 6H OG WELL	Permitted	(03-049-06)	41° 57' 5.90" N	76° 51' 7.32" W
37-015-21567-00	05 223 02 W 2H OG WELL	Permitted	(05-223-02)	41° 57' 55.14" N	76° 16' 47.82" W
37-015-21568-00	223 03 W 3H OG WELL	Permitted	(05-223-03)	41° 57' 55,31" N	76° 16' 48.13" W
37-015-21569-00	5 223 04 W 4H OG WELL	Permitted	(05-223-04)	41° 57' 55.49" N	76° 16' 48.45" W
37-015-21595-00	5 046 02 W 2H OG WELL	Permitted	(05-046-02)	41° 54' 37.88" N	76° 10' 59.38" W
37-015-21596-00	5 046 03 W 3H OG WELL	Permitted	(05-046-03)	41° 54' 37,62" N	76° 10' 59,56" W
37-015-21597-00	046 04W 4H OG WELL	Permitted	(05-046-04)	41° 54' 37.36" N	76° 10' 59.74" W
37-015-21598-00	05 046 05 W 5H OG WELL	Permitted	(05-046-05)	41° 54' 37.09" N	76° 10' 59.92" W
37-015-21599-00	05.046 06 W 6H OG WELL	Permitted	(05-046-06)	41° 54' 36.83" N	76° 11' 0.11" W
37-117-20811-00	DCNR 587 02 003 01 OG WELL - REPERMITTED	Permitted	(02-003-01)	41° 42' 11.30" N	76° 56' 52.16" W
37-117-20812-00	DCNR 587 02 003 02 OG WELL - REPERMITTED	Permitted	(02-003-02)	41° 42' 11.60" N	76° 56' 52.09" W
37-117-20813-00	DCNR 587 02 003 03 OG WELL - REPERMITTED	Permitted	(02-003-03)	41° 42' 11.89" N	76° 56' 52.02" W
37-117-20814-00	DCNR 587 02 003 04 OG WELL - REPERMITTED	Permitted	(02-003-04)	41° 42' 12.18" N	76° 56' 51.95" V
37-117-20815-00	DCNR 587 02 003 05 OG WELL - REPERMITTED	Permitted	(02-003-05)	41° 42' 12.20" N	76° 56' 53.95" W
37-117-20816-00	DCNR 587 02 003 06 OG WELL - REPERMITTED	Permitted	(02-003-06)	41° 42' 11.91" N	76° 56' 54.02" W
37-117-21204-00	DCNR 587 02 003 07 OG WELL	Permitted	(02-003-07)	41° 42' 11.33" N	76° 56' 54.16" W
37-117-21205-00	DCNR 587 02 003 08 OG WELL	Permitted	(02-003-08)	41° 42' 11.62" N	76° 56' 54.09" W
37-117-21206-00	DCNR 587 02 015 01 OG WELL	Permitted	(02-015-01)	41° 41' 28.11" N	76° 57' 20.92" W
37-117-21207-00	DCNR 587 02 015 02 OG WELL	Permitted	(02-015-02)	41° 41' 28.18" N	76° 57' 21.37" W
37-117-21208-00	DCNR 587 02 015 03 OG WELL	Permitted	(02-015-03)	41° 41' 28.24" N	76° 57' 21.83" W
37-117-21209-00	DCNR 587 02 015 04 OG WELL	Permitted	(02-015-04)	41° 41' 28.31" N	76° 57' 22.28" W

37-117-21210-00	DCNR 587 02 015 05 OG WELL	Permitted	(02-015-05)	41° 41' 28.37" N	76° 57' 22.73" W
37-015-21614-00	5 178 01 1H OG	Permitted	(05-178-01)	41° 56' 45.05" N	76° 20' 4.28" W
37-015-21615-00	05 178 02 2H OG	Permitted	(05-178-02)	41° 56' 46.30" N	76° 20' 3.22" W
37-015-21616-00	1 05 178 03 3H OG	Permitted	(05-178-03)	41° 56' 46.14" N	76° 20' 2.88" W
37-015-21617-00	1 05 178 04 4H OG WELL	Permitted	(05-178-04)	41° 56' 45.98" N	76° 20' 2.55" W
37-015-21618-00	05 178 05 5H OG	Permitted	(05-178-05)	41° 56' 45.82" N	76° 20' 2.21" W
37-015-21619-00	05 178 06 6H OG	Permitted	(05-178-06)	41° 56' 45.67" N	76° 20' 1.88" W
37-015-21624-00	03 073 01 G 1H OG WELL	Permitted	(03-073-01)	41° 49' 2.87" N	76° 48' 34.39" W
37-015-21625-00	03 073 02 G 2H OG WELL	Permitted	「「「「「「「「」」」「「「」」「「」」「「」」「「」」」「「」」」「「」」」「」」「」」「」」「」」「」」「」」「」」「」」「」」「」」」「」」「」」」「」」「」」」「」」」「」」」「」」」「」」」「」」」」	Ettern And B	76° 48' 34.35" W
37-015-21626-00	D3 073 03 G 3H OG WELL	Permitted	(03-073-03)	41° 49' 2.38" N	76° 48' 34.31" W
37-015-21627-00	03 073 04 G 4H OG WELL	Permitted	(03-073-04)	41° 49' 2.13" N	76° 48' 34.26" W
37-015-21628-00	03 073 05 G 5H OG WELL	Permitted	(03-073-05)	41° 49' 1.89" N	76° 48' 34.22" V
37-015-21629-00	03 073 06 G 6H OG WELL	Permitted.	(03-073-06)	41° 49' 1.64" N	76° 48' 34.18" V
37-015-21630-00	03.073.07 G 7H OG WELL	Permitted	(03-073-07)	41° 49' 1.40" N	76° 48' 34.13" V
37-015-21611-00	05 167 01 R 1H OG	Permitted	(05-167-01)	41° 59' 27.35" N	76° 14' 55.32" W
37-015-21612-00	05 167 02 R 2H OG	Permitted	(05-167-02)	41° 59' 27.11" N	76° 14' 55.54" W
37-015-21613-00	N 05 167 03 R 3H OG	Permitted	(05-167-03)	41° 59' 26 86" N	76° 14' 55.76" W
37-015-21631-00	05 102 01 E 1H OG WELL	Permitted	(05-102-01)	41° 54' 55.80" N	76° 9' 33.44" W
37-015-21632-00	05 102 02 E 2H OG WELL	Permitted	(05-102-02)	41° 54' 54 59" N	76° 9' 32.29" W
37-015-21633-00	05 102 03 E 3H OG WELL	Permitted	(05-102-03)	41° 54' 54.42" N	76° 9' 32.61" W
37-015-21634-00	102 04 E 4H OG WELL	Permitted	(05-102-04)	41° 54' 54.25" N	76° 9' 32.93" W
37-015-21640-00	05 081 01 D 1H OG WELL	Permitted	(05-081-01)	41° 55' 5.58" N	76° 16' 5.22" W
37-015-21641-00	05 081 02 D 2H OG WELL	Permitted	(05-081-02)	41° 55' 5.29" N	76° 16' 5.31" W
37-015-21642-00	E 05 081 03 D 3H OG WELL	Permitted	(05-081-03)	41° 55' 5.00" N	76° 16' 5.39" W

37-015-21643-00		E 05 081 04 D 4H OG WELL	Permitted	(05-081-04)	41° 55' 4.71" N	76° 16' 5.48" W
37-015-21644-00		081 05 D 5H OG WELL	Permitted	(05-081-05)	41° 55' 4.42" N	76° 16' 5.56" W
37-015-21638-00		058 03 J 3H OG WELL	Permitted	(05-058-03)	41° 53' 8.66" N	76° 14' 6.81" W
37-015-21639-00		058 04 J 4H OG WELL	Permitted	(05-058-04)	41° 53' 8.69" N	76° 14' 7.20" W
37-015-21636-00	8	058-01 J 1H OG WELL	Permitted	(05-058-01)	41° 53' 9.62" N	76° 14' 6.28" W
37-015-21637-00		58-02 J 2H OG WELL	Permitted	(05-058-02)	41° 53' 8.63" N	76° 14' 6.41" W
37-117-21091-00	WELL	02 100 01 R 1H OG	Permitted	(02-100-01)	41° 43' 53.15" N	77° 3' 2,99" W
37-117-21092-00	WELL	02 100 02 R 2H OG	Permitted	(02-100-02)	41° 43' 52.87" N	77° 3' 2.86" W
37-117-21093-00		02 100 03 R 3H OG	Permitted	(02-100-03)	41° 43' 52.59" N	77° 3' 2.74" W
37-117-21094-00	WELL	02 100 04 R 4H OG	Permitted	(02-100-04)	41° 43' 52.31" N	77° 3' 2.62" W
37-117-21095-00	WELL	02 100 05 R 5H OG	Permitted	(02-100-05)	41° 43' 52.03" N	77° 3' 2.50" W
37-117-21096-00		R 02 100 06 R 6H OG	Permitted	(02-100-06)	41° 43' 51.74" N	77° 3' 2.38" W
37-015-21606-00		100 01 R 1H OG WELL	Permitted	(05-100-01)	41° 55' 15.53" N	76° 10' 18.25" W
37-015-21607-00		100 02 R 2H OG WELL	Permitted	(05-100-02)	41° 55' 15.27" N	76° 10' 18.05" W
37-015-21608-00	51 C	100 03 R 3H OG WELL	Permitted	(05-100-03)	41° 55' 15.01" N	76° 10' 17.85" W
37-015-21609-00	3	100 04 R 4H OG WELL	Permitted	(05-100-04)	41° 55' 14.75" N	76° 10' 17.66" W
37-015-21610-00	1	100 05 R 5H OG WELL	Permitted	(05-100-05)	41° 55' 14.50" N	76° 10' 17.46" W



Valid Permits 234

		Transferred to T	alisman USA		
Transfe	arred to TEUSA	Permit #	Date of Transfer	Town	County
n-26	54 1H	37-117-20330-00	1/8/2010	Jackson	Tioga:
	10 5H	37-117-20391-00	6/22/2010	Jackson	Tioga
	04 1H	37-117-20327-00			Tioga.
	08'1H	37-117-20325-00	3/1/2010	Jackson	Hoga.
	6 1H	37-117-20324-00	6/22/2010	Jackson	Tioga
	02 1H	37-117-20328-00	6/22/2010	Jackson	Tioga
	7 1H	37-117-20304-00	3/1/2010	Jackson	Tioga
	51 1H	37-117-20297-00	1/7/2010	Jackson	Tioga
	1-1H	37-117-20296-00	1/8/2010	Jackson	Tioga
		37-117-20197-00	?	Jackson	Tioga
	59 1H	37-117-20298-00	1/7/2010	Jackson	Tioga
	h 269 1H	37-117-20299-00	1/8/2010	Jackson	Tioga
	268 1H	37-117-20301-00	1/7/2010	Jackson	Tioga
	2 1H	37-117-20295-00	1/8/2010	Jackson	Tioga

WELL 911 ST ADDRES STREET ADDRESS	A PROPERTY AND A DECK	County (location of well)	Town (location of well)	Latitude North	Longitude West
	PA	Tioga	Jackson	41.991175	-76.956719
L	PA	Tioga	Jackson	41.954631	-76.954706
	PA	Tioga	Jackson	41.936206	-77.01975
	PA	Tioga	Jackson	41.947025	-76.977608
. 2	PA	Tioga	Jackson	41.931456	-76.993294
1	PA	Tioga	Jackson	41.92622	-77.045198
L	PA	Tioga	Jackson	41.987964	-77.051917
R	PA	Tioga	Jackson	41.988425	-76,991133
	PA	Tioga	Jackson	41.963478	-77.0004
	PA	Tioga	Jackson	41.984136	77.026672
ve	PA	Tioga	Jackson	41.989	-77.014
	PA	Tioga	Jackson	41.958998	-77.022233
3	PA	Tioga	Jackson	41.966686	-77.0386
	PA	Tioga	Jackson	41.98925	-76.979903

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NON-OPERATED Talisman

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Vell Name	Operator		County	Stat
	Alta Resources, L.L.C.	Liberty	Susquehanna	PA
11H	Alta Resources, L.L.C.	Liberty	Susquehanna	PA
5H	Chesapeake Appalachia, L.L.C.	West Burlington	Bradford	PA
Н	Chesapeake Appalachia, L.L.C.	Terry/Albany	Bradford	PA
Н	Chesapeake Appalachia, L.L.C.	Terry/Albany	Bradford	PA
Di H	Chesapeake Appalachia, L.L.C.	Standing Stone	Bradford	PA
H	Chesapeake Appalachia, L.L.C.	Orwell	Bradford	PA
5H	Chesapeake Appalachia, L.L.C.	Standing Stone	Bradford	PA
2H	Chesapeake Appalachia, L.L.C.	Smithfield	Bradford	PA
2H	Chesapeake Appalachia, L.L.C.	Terry	Bradford	PA
2H	Chesapeake Appalachia, L.L.C.	Herrick	Bradford	PA
5H	Chesapeake Appalachia, L.L.C.	Smithfield	Bradford	PA
H	Chesapeake Appalachia, L.L.C.	Orwell	Bradford	PA
5H	Chesapeake Appalachia, L.L.C.	Tuscarora	Bradford	PA
2H	East Resources, Inc.	Jackson	Tioga	PA
BH	East Resources, Inc.	Jackson	Tioga	PA
\$H	East Resources, Inc.	Jackson	Tioga	PA
5H	East Resources, Inc.	Jackson	Tioga	PA
6H	East Resources, Inc.	Jackson	Tioga	PA
I 1H	East Resources, Inc.	Jackson	Tioga	PA
I 3H	East Resources, Inc.	Jackson	Tioga	PA
14H	East Resources, Inc.	Jackson	Tioga	PA
15H	East Resources, Inc.	Jackson	Tioga	PA
I 6H	East Resources, Inc.	Jackson	Tioga	PA
rd 1H	Chesapeake Appalachia, L.L.C.	Standing Stone	Bradford	PA
H	Chesapeake Appalachia, L.L.C.	Herrick	Bradford	PA
1	Chesapeake Appalachia, L.L.C.	Wyalusing	Bradford	PA
H	Chesapeake Appalachia, L.L.C.	Rome	Bradford	PA
	Chesapeake Appalachia, L.L.C.	Wyalusing	Bradford	PA
2H	Chesapeake Appalachia, L.L.C.	Orwell	Bradford	PA
5H	Chesapeake Appalachia, L.L.C.	Orwell	Bradford	PA
H	Chesapeake Appalachia, L.L.C.	Smithfield	Bradford	PA
r2H	Chesapeake Appalachia, L.L.C.	Litchfield	Bradford	PA
2H	Chesapeake Appalachia, L.L.C.	Litchfield	Bradford	PA
i 5H	Chesapeake Appalachia, L.L.C.	Wyalusing	Bradford	PA
5H	Chesapeake Appalachia, L.L.C.	Litchfield	Bradford	PA
2H	Chesapeake Appalachia, L.L.C.	Litchfield	Bradford	PA
2H	Chesapeake Appalachia, L.L.C.	Rome	Bradford	PA
H	Chesapeake Appalachia, L.L.C.	Rome	Bradford	PA
r 4H	Carrizo Oil & Gas, Inc.	Forest Lake	Susquehanna	PA
4	Chesapeake Appalachia, L.L.C.	Rome	Bradford	PA
	Chesapeake Appalachia, L.L.C.	Smithfield	Bradford	PA
5H	Chesapeake Appalachia, L.L.C.	Ulster	Bradford	PA
50	Chesapeake Appalachia, L.L.C.	Herrick	Bradford	PA
-	Chesapeake Appalachia, L.L.C.	Wysox	Bradford	PA
H		Litchfield	Bradford	
an 2H	Chesapeake Appalachia, L.L.C.			PA
2H	Chesapeake Appalachia, L.L.C.	Rome	Bradford	PA
5H	Chesapeake Appalachia, L.L.C.	Rome	Bradford	PA
H	Chesapeake Appalachia, L.L.C.	Rome	Bradford	PA PA
2H	Chesapeake Appalachia, L.L.C.	Standing Stone	Bradford	

NON-OPERATED Talisman

-	and the second second second			
5H	Chesapeake Appalachia, L.L.C.	Wysox	Bradford	PA
j h 2H	Chesapeake Appalachia, L.L.C.	Leroy	Bradford	PA
-51-	Chesapeake Appalachia, L.L.C.	Athens	Bradford	PA
4 2H	Chesapeake Appalachia, L.L.C.	Wyalusing	Bradford	PA
2H	Chesapeake Appalachia, L.L.C.	Herrick	Bradford	PA
H	Chesapeake Appalachia, L.L.C.	Litchfield	Bradford	PA
ee 2H	EOG Resources, Inc.	Springfield	Bradford	PA
Iollow 2H	Chesapeake Appalachia, L.L.C.	Smithfield	Bradford	PA
2H	Chesapeake Appalachia, L.L.C.	Ulster	Bradford	PA
n 2H	Chesapeake Appalachia, L.L.C.	Orwell	Bradford	PA
4H	Chesapeake Appalachia, L.L.C.	Wyalusing	Bradford	PA
	Chesapeake Appalachia, L.L.C.	Albany	Bradford	PA
view Farms		Leroy	Bradford	PA
H	Chesapeake Appalachia, L.L.C.	Overton	Bradford	PA
r North 4H		Rome	Bradford	PA
5H	Chesapeake Appalachia, L.L.C.	Asylum	Bradford	PA
5H	Chesapeake Appalachia, L.L.C.	Rome	Bradford	PA
H	Chesapeake Appalachia, L.L.C.	Litchfield	Bradford	PA
d 4H	Chesapeake Appalachia, L.L.C.	Sheshequin	Bradford	PA
Н	Chesapeake Appalachia, L.L.C.	Liberty	Tioga	PA
North 5H	Chesapeake Appalachia, L.L.C.	Rome	Bradford	PA
15H	Chesapeake Appalachia, L.L.C.	Ulster	Bradford	PA
NE 1H	Chesapeake Appalachia, L.L.C.	Sheshequin	Bradford	PA
Ck 3H	Chesapeake Appalachia, L.L.C.	Rome	Bradford	PA
75H	Chesapeake Appalachia, L.L.C.	Sheshequin	Bradford	Pa
k 2H	Chesapeake Appalachia, L.L.C.	Fox	Sullivan	PA
2H	Chesapeake Appalachia, L.L.C.	Smithfield	Bradford	PA
ss 4H	Chesapeake Appalachia, L.L.C.	Rush	Susquehanna	PA
ss 5H	Chesapeake Appalachia, L.L.C.	Rush	Susquehanna	PA
ss 6H	Chesapeake Appalachia, L.L.C.	Rush	Susquehanna	PA
3H	Chesapeake Appalachia, L.L.C.	Wyalusing	Bradford	PA
a 5H	Chesapeake Appalachia, L.L.C.	Auburn Township	Susquehanna	PA
H	Chesapeake Appalachia, L.L.C.	Smithfield	Bradford	PA
БН	Chesapeake Appalachia, L.L.C.	Smithfield	Bradford	PA
	Chesapeake Appalacilia, L.L.O.	Orwell	Diadioid	I A
h 2H	Chesapeake Appalachia, L.L.C.	Rome	Bradford	PA
and the second	Chesapeake Appalachia, L.L.C.	Litchfield	Bradford	PA
5H	Chesapeake Appalachia, L.L.C.	Litchfield	Bradford	PA
5H	Chesapeake Appalachia, L.L.C.	Litchfield	Bradford	PA
57 2H	SWEP!	Jackson&Lawrence		PA
57 3H	SWEPI	Jackson&Lawrence		PA
57 4H	SWEPI	Jackson&Lawrence		PA
57 5H	SWEPI	Jackson&Lawrence		PA
97 6H	SWEPI	Jackson&Lawrence		PA
			Bradford	PA
1 259 411	Chesapeake Appalachia, L.L.C. SWEPI	Ulster Township		PA
T 258 1H		Jackson Township		
5H	Chesapeake Appalachia, L.L.C.	Smithfield	Bradford	PA
1H	Chief	Lenox	Susquehanna	PA
5H	Chesapeake Appalachia, L.L.C.	Litchfield	Bradford	PA
15H	Chesapeake Appalachia, L.L.C.	Litchfield	Bradford	PA
BRA 2H	Chesapeake Appalachia, L.L.C.	Sringfield/Smithfield		PA
	Talisman Energy USA Inc.	Litchfield	Bradford	PA

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	Chesapeake Appalachia, L.L.C.	Athens	Bradford	PA
	Talisman Energy USA Inc.	Litchfield	Bradford	PA
đ-A	Talisman Energy USA Inc.	Nelson	Tioga	PA
#1	Shell - SWEPI	Jackson	Tioga	PA
261#1H	Shell - SWEPI	Jackson	Tioga	PA
259#1H	Shell - SWEPI	Jackson	Tioga	PA
r 268 #1H	Shell - SWEPI	Jackson	Tioga	PA
271 #1H	Shell - SWEPI	Jackson	Tioga	PA
262-1H	Shell - SWEPI	Jackson	Tioga	PA
269 #1	FShell - SWEPI	Jackson	Tioga	PA
406-1H	Shell - SWEPI	Jackson	Tioga	PA
408-1H	Shell - SWEPI	Jackson	Tioga	PA
404-1H	Shell - SWEPI	Jackson	Tioga	PA
264-1H	Shell - SWEPI	Jackson	Tioga	PA
412-1H	Shell - SWEPI	Jackson	Tioga	PA
257-1H	Shell - SWEPI		Tioga	PA
a 457-1H	Shell - SWEPI	Jackson	Tioga	PA
58-1H	Shell - SWEPI	Jackson	Tioga	PA
410-5H	Shell - SWEPI	Jackson	Tioga	PA
402-1H	Shell - SWEPI	Jackson	Tioga	PA
259 5H	Shell - SWEPI	Jackson	Tioga	PA
259 4H	Shell - SWEPI	Jackson	Tioga	PA
259 2H	Shell - SWEPI	Jackson	Tioga	PA
259 3H	Shell - SWEPI	Jackson	Tioga	PA
261 3H	Shell - SWEPI	Jackson	Tioga	PA
259 6H	Shell - SWEPI	Jackson	Tioga	PA
261 2H	Shell - SWEPI	Jackson	Tioga	PA
261 5H	Shell - SWEPI	Jackson	Tioga	PA
261 6H	Shell - SWEPI	Jackson	Tioga	PA
261 4H	Shell - SWEPI	Jackson	Tioga	PA
400-1H	Shell - SWEPI	Jackson	Tioga	PA
1 456-2H	Shell - SWEPI	Jackson	Tioga	PA

2540-PM-BWM0347 Rev. 1/2011



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

FORM 26R CHEMICAL ANALYSIS OF RESIDUAL WASTE ANNUAL REPORT BY THE GENERATOR

	ust be fully and accurated by printed in the spaces				JSE ONLY d & General Notes
each attache	d sheet as Form 26R, r e date on attached sheet	eference the item numb	per and identify the da		d & General Notes
General Refe	rence 287.54				
Date Prepare	d/Revised Febr	ruary 11, 2011			
	SECTION A.	CLIENT (GENERATOR	R OF THE WASTEN IN	FORMATION	
Company Na					
	ergy USA Inc.				
	y, Name of Parent Compa	iny			Generator ID#
Talisman En	ergy Inc. iling Address Line 1		ompany Mailing Addres	N/A	
50 Pennwoo		C	ompany walling Addres	s Line 2	
	dress Last Line - City	State	Zip+4	Phone	Ext
Warrendale		PA	15086	(724) 814-530	
	ntact Last Name	First Name	MI	Suffix	
Brown		Dina			
Municipality Warrendale			County		
Contact Phor	e Ext	Contact Email Address	Allegheny		
(724) 814-53		dybrown@talismanusa.d	com		
Is the waste g	enerated at the Company	Mailing Address (noted	above)?		Yes 🛛 No
If 'No', descri	be location of waste gene	ration and storage. Wast	te is generated during the	drilling, completion,	and production of
	the 264 1 H well pad	site located at 2501 Skyline	e Drive, Jackson Townshi	p, Tioga County, PA.	The waste is
temporarily sto	pred in tanks onsite.				
Municipality	Jackson	County Tioga		State	PA
		SECTION B. WAST			
Residual	Residua	al Waste	1	Unit of	Time
Waste Code	Code De	scription	Amount	Measure	Frame
802	Brine and Wastewater		1 1 2 4	□cuyd □gal □lb ⊠ton	One Time
1		1. GENERAL P			
a. pH Ra	nge 6	to 7	(based on analyses or ki	nowledge)	
		Liquid Waste (EPA Me			
		Solid (EPA Method 90			
		Gas (ambient tempera			
c. Physi		Color translucent ye		- injaroodinooni	
		Number of Solid or Liquid		One	
		Describe each phase of s	separation. Liquid		
		2. CHEMICAL ANALY	SIS ATTACHMENTS		
	sults of a detailed chemic ctions, is attached.	The second	a set of the set of the set of the set of the set	the 🛛	Yes No
	iled description of the wa	ste sampling method is a	attached.	X	Yes No
	uality assurance/quality c				Yes No
	sults of the hazardous wa	aste determination is atta	ched.	\boxtimes	Yes 🗌 No
	icable, a detailed explana actual chemical analysis		enerator knowledge in	the second se	No 🛛 N/A

		3. PROCESS DESCRIPTION	& SCHEMATIC ATTACH	IENTS			
a.						No	
b.		ematic of the manufacturing and/or pollution control processes producing the waste, ecified in the instructions, is attached.			Yes Yes	No No	
.		ion submitted are confidential, the substantiation for Yes described in the instructions, is attached.			No	N//	
	SEC	TION C. MANAGEM	ENT OF RESIDUA	L WASTE			
		1. PROCESSING OR	DISPOSAL FACILITY(IES)				
The	area below (ad.) will accomm	odate the identification of	two facilities. Attach ad	ditional sheets	if necessary	<i>I</i> .	
a.	Solid waste permit number MDD980555189	(s) for processing or dispo	osal facility being utilize	d.			
) .	Facility Name	Clean Harbors of Ball	timore				
	Address Line 1	1910 Russell St					
	Address Line 1						
	Address City State ZIP	Baltimore	MD	21230			
	Municipality	Baltimore	County				
	Facility Contact Name Title						
	Phone	410-244-8200	Email Address			-	
1.	Volume of waste shipped t 446	o processing or disposal fa	acility in the previous ye	ear. (check one)		
ı.	Solid waste permit number 0008451	(s) for processing or dispo	sal facility being utilize	d.			
).	Facility Name	Sunbury Generation	Nastewater Treatment	Facility			
	Address Line 1	Old Trail Road					
	Address Line 1	P.O. Box 517					
	Address City State ZIP	Shamokin Dam	PA	17876			
	Municipality	Shamokin Dam	County S	nyder			
с.	Facility Contact Name Title	Sheldon Kowaleski					
	Phone	(570) 884-1235	Email Address				
d.	Volume of waste shipped to processing or disposal facility in the previous year.						
	259	🗌 cu yd 🗌 gal	☐ lb ⊠ ton	(check one)		
-		2. BENE	FICIAL USE				
	Has the waste been approv				Yes	No No	
	If "Yes", list the general permit number or approval number.				- Mary	-	
).	Volume of waste beneficial						
		Cuyd gal	☐ lb ☐ ton	(check one)		

		3. PROCESS DESCRIPTION	and the entitle internation of the real of	Extension and the second se			
а.		A detailed description of the manufacturing and/or pollution control processes producing Yes No the waste, as specified in the instructions, is attached.					
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.						
c.	If portions of the informati a confidentiality claim, as	on submitted are confide described in the instruct	ntial, the substantiatio ons, is attached.	n for 🗌 Yes	No No		N/A
	SEC	TION C. MANAGEI	MENT OF RESIDU	JAL WASTE			
	and the second sec		R DISPOSAL FACILITY(I				
The	area below (ad.) will accomm	nodate the identification	of two facilities. Attach	h additional sheets	if necessary	1.	
a,	Solid waste permit number 101508	r(s) for processing or dis	posal facility being util	lized.			
b.	Facility Name	PA Brine					
	Address Line 1	5148 US 322					
	Address Line 1						
	Address City State ZIP	Franklin	PA	16323			
	Municipality	Franklin	County	Venango		_	
с.	Facility Contact Name	Elton DeLong					
	Title	Plant Manager					_
	Phone	(814) 437-3593	Email Address	info@pabrine.co	m		
d.	Volume of waste shipped t 229	oprocessing or disposa	I facility in the previous				
a.	Solid waste permit number 010278	(s) for processing or dis	posal facility being util	lized.			
b.	Facility Name	Waste Treatment C	orp. Warren County				
	Address Line 1						
	Address Line 1						
	Address City State ZIP	Warren	PA	16365			
_	Municipality	Warren	County	Warren	_		
C.	Facility Contact Name	Rich Gorton					
	Title	044 700 4700	P				
	Phone	814-726-1500	Email Address	info@waste-trea	tment.net		
d.	Volume of waste shipped t 225	o processing or disposa	facility in the previous				
		2. BE	NEFICIAL USE				
-						M	
а.	Has the waste been approv	red for beneficial use?			Yes		No
а.	Has the waste been approv If "Yes", list the general pe		number.		L Yes		No
a.		rmit number or approval			L Yes		No

			SECTION	D. CERTIFICATION
Rep obta know	ort and all attached docu ining the information, I wledge. I understand tha	uments verify t the s	and that based that the submitte ubmission of fals	xamined and am familiar with the information submitted in this Annual upon my inquiry of those individuals immediately responsible for ted information is true, accurate and complete to the best of my se information herein is made subject to the penalties of 18 Pa. C.S. which include fine and imprisonment.
Che	ck the following, if applica	ble:		and the second
	I certify the information and has not char		ired in Section B-	-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:	_		
	I certify the information and has not char		ired in Section B-	-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:	_		
	I certify the information for the year and I			Process Description and Schematic, was supplied to the Department
	Form Submitted:		Form 26R	
8			Other (specify)	
	Date Submitted:			
Nam	e of Responsible Official			Title Environmental Specialist
Dina	Brown			
Sign	ature Ah	_	Slor	- Date 2/2.5/4
	he		0	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

				red information must be			SE ONLY	
each attache	d sheet as Form	26R, referen		ace is necessary, identify er and identify the date noted below.		Received	& General	Notes
General Refe	rence 287.54							
Date Prepare	d/Revised	February	11,2011					
	SECTION			OF THE WASTE) INF	ORMATI	ON	-	
Company Na								
	ergy USA Inc.					-		
	ry, Name of Parent (Company					enerator l	D#
alisman En						N/A		
	iling Address Line	1	C	ompany Mailing Address	Line 2			
0 Pennwoo	CO ALCONTRACTOR					_		-
	dress Last Line – C	ity	State	Zip+4	Phone		E	ĸt
Varrendale			PA	15086	(724) 81			
ompany Co rown	ntact Last Name		First Name Dina	MI		Suffix		
lunicipality				County		-		
Varrendale				Allegheny		-		
ontact Phor	ne Ext		act Email Address					
724) 814-53			own@talismanusa.c					_
the waste g	enerated at the Co	mpany Maili	ing Address (noted a	above)?		TY	es 🛛	No
ne waste is t lunicipality	emporarily stored in t Columbia	anks onsite.	County Bradfo	ard	State		PA	
rannoipunty	oolambia	SEC		E DESCRIPTION	orun	-		-
Residual	R	esidual Wa	A CONTRACTOR OF A CONTRACT OF A DOMESTIC	E DEOONN HON	Unit of	1	Tin	10
Naste Code		de Descrip		Amount	Measure		Fran	
302	Brine and Waste			1 606		gal		T:
			1. GENERAL P		Ib 🗵	ton	L One	Time
. pH Ra	000	6		(based on analyses or kno	wlodan)			
	cal State	and the second se			wieuge)			_
. Physi	cal state		iquid Waste (EPA Me solid (EPA Method 909 Sas (ambient temperat	95)				
. Physi	cal Appearance	Color			Hydroca	rhon		
	ear rippontation	21 C C C C		Phases of Separation	One	DOLL		
			ribe each phase of s		One			
		Desci	The each phase of s	eparation. <u>Elquid</u>				-
		2	. CHEMICAL ANALYS	SIS ATTACHMENTS				
	esults of a detailed of ctions, is attached.	chemical ch	aracterization of the	waste, as described in t	пе	X Y	es 🗌] No
		the waste s	ampling method is a	ittached.		XY	es 🗌	No
	uality assurance/qu			yed by the laboratory(ies)	is		es 🗌	No
		ous waste d	letermination is attac	ched.		XY	es T	No
		and the second s		nerator knowledge in	Yes	T N		

		3. PROCESS DESCRIPTION			-	-	
a.	A detailed description of the manufacturing and/or pollution control processes producing Yes No the waste, as specified in the instructions, is attached.						
).	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.						
	If portions of the informati a confidentiality claim, as			n for 🔲 Yes	No No		N/A
	SEC	TION C. MANAGEI	MENT OF RESIDU	AL WASTE			
			R DISPOSAL FACILITY (IE				
he	area below (ad.) will accomm	nodate the identification	of two facilities. Attach	additional sheets	if necessar	у.	
	Solid waste permit numbe MDD980555189	r(s) for processing or dis	posal facility being util	ized.			
b.	Facility Name	Clean Harbors					
	Address Line 1 Address Line 1	1910 Russell St				_	
	Address City State ZIP	Baltimore	MD	21230			
	Municipality	Baltimore	County				
•	Facility Contact Name Title						_
	Phone	410-244-8200	Email Address				
Ι.	Volume of waste shipped t 1,563	to processing or disposa	I facility in the previous)		
	Solid waste permit number 101508	r(s) for processing or dis	posal facility being util	ized.			
	Facility Name	PA Brine					
	Address Line 1	5148 US 322					
	Address Line 1						
	Address City State ZIP	Franklin	PA	16323			
	Municipality	Franklin	County	Venango		-	
		EU DI					
	Facility Contact Name	Elton DeLong					
	Title	Plant Manager	-				-
•	Title Phone	Plant Manager (814) 437-3593	Email Address	info@pabrine.co	m		
	Title	Plant Manager (814) 437-3593		year.			
	Title Phone Volume of waste shipped t	Plant Manager (814) 437-3593 o processing or disposa cu yd gal	facility in the previous	year.			
i. I.	Title Phone Volume of waste shipped t 42 Has the waste been approv	Plant Manager (814) 437-3593 o processing or disposa cu yd gal 2. Be ved for beneficial use?	I facility in the previous	year.			No
	Title Phone Volume of waste shipped t 42	Plant Manager (814) 437-3593 o processing or disposa cu yd gal 2. Be ved for beneficial use? ermit number or approval	I facility in the previous	year.)		No

e

	Contraction of the second		SECTION D. CERTIFICATION	
Rep obta know	ort and all attached do aining the information, wledge. I understand th	cuments I verify nat the s	have personally examined and am familiar with the information submitted in this A and that based upon my inquiry of those individuals immediately responsib that the submitted information is true, accurate and complete to the best of ubmission of false information herein is made subject to the penalties of 18 Pa on to authorities, which include fine and imprisonment.	le for of my
Che	ck the following, if applic	cable:		
	I certify the informati	- C-C-,	red in Section B-1, General Properties was supplied to the Department for the	year
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
	I certify the informati		red in Section B-2, Chemical Analysis was supplied to the Department for the	year
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
	I certify the informatio for the year and		ed in Section B-3, Process Description and Schematic, was supplied to the Depart t changed.	tment
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
Nam	e of Responsible Officia	1	Title Environmental Specialist	
Dina	Brown			
Sign	ature An		Date 225/11	
-				



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

	This form must be fully and accurately completed. All required information must be DEP USE ONLY						
each attache	ed sheet as Form	paces provided. If additional 26R, reference the item nur sheets needs to match the da	mber and identify the date		eceived & G	General N	lotes
General Refe	rence 287.54						
Date Prepare	d/Revised	February 11, 2011					
	SECTION	A. CLIENT (GENERAT	OR OF THE WASTE) INF	ORMATIC	ON		
Company Na		and the second s		Consecution of			
	ergy USA Inc.						
	ry, Name of Parent (Company			EPA Gene	erator ID)#
Talisman En	ergy Inc. illing Address Line	4	Company Mailing Address		N/A	_	
50 Pennwoo			Company Mailing Address	Line 2			
	dress Last Line - C	ity State	Zip+4	Phone	-	Ext	
Narrendale		PA	15086	(724) 814	1-5300		
Company Co	ntact Last Name	First Name	MI		Suffix		
Brown		Dina					
Municipality			County				
Narrendale			Allegheny		_		
Contact Phor	and the second sec	Contact Email Address					
724) 814-53		dybrown@talismanus mpany Mailing Address (note			T Yes	M	No
		e generation and storage. Wa		rilling comple			
	De location of wast						
natural gas at		B well pad site located at 6130					
natural gas at emporairly sto	the (01-025) E	B well pad site located at 6130 County Bra	Fallbrook Road, Troy Townsh dford			. Waste	
natural gas at emporairly sto	the (01-025) B pred in tanks on site. Troy	B well pad site located at 6130 County Brain SECTION B. WAS	Fallbrook Road, Troy Townsh	ip, Bradford C	County, PA	. Waste	
natural gas at emporairly sto Municipality Residual	the (01-025) B pred in tanks on site. Troy	B well pad site located at 6130 County Brain SECTION B. WAS Residual Waste	Fallbrook Road, Troy Townsh dford STE DESCRIPTION	ip, Bradford (State Unit of	County, PA	. Waste	e is
natural gas at emporairly sto Municipality Residual	the (01-025) B pred in tanks on site. Troy	B well pad site located at 6130 County Brain SECTION B. WAS	Fallbrook Road, Troy Townsh dford STE DESCRIPTION Arnount	ip, Bradford (State Unit of Measure	PA	. Waste	e is
natural gas at emporairly sto Municipality Residual Waste Code	the (01-025) B pred in tanks on site. Troy	B well pad site located at 6130 County Bra SECTION B. WAS Residual Waste ode Description	Fallbrook Road, Troy Townsh dford STE DESCRIPTION Arnount	Unit of Generation of Measure Cu yd	PA PA gal	Time Fram	e is e
atural gas at emporairly sto Aunicipality Residual Vaste Code	the (01-025) to pred in tanks on site. Troy R	B well pad site located at 6130 County Bra SECTION B. WAS Residual Waste ode Description water	Fallbrook Road, Troy Townsh dford STE DESCRIPTION Amount 378	Unit of Generation of Measure Cu yd	PA	. Waste	e is e
natural gas at emporairly sto Municipality Residual Waste Code 302	the (01-025) B pred in tanks on site. Troy R Cc Brine and Waster	B well pad site located at 6130 County Bra SECTION B. WAS Residual Waste ode Description water 1. GENERAL	Fallbrook Road, Troy Townsh dford STE DESCRIPTION Amount 378	Unit of Measure Cu yd Ib	PA PA gal	Time Fram	e is e
A pH Ra	the (01-025) B pred in tanks on site. Troy R Cc Brine and Waster	B well pad site located at 6130 County Bra SECTION B. WAS Residual Waste ode Description water 1. GENERAL	Fallbrook Road, Troy Townsh dford STE DESCRIPTION Amount 378 PROPERTIES (based on analyses or know Method 9095) 9095)	Unit of Measure Cu yd Ib	PA PA gal	Time Fram	e is e
Anatural gas at emporairly sto Municipality Residual Waste Code 302 A. pH Ra b. Physi	the (01-025) B ored in tanks on site. Troy R Cc Brine and Waster	B well pad site located at 6130 County Bra SECTION B. WAS Residual Waste ode Description water 1. GENERAL 6 to 7 Liquid Waste (EPA) Solid (EPA Method Gas (ambient tempe Color Translucent	Amount Amount 378 (based on analyses or knowned) Breite definition	Unit of Measure Cu yd Ib	gal [Time Fram	e is e
Aunicipality Residual Waste Code 802 Aunicipality Residual Naste Code 802 Aunicipality Residual Naste Code 802 Aunicipality	the (01-025) B pred in tanks on site. Troy R Co Brine and Waster ange cal State	B well pad site located at 6130 County Bra- SECTION B. WAS Residual Waste ode Description water 1. GENERAL 6 to 7 Liquid Waste (EPA I Solid (EPA Method) Gas (ambient temper Color Translucent Number of Solid or Liq Describe each phase o	Fallbrook Road, Troy Townsh dford STE DESCRIPTION Amount 378 378 PROPERTIES (based on analyses or known) Method 9095) 9095) 9095) erature & pressure) yellow/brown Odor uid Phases of Separation f separation.	Init of Measure Cu yd I Ib X wledge)	gal [Time Fram	e is e
atural gas at emporairly sto Aunicipality Residual Vaste Code 202 . pH Ra . Physic . Physic . Physic	the (01-025) B ored in tanks on site. Troy R Cc Brine and Waster ange cal State cal Appearance	B well pad site located at 6130 County Bra- SECTION B. WAS Residual Waste ode Description water 1. GENERAL 6 to 7 Liquid Waste (EPA I Solid (EPA Method) Gas (ambient temper Color Translucent Number of Solid or Liq Describe each phase o	Fallbrook Road, Troy Townsh dford STE DESCRIPTION Amount 378 PROPERTIES (based on analyses or know Method 9095) 9095) erature & pressure) yellow/brown Odor uid Phases of Separation f separation. Liquid	Unit of Measure cu yd lb wledge) Hydrocarl One	gal [Time Fram One 1	e is e
A The regional for the formula of th	the (01-025) B pred in tanks on site. Troy R Cc Brine and Waster ange cal State cal Appearance esults of a detailed of ctions, is attached.	B well pad site located at 6130 County Bra- SECTION B. WAS Residual Waste ode Description water 1. GENERAL 6 to 7 Liquid Waste (EPA I Solid (EPA Method Gas (ambient temper Color Translucent Number of Solid or Liq Describe each phase o 2. CHEMICAL ANAL	Fallbrook Road, Troy Townsh dford STE DESCRIPTION Amount 378 PROPERTIES (based on analyses or known Method 9095) 9095) erature & pressure) yellow/brown Odor uid Phases of Separation f separation. Liquid	Unit of Measure cu yd lb wledge) Hydrocarl One	gal ton D	Time Fram One 1	e is e re Time
A deta	the (01-025) B pred in tanks on site. Troy R Cc Brine and Waster ange cal State cal Appearance esults of a detailed of ctions, is attached. ailed description of uality assurance/qu	B well pad site located at 6130 County Bra- SECTION B. WAS Residual Waste ode Description water 1. GENERAL 6 to 7 Liquid Waste (EPA I Solid (EPA Method) Gas (ambient temper Color Translucent Number of Solid or Liq Describe each phase o 2. CHEMICAL ANAL Chemical characterization of the	Fallbrook Road, Troy Townsh dford STE DESCRIPTION Amount 378 PROPERTIES (based on analyses or known Method 9095) 9095) erature & pressure) yellow/brown Odor uid Phases of Separation f separation. Liquid YSIS ATTACHMENTS the waste, as described in the s attached.	ip, Bradford (State Unit of Measure cu yd Ib wledge) Hydrocarl One	gal ton	Time Fram One 1	e is e re Time
A deta A deta	the (01-025) B pred in tanks on site. Troy R Cc Brine and Waster ange cal State cal Appearance esults of a detailed of ctions, is attached. ailed description of uality assurance/quited.	B well pad site located at 6130 County Brain SECTION B. WAS Residual Waste ode Description water 1. GENERAL 6 to 7 Liquid Waste (EPA) Gas (ambient temper Color Transfucent Number of Solid or Liq Describe each phase o 2. CHEMICAL ANAL Chemical characterization of the state sampling method in	Fallbrook Road, Troy Townsh dford STE DESCRIPTION Amount 378 PROPERTIES (based on analyses or known Method 9095) 9095) erature & pressure) yellow/brown Odor uid Phases of Separation f separation. Liquid YSIS ATTACHMENTS the waste, as described in the s attached. loyed by the laboratory(ies)	ip, Bradford (State Unit of Measure cu yd Ib wledge) Hydrocarl One	gal ton	Time Fram One 1	e is e ree Time No No

		3. PROCESS DESCRIPTION	& SCHEMATIC ATTACHME	NTS	-		-	
a.		A detailed description of the manufacturing and/or pollution control processes producing Yes No the waste, as specified in the instructions, is attached.						
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.							
с.	If portions of the information a confidentiality claim, as			Yes		No		N/A
	SEC	TION C. MANAGEMI	ENT OF RESIDUAL	WASTE				
		1. PROCESSING OR	DISPOSAL FACILITY(IES)					-
The	area below (ad.) will accomm			litional sheets	if neo	cessary	1.	
a.	Solid waste permit number MDD980555189	(s) for processing or dispo	osal facility being utilized					
b.	Facility Name	Clean Harbors of Balt	timore			-		
	Address Line 1	1910 Russell St						
	Address Line 1							
	Address City State ZIP	Baltimore	MD	21230				
	Municipality	Baltimore	County					
	Facility Contact Name							
	Title							
	Phone	410-244-8200	Email Address					
d.	Volume of waste shipped t 22	o processing or disposal fa	acility in the previous yea	r. (check one)			
a.	Solid waste permit number 0008451	(s) for processing or dispo	esal facility being utilized.					
b.	Facility Name	Sunbury Generation V	Nastewater Treatment F	acility				-
	Address Line 1	Old Trail Road						
	Address Line 1	P.O. Box 517						
	Address City State ZIP	Shamokin Dam	PA	17876				
	Municipality	Shamokin Dam	County Sn	yder				
3.	Facility Contact Name Title	Sheldon Kowaleski			-			_
	Phone	(570) 884-1250	Email Address					
1.	Volume of waste shipped t	o processing or disposal fa	cility in the previous yea	r.	-			
	283	🗌 cu yd 🔲 gal	☐ lb ⊠ ton	(check one)			
-		2 BENE	FICIAL USE			-		
a.	Has the waste been approv					Yes		No
	If "Yes", list the general pe		umber.		-		-	
) .	Volume of waste beneficial							
-		□ cuyd □ gal	☐ lb ☐ ton	(check one	1			

-		3. PROCESS DESCRIPTIO	ON & SCHEMATIC ATTA	CHMENTS		-	
a.	A detailed description of the waste, as specified in t			esses producing	Yes		No
b.		A schematic of the manufacturing and/or pollution control processes producing the waste, Xes No as specified in the instructions, is attached.					
D.	If portions of the informati a confidentiality claim, as			on for Yes	No No		N/A
	SEC	TION C. MANAGEI	MENT OF RESIDU	JAL WASTE			
		1. PROCESSING O	R DISPOSAL FACILITY	ES)			
The	area below (ad.) will accomm	nodate the identification	of two facilities. Attac	h additional sheets	if necessar	у.	
a.	Solid waste permit number 101508	r(s) for processing or dis	posal facility being uti	lized.			
b.	Facility Name	PA Brine					
	Address Line 1	5148 US 322					
	Address Line 1						
	Address City State ZIP	Franklin	PA	16323			-
	Municipality	Franklin	County	Venango			
c.	Facility Contact Name	Elton DeLong					
	Title	Plant Manager					
	Phone	(814) 437-3593	Email Address	info@pabrine.co	m		
d.	Volume of waste shipped t 25	o processing or disposa	I facility in the previou)		
a.	Solid waste permit number 010278	r(s) for processing or dis	posal facility being uti	lized.			
b.	Facility Name	Waste Treatment C	Corp. Warren County				
	Address Line 1						_
	Address Line 1			10005			
	Address City State ZIP Municipality	Warren Warren	PA County	16365 Warren			
_			county	warren			
с.	Facility Contact Name Title	Rich Gorton					_
	Phone	814-726-1500	Email Address	info@waste-trea	tmont not		
_	1.11.211.5			-	ument.net		
d.	Volume of waste shipped t 47	o processing or disposa	I facility in the previou)		
		2. BE	NEFICIAL USE				
a.	Has the waste been approv		humber		Yes		No
	IT "Yes", list the deneral ne	rmit number or approval	number.				
b.	If "Yes", list the general pe Volume of waste beneficial						

SECTION D. CERTIFICATION	N
I certify, under penalty of law, that I have personally examined and am familiar we Report and all attached documents and that based upon my inquiry of the obtaining the information, I verify that the submitted information is true, a knowledge. I understand that the submission of false information herein is m §4904, relating to unsworn falsification to authorities, which include fine and imp	se individuals immediately responsible for accurate and complete to the best of my nade subject to the penalties of 18 Pa. C.S.
Check the following, if applicable:	
I certify the information required in Section B-1, General Properties wa and has not changed.	as supplied to the Department for the year
Form Submitted: Form 26R	
Other (specify)	
Date Submitted:	
I certify the information required in Section B-2, Chemical Analysis was and has not changed.	is supplied to the Department for the year
Form Submitted: Form 26R	
Other (specify)	
Date Submitted:	
I certify the information required in Section B-3, Process Description and for the year and has not changed.	Schematic, was supplied to the Department
Form Submitted: D Form 26R	
Other (specify)	
Date Submitted:	
Name of Responsible Official Title Er	nvironmental Specialist
Dina Brown	
Signature Date Date	2/25/11
	(/



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This f	form m	ust be fully and accura	tely completed. All requ	uired information must be	DEP	USE ONLY
each	attache	d sheet as Form 26R,		pace is necessary, identify ber and identify the date te noted below.		red & General Notes
Gener	ral Refe	rence 287.54				
Date I	Prepare	d/Revised Fe	bruary 11, 2011			
		SECTION A.	CLIENT (GENERATO	R OF THE WASTE) INFO	RMATION	
	any Nai	ne				
		ergy USA Inc.				
		y, Name of Parent Comp	bany		1703-015	Generator ID#
		ergy Inc. Iling Address Line 1		Company Mailing Address I	N/A	
	nnwood			company manning Address	line z	
		dress Last Line - City	State	Zip+4	Phone	Ext
	endale		PA	15086	(724) 814-53	00
and the second se		ntact Last Name	First Name	MI	Suffi	ix
Brown			Dina	Country		
	ipality endale			County Allegheny		
	ct Phon	e Ext	Contact Email Address	Allegheny		
	814-53		dybrown@talismanusa.	.com		
			y Mailing Address (noted			Yes 🛛 No
If 'No'	, descri			ste is generated during the dr		
	I gas at		ad site located at 368 Bean	nan Road, Columbia Townsh	p, Bradford Cou	nty, PA. The waste
	porarily s	stored in tanks onsite. Columbia	County Brad	Found	State	PA
wunte	apanty	Columbia	SECTION B. WAS		State	FA
Pee	idual	Decid	JECTION D. WAS	TE DESCRIPTION	Unit of	Time
	Code		Description	Amount	Measure	Frame
	ooue				cu yd 🗌 gal	Tranic
802		Brine and Wastewate	r	1//9	lb 🛛 ton	One Time
			1. GENERAL	PROPERTIES		
a.	pH Ra		to 7	(based on analyses or know	/ledge)	
b.	Physic	cal State	Liquid Waste (EPA M Solid (EPA Method 90 Gas (ambient temper	095)		
C.	Physic	cal Appearance	Color Translucent y		Hydrocarbon	
			Number of Solid or Liqu Describe each phase of		One	
			2. CHEMICAL ANALY	SIS ATTACHMENTS		
a.	instru	ctions, is attached.		e waste, as described in th	e 🛛	Yes 🗌 No
b.			vaste sampling method is		\boxtimes	Yes No
C.	The quattach		control procedures emplo	oyed by the laboratory(ies)	is 🛛	Yes 🗌 No
d.	The re	sults of the hazardous	waste determination is att	ached.	\boxtimes	Yes 🗌 No
e.		icable, a detailed explan	nation supporting use of g	enerator knowledge in	Yes	No 🛛 N/A

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		3. PROCESS DESCRIPTIO	ON & SCHEMATIC ATTA	CHMENTS			
a.		A detailed description of the manufacturing and/or pollution control processes producing Yes No the waste, as specified in the instructions, is attached.					
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.						
c.	If portions of the informati a confidentiality claim, as			n for 🗌 Yes	No No		N/A
	SEC	TION C. MANAGEI	MENT OF RESIDU	JAL WASTE			
			R DISPOSAL FACILITY				
The	area below (ad.) will accomm	nodate the identification	of two facilities. Attack	additional sheets	if necessary	1.	
a.	Solid waste permit number 101508	r(s) for processing or dis	posal facility being util	lized.			
b.	Facility Name	PA Brine				-	-
	Address Line 1	5148 US 322					
	Address Line 1						
	Address City State ZIP	Franklin	PA	16323			
	Municipality	Franklin	County	Venango			
с.	Facility Contact Name	Elton DeLong					
	Title	Plant Manager					
	Phone	(814) 437-3593	Email Address	info@pabrine.co	m		
d.	Volume of waste shipped t 992	o processing or disposa	I facility in the previous)		
a.	Solid waste permit number 0102784	r(s) for processing or dis	posal facility being util	ized.			
b.	Facility Name	Waste Treatment C	orp. Warren County		_		_
	Address Line 1	341 West Harmar S					
	Address Line 1						
	Address City State ZIP	Warren	PA	16365			
	Municipality	Warren	County	Warren			
s.	Facility Contact Name	Rich Gorton					-
G.	Title						
G.		814-726-1500	Email Address	info@waste-trea	tment.net		-
с. d.	Title			s year.	1011-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
	Title Phone Volume of waste shipped t	o processing or disposa	I facility in the previous	s year.	1011-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		
d.	Title Phone Volume of waste shipped t 738	o processing or disposa cu yd gal 2. BE	I facility in the previous	s year.	1011-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	X	No
	Title Phone Volume of waste shipped t 738 Has the waste been approv	o processing or disposa cu yd gal 2. BE ved for beneficial use?	I facility in the previous	s year.)		No
d.	Title Phone Volume of waste shipped t 738	o processing or disposa cu yd gal 2. BE red for beneficial use? rmit number or approval	I facility in the previous	s year.)		No

		SECTION D. CERTIFICATION
Report and all attache obtaining the informa knowledge. I understa	ed documents tion, I verify and that the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Check the following, if	applicable:	
	ormation required.	ired in Section B-1, General Properties was supplied to the Department for the year
Form Submittee	i: 🗆	Form 26R
		Other (specify)
Date Submitted		
	rmation requiet to the requiet of the requirements of the requirem	ired in Section B-2, Chemical Analysis was supplied to the Department for the year
Form Submittee	l: 🗌	Form 26R
		Other (specify)
Date Submitted		
I certify the infor for the year		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
Form Submittee	I: 🗆	Form 26R
		Other (specify)
Date Submitted		
Name of Responsible (Official	Title Environmental Specialist
Dina Brown	0	10
Signature	sh. S	Date 2/25/4
	0	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This form m	ust be fully and a	ccurately	completed. All req	uired information must	be	DEP	USE C	JNLT	
each attache	ed sheet as Form	26R, refer		pace is necessary, ident ber and identify the da te noted below.		ate Receive	ed & G	eneral N	lotes
General Refe	rence 287.54								
Date Prepare	d/Revised	Februar	y 11, 2011						
	SECTION	A. CL	IENT (GENERATO	R OF THE WASTE) IN	FORMA	TION			-
Company Na									
	ergy USA Inc.					-			
	y, Name of Parent	Company					Gener	rator ID	D#
alisman En	ergy Inc. iling Address Line	4		Company Mailing Addres	a Lina 2	N/A			
0 Pennwoo				Company maining Addres	is Line Z				
	dress Last Line - C	ity	State	Zip+4	Phon	e		Ext	t
Varrendale		-	PA	15086	(724)	814-530	00	-	
	ntact Last Name		First Name	MI		Suffi	x		
Brown			Dina	Carrata					
Nunicipality Varrendale				County Allegheny					
contact Phon	ne Ext	Cor	ntact Email Address	raiognony					-
724) 814-53		dyb	prown@talismanusa	.com					
							Yes	M	No
s the waste g	generated at the Co	mpany Ma	ailing Address (noted	above)?			100		140
	be location of wast	e generati	ion and storage. Wa	ste is generated during the			and p	roducti	ion of
f 'No', descri atural gas at	be location of wast the (01-047)	e generati J well pad	ion and storage. Wa				and p	roducti	ion of
f 'No', descri atural gas at vaste is tempo	be location of wast the (01-047) orarily stored in tank	e generati J well pad	on and storage. <u>Wa</u> site loacted at 2196 F	ste is generated during the allbrook Road, Armenia To	wnship, Br	radford Co	and pounty,	roducti	ion of
f 'No', descri atural gas at vaste is tempo	be location of wast the (01-047)	e generati J well pad s onsite.	on and storage. <u>Wa</u> site loacted at 2196 Fa County Brad	ste is generated during the allbrook Road, Armenia To ford	wnship, Br		and p	roducti	ion of
f 'No', descri latural gas at vaste is tempo funicipality	be location of wast the (01-047) orarily stored in tank Armenia	e generati J well pad s onsite. SE	on and storage. <u>Wa</u> site loacted at 2196 F County Brad CTION B. WAS	ste is generated during the allbrook Road, Armenia To	wnship, Br S	radford Co	and pounty,	PA. Th	ion of he
f 'No', descri aatural gas at vaste is tempo Aunicipality Residual	be location of wast the (01-047) orarily stored in tank Armenia	e generati J well pad s onsite. SE Residual W	ion and storage. <u>Wa</u> site loacted at 2196 F. County Brad CTION B. WAS /aste	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION	wnship, Br S Unit	radford Co itate of	and pounty,	PA. Th	ion of he e
f 'No', descri atural gas at vaste is tempo funicipality Residual Vaste Code	be location of wast the (01-047) orarily stored in tank Armenia	e generati J well pad s onsite. SE Residual W ode Descr	ion and storage. <u>Wa</u> site loacted at 2196 F. County Brad CTION B. WAS /aste	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount	wnship, Br S Unit Meas	adford Co tate of sure	and pounty,	PA. Th	ion of he e
'No', descri atural gas at vaste is tempo lunicipality Residual Vaste Code	be location of wast the (01-047) orarily stored in tank Armenia	e generati J well pad s onsite. SE Residual W ode Descr	ion and storage. <u>Wa</u> site loacted at 2196 F. County Brad CTION B. WAS Vaste iption	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304	wnship, Br S Unit	radford Co itate of	and pounty,	PA. Th	ion of he e ne
'No', descri atural gas at aste is tempo lunicipality Residual Vaste Code 02	be location of wast the (01-047) orarily stored in tank Armenia	e generati J well pad s onsite. SE Residual W ode Descr	ion and storage. <u>Wa</u> site loacted at 2196 F. County Brad CTION B. WAS /aste	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES	wnship, Br S Unit Meas cu yd lb	tate of ure □ gal	and pounty,	Time Fram	ion of he e ne
f 'No', descri atural gas at vaste is tempo funicipality Residual Vaste Code 302 . pH Ra	be location of wast the (01-047) orarily stored in tank Armenia F Co Brine and Waste	e generati J well pad s onsite. SE Residual W ode Descr water 6	ion and storage. <u>Wa</u> site loacted at 2196 Fr County Brad CTION B. WAS Vaste iption 1. GENERAL to 7	te is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES (based on analyses or kr	wnship, Br S Unit Meas cu yd lb	tate of ure □ gal	and pounty,	Time Fram	ion of he e ne
f 'No', descri natural gas at vaste is tempo Aunicipality Residual Waste Code 302 a. pH Ra	be location of wast the (01-047) orarily stored in tank Armenia	e generati J well pad s onsite. SE Residual W ode Descr water	ion and storage. Wa site loacted at 2196 F. County Brad CTION B. WAS Vaste iption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES (based on analyses or kr lethod 9095) 095)	wnship, Br S Unit Meas cu yd lb	tate of ure □ gal	and pounty,	Time Fram	ion of he e ne
f 'No', descri latural gas at vaste is tempo funicipality Residual Vaste Code 302 . pH Ra . Physic	be location of wast the (01-047) orarily stored in tank Armenia F Co Brine and Waste	e generati J well pad s onsite. SE Residual W ode Descr water 6	County Brad County Brad CTION B. WAS Aste iption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES (based on analyses or kr lethod 9095) 095) rature & pressure)	wnship, Br S Unit Meas cu yd lb nowledge)	of ure gal ton	and pounty,	Time Fram	ion of he e ne
i 'No', descri atural gas at vaste is tempo funicipality Residual Vaste Code 02 . pH Ra . Physic	be location of wast the (01-047) orarily stored in tank Armenia F Co Brine and Waste	e generati J well pad s onsite. SE Residual W ode Descr water 6 6 Col	ion and storage. Wa site loacted at 2196 F. County Brad CTION B. WAS Vaste iption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper or Translucent y	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES (based on analyses or kr lethod 9095) 095) rature & pressure)	wnship, Br S Unit Meas cu yd lb nowledge)	tate of ure □ gal	and pounty,	Time Fram	ion ol he e ne
"No', descri atural gas at vaste is tempo lunicipality Residual Vaste Code 02 . pH Ra . Physic	be location of wast the (01-047) orarily stored in tank Armenia F Co Brine and Waste	e generati J well pad s onsite. SE Residual W ode Descr water 6 6 Col Nur	ion and storage. Wa site loacted at 2196 F. County Brad CTION B. WAS Vaste iption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper or Translucent y	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES (based on analyses or kr lethod 9095) 095) rature & pressure) yellow/brown Odor id Phases of Separation	Unit Meas cu yd lb nowledge)	of ure gal ton	and pounty,	Time Fram	ion of he e ne
"No', descri atural gas at /aste is tempo lunicipality Residual Vaste Code 02 . pH Ra . Physic	be location of wast the (01-047) orarily stored in tank Armenia F Co Brine and Waste	e generati J well pad s onsite. SE Residual W ode Descr water 6 6 Col Nur	County Brad County Brad CTION B. WAS Vaste iption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper or Translucent of mber of Solid or Liquid scribe each phase of	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES (based on analyses or kr lethod 9095) 095) rature & pressure) yellow/brown Odor id Phases of Separation separation. Liquid	Unit Meas cu yd lb nowledge)	of ure gal ton	and pounty,	Time Fram	ion of he e ne
"No', descri atural gas at vaste is tempo lunicipality Residual Vaste Code 02 . pH Ra . Physic	be location of wast the (01-047) orarily stored in tank Armenia F C Brine and Waste ange cal State	e generati J well pad s onsite. SE Residual W ode Descr water 6 6	County Brad County Brad CTION B. WAS Vaste iption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper or Translucent of mber of Solid or Liquiscribe each phase of 2. CHEMICAL ANAL	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES (based on analyses or kr lethod 9095) 095) rature & pressure) yellow/brown Odor id Phases of Separation separation. Liquid	Unit Meas cu yd lb nowledge)	of gal gal ton	PA	Time Fram	ion of he e ne Time
'No', descri atural gas at aste is tempo unicipality Residual Jaste Code 02 pH Ra Physic Physic	be location of wast the (01-047) orarily stored in tank Armenia F C Brine and Waste ange cal State	e generati J well pad s onsite. SE Residual W ode Descr water 6 Col Nur Des	County Brad County Brad CTION B. WAS Vaste iption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper or Translucent of mber of Solid or Liquiscribe each phase of 2. CHEMICAL ANAL	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES (based on analyses or kr lethod 9095) 095) rature & pressure) yellow/brown Odor id Phases of Separation separation. Liquid	Unit Meas cu yd lb nowledge)	of gal gal ton	and pounty,	Time Fram	ion o he e ne
'No', descri atural gas at vaste is tempo funicipality Residual Vaste Code 02 02 . pH Ra . Physic . Physic . The re instruct	be location of wast the (01-047) orarily stored in tank Armenia F C Brine and Waste cal State cal Appearance	e generati J well pad s onsite. SE Residual W ode Descr water 6 Col Nur Des	County Brad County Brad CTION B. WAS Vaste iption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper or Translucent of mber of Solid or Liquiscribe each phase of 2. CHEMICAL ANAL	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES (based on analyses or kr lethod 9095) 095) rature & pressure) yellow/brown Odor id Phases of Separation separation. Liquid rSIS ATTACHMENTS ne waste, as described in	Unit Meas cu yd lb nowledge)	of gal gal ton	PA	Time Fram	ion of he e ne Time
"No', descri atural gas at aste is tempo lunicipality Residual Vaste Code 02 02 02 02 02 02 02 02 02 02 02 02 02	be location of wast the (01-047) orarily stored in tank Armenia F Cri Brine and Waste ange cal State cal Appearance esults of a detailed ctions, is attached. ailed description of uality assurance/qu	e generati J well pad s onsite. SE Residual W ode Descr water 6 Col Nur Des chemical of the waste	County Brad County Brad CTION B. WAS Vaste iption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper or Translucent y mber of Solid or Liquiscribe each phase of 2. CHEMICAL ANAL characterization of the	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES (based on analyses or kr lethod 9095) 095) rature & pressure) yellow/brown Odor id Phases of Separation separation. Liquid rSIS ATTACHMENTS ne waste, as described in	wnship, Br S Unit Meas cu yd lb nowledge) Mowledge)	adford Co itate of gal gal ton	And pounty, PA	Time Fram	ion of he e ne Time No
"No', descri atural gas at vaste is tempo lunicipality Residual Vaste Code 02 02 02 02 02 02 02 02 02 02 02 02 02	be location of wast the (01-047) orarily stored in tank Armenia Brine and Waste ange cal State cal Appearance esults of a detailed ctions, is attached. ailed description of uality assurance/queed.	e generati J well pad s onsite. SE Residual W ode Descr water 6 Col Nur Des chemical of the waste	County Brad County Brad CTION B. WAS Vaste iption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper or Translucent y mber of Solid or Liquiscribe each phase of 2. CHEMICAL ANAL characterization of the sampling method is rol procedures employ	ste is generated during the allbrook Road, Armenia To ford TE DESCRIPTION Amount 1,304 PROPERTIES (based on analyses or kr lethod 9095) 095) rature & pressure) yellow/brown Odor id Phases of Separation separation. Liquid YSIS ATTACHMENTS he waste, as described in attached. oyed by the laboratory(ie	wnship, Br S Unit Meas cu yd lb nowledge) Mowledge)	adford Co itate of gal iton carbon	And pounty, PA	Time Fram	ion of he e ne Time No No

		3. PROCESS DESCRIPTIO	ON & SCHEMATIC ATTA	CHMENTS			
a.	A detailed description of the waste, as specified in the waste of t			esses producing	Yes Yes		No
b.	A schematic of the manufa as specified in the instruct		control processes pro	ducing the waste,	X Yes		No
C.	If portions of the informati a confidentiality claim, as			on for 🗌 Yes	No No		N/A
	SEC	TION C. MANAGE	MENT OF RESID	UAL WASTE			
			R DISPOSAL FACILITY				
The	area below (ad.) will accomm	nodate the identification	of two facilities. Attac	h additional sheets	if necessary	1.	
a.	Solid waste permit number 101508	r(s) for processing or dis	posal facility being ut	ilized.			
b.	Facility Name	PA Brine					
	Address Line 1	5148 US 322					
	Address Line 1						
	Address City State ZIP	Franklin	PA	16323	_		
-	Municipality	Franklin	County	Venango			
	Facility Contact Name	Elton DeLong					_
	Title	Plant Manager					
	Phone	(814) 437-3593	Email Address	info@pabrine.co	m		
d.	Volume of waste shipped t 444	oprocessing or disposa	I facility in the previou	n (check one)			
a.	Solid waste permit number 0102784	r(s) for processing or dis	posal facility being uti	lized.			
b.	Facility Name	Waste Treatment C	Corp. Warren County				
	Address Line 1	341 West Harmar S					
	Address Line 1						
	Address City State ZIP	Warren	PA	16365			
	Municipality	Warren	County	Warren			
с.	Facility Contact Name	Rich Gorton					
	Title Phone	814-726-1500	Email Address	info Questo tran	lan and not		_
				info@waste-trea	tment.net		_
d.	Volume of waste shipped t 143	o processing or disposa	I facility in the previou				
		2. BE	NEFICIAL USE				
a.	Has the waste been approv If "Yes", list the general pe	ved for beneficial use?			Yes		No
							_
b.	Volume of waste beneficial	ly used in the previous y	/ear.				

	The second second	3. PROCESS	DESCRIPTION	N & SCHEN	ATIC ATT	ACHMEN	TS				
a.	A detailed description of the the waste, as specified in t				ontrol prod	cesses (producing	\boxtimes	Yes		No
b.	A schematic of the manufa as specified in the instruct			ontrol pro	cesses pro	oducing	the waste,		Yes		No
c.		If portions of the information submitted are confidential, the substantiation for a confidentiality claim, as described in the instructions, is attached.									N/A
	SEC	TION C. M	ANAGEN	IENT OI	RESID	UALV	VASTE				
		1. PRC	CESSING OR	DISPOSAL	FACILITY	(IES)					
The	area below (ad.) will accomm	odate the ide	ntification o	f two facil	ties. Attac	ch addit	ional sheets	if nee	cessary	1.	
a.	Solid waste permit number 0008451	(s) for proces	sing or disp	osal facili	ty being ut	tilized.					
b.	Facility Name	Sunbury	Generation	Wastewa	ter Treatn	nent Fa	cility				
	Address Line 1	Old Trail	Road								
	Address Line 1	P.O. Box	517								
	Address City State ZIP	Shamoki	in Dam		PA		17876			_	
	Municipality	Shamoki	in Dam		County	Snyc	der				
5.	Facility Contact Name	Sheldon	Kowaleski								
	Phone	(570) 88	4-1235	Email	Address						-
d.	Volume of waste shipped t 718	o processing	or disposal	facility in t	he previou		(check one))			
a.	Solid waste permit number	(s) for proces	sing or disp	osal facili	ty being ut	tilized.		-			
b.	Facility Name										
	Address Line 1										
	Address Line 1										
	Address City State ZIP										
	Municipality				County						-
c.	Facility Contact Name		-					- 10			
	Title										
	Phone			Email	Address						
d.	Volume of waste shipped to	o processing	or disposal	facility in 1	he previou	us year.					
		🗌 cu yd	🗌 gal	🗌 lb	to	n	(check one)	£			
~~~	The second second second		2. BEN	EFICIAL US	SE						-
a.	Has the waste been approv	ed for benefit							Yes	$\boxtimes$	No
	If "Yes", list the general pe	rmit number o	or approval r	number.						-	
<b>D</b> .	Volume of waste beneficial										-
		🗋 cu yd	gal gal	∏ lb	T to	on	(check one)	N			

			SECTION D. CERTIFICATION
Repo obtai know	ort and all attached doc ining the information, I vledge. I understand that	uments verify at the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Chec	k the following, if applica	ble:	
	I certify the informatio		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	-	
	I certify the information and has not char		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information for the year and		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
Name	of Responsible Official		Title Environmental Specialist
Dina	Brown		10
Signa	ature An	SIL	Date 2(2.5/1)
-			



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This form m	ust be fully and accurat	ely completed. All requ	uired information must h	De DE	EP USE ONLY
each attache	oly printed in the spaces of sheet as Form 26R, r e date on attached sheet	eference the item num	ber and identify the da		eived & General Notes
General Refe	rence 287.54				
Date Prepare	d/Revised Febr	ruary 11, 2011			
	SECTION A.	CLIENT (GENERATO	R OF THE WASTE) IN	FORMATIO	N
Company Na	me				
	ergy USA Inc.				
	y, Name of Parent Compa	iny		E	PA Generator ID#
Company Ma	iling Address Line 1	(	Company Mailing Addres	and the second se	A
0 Pennwoo			sompany manny names		
ompany Ad	dress Last Line - City	State	Zip+4	Phone	Ext
Varrendale		PA	15086	(724) 814-	
	ntact Last Name	First Name Dina	MI	Su	lffix
Brown Aunicipality			County		
Varrendale			Allegheny		
Contact Phor	e Ext	Contact Email Address			
724) 814-53	21	dybrown@talismanusa.	com		
s the waste g	generated at the Company	Mailing Address (noted	above)?		Yes 🛛 No
f 'No', descri	be location of waste gene				
atural gas at		pad site located at 1051 C	ease Drive, Troy Township	, Bradford Coun	ty, PA. The waste is
emporarily sto Aunicipality	ored in tanks onsite.	County Bradt		State	PA
auticipanty	Troy	SECTION B. WAS		State	FA
Residual		al Waste	TE DESCRIPTION	Unit of	Time
Vaste Code		scription	Amount	Measure	Frame
02	Brine and Wastewater		391	] cu yd 🗌 gi	
102	Diffe and wastewater			] Ib 🛛 to	n 🗌 One Time
		1. GENERAL			1
. pH Ra		to 7	(based on analyses or kn	owledge)	
o. Physi	cal State	Liquid Waste (EPA M Solid (EPA Method 90 Gas (ambient temperation)	095)		
. Physic	cal Appearance	Color Translucent y	and the second	hydrocarbo	n
		Number of Solid or Liqui		One	
		Describe each phase of	separation. Liquid		
		2. CHEMICAL ANALY	Poly -		
instru	sults of a detailed chemic ctions, is attached.			the D	Yes 🗌 No
	iled description of the wa				🛛 Yes 🗌 No
. The q attach	uality assurance/quality c ed.	ontrol procedures emplo	oyed by the laboratory(ie	s) is	Yes 🗌 No
. The re	sults of the hazardous wa	aste determination is atta	ached.	0	Yes No
	icable, a detailed explana actual chemical analysis		enerator knowledge in	Yes [	No N/A

		3. PROCESS DESCRIPTION	Carl a set period a set a set a		-	-
1.	A detailed description of the waste, as specified in the waste, as specified in the waste.			esses producing	Yes Yes	No No
).	A schematic of the manufa as specified in the instruct		ontrol processes pro	ducing the waste,	Yes	□ No
4	If portions of the informati a confidentiality claim, as			on for 🗌 Yes	No No	⊠ N/A
	SEC	TION C. MANAGEM	ENT OF RESID	JAL WASTE		
			DISPOSAL FACILITY			
he	area below (ad.) will accomm	nodate the identification of	two facilities. Attac	h additional sheets	if necessary	Ι.
•	Solid waste permit number 101508	r(s) for processing or disp	osal facility being uti	lized.		
	Facility Name	PA Brine				
	Address Line 1 Address Line 1	5148 US 322				
	Address City State ZIP	Franklin	PA	16323		
	Municipality	Franklin	County	Venango		
	Facility Contact Name	Elton DeLong				
	Title	Plant Manager				
	Phone	(814) 437-3593	Email Address	info@pabrine.co	m	
ι.	Volume of waste shipped t 69	o processing or disposal f	acility in the previou			
	Solid waste permit number 0008451	(s) for processing or dispo	osal facility being uti	lized.		-
	Facility Name	Sunbury Generation	Wastewater Treatm	ent Facility		
	Address Line 1	Old Trail Road				
	Address Line 1	P.O. Box 517				
	Address City State ZIP	Shamokin Dam	PA	17876		
	Municipality	Shamokin Dam	County	Snyder		
	Facility Contact Name Title	Sheldon Kowaleski				
	Phone	(570) 884-1235	Email Address			
•	Volume of waste shipped t 44	o processing or disposal f	acility in the previou			
-		2. BENE	FICIAL USE			
	Has the waste been approv		a contract of the		Yes	No No
	If "Yes", list the general pe		umber.		C. Martin	
	Volume of waste beneficial					
		Cuyd gal	D Ib D to	n (check one)		

-		3. PROCESS DESCI	RIPTION & SCHEM	ATIC ATTACHME	NTS				
a.	A detailed description of the waste, as specified in the waste, as specified in the waste.	he manufacturing an	nd/or pollution co		A REAL PROVIDENCE OF A REAL PR		Yes		No
b.	A schematic of the manufa as specified in the instruct		ation control proc	esses producin	g the waste,	$\boxtimes$	Yes		No
C.	If portions of the informati a confidentiality claim, as				Yes		No		N/A
	SEC	TION C. MANA	GEMENT OF	RESIDUAL	WASTE			-	-
	15		NG OR DISPOSAL						
The	area below (ad.) will accomn	odate the identification	tion of two facilit	ies. Attach addi	itional sheets	if neo	cessary		
а.	Solid waste permit number MDD980555189	(s) for processing o	or disposal facilit	y being utilized.					
b.	Facility Name	Clean Harbors	of Baltimore						
	Address Line 1	1910 Russell S	St						
	Address Line 1								
	Address City State ZIP	Baltimore		ND	21230	_			
-	Municipality	Baltimore	C	County		_			
c.	Facility Contact Name							_	
	Title					-		_	
	Phone	410-244-8200	Email	Address					
d.	Volume of waste shipped t 278	o processing or dis		ne previous year	(check one)				
a.	Solid waste permit number	(s) for processing o	or disposal facility	y being utilized.					
b.	Facility Name								
T	Address Line 1								
	Audi coo Line i								
	Address Line 1							-	
								-	
	Address Line 1			County					
c.	Address Line 1 Address City State ZIP		(	County					
c.	Address Line 1 Address City State ZIP Municipality		(	Sounty					
с.	Address Line 1 Address City State ZIP Municipality Facility Contact Name		- Area	County Address					
	Address Line 1 Address City State ZIP Municipality Facility Contact Name Title		Email /	Address	(check one)				
	Address Line 1 Address City State ZIP Municipality Facility Contact Name Title Phone	🗋 cu yd 🗌 g	Email / posal facility in th gal [] Ib	Address ne previous year ton					
d.	Address Line 1 Address City State ZIP Municipality Facility Contact Name Title Phone Volume of waste shipped to	cuyd g	Email / posal facility in th gal [] Ib . BENEFICIAL USI	Address ne previous year ton			Yes		No
d.	Address Line 1 Address City State ZIP Municipality Facility Contact Name Title Phone Volume of waste shipped to Has the waste been approv	cu yd g 2 ed for beneficial us	Email / posal facility in th gál Ib . BENEFICIAL USI e?	Address ne previous year ton			Yes		No
c. d. a.	Address Line 1 Address City State ZIP Municipality Facility Contact Name Title Phone Volume of waste shipped to	cu yd g 2 ed for beneficial us rmit number or appr	Email / posal facility in th gal Ib . BENEFICIAL USI e? roval number.	Address ne previous year ton			Yes		No

			SECTION D. CERTIFICATION
Repo obtai know	ort and all attached do ining the information, vledge. I understand th	cuments I verify at the s	have personally examined and am familiar with the information submitted in this Annual is and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Chec	k the following, if applic	able:	
	I certify the information and has not characteristic		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information and has not characterized		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	_	
	I certify the information for the year and		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
Name	of Responsible Official		Title Environmental Specialist
Dina	Brown		
Signa	ature <u>1</u> -	31	Date 2/25/4



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed	or legil	oly printed in the spaces	provided. If additional :	uired information must space is necessary, iden nber and identify the d	tify Da	DEP I ate Receive	2000000000	and the second se	lotes
			ts needs to match the da						
Gener	ral Refe	rence 287.54							
Date I	Prepare	d/Revised Fel	pruary 11, 2011						
		SECTION A.	CLIENT (GENERATO	OR OF THE WASTE) IN	FORMA	TION			
	any Na								
		ergy USA Inc.	2002				-		
		y, Name of Parent Comp ergy Inc.	any			N/A	Gener	ator ID	)#
Comp		iling Address Line 1		Company Mailing Addre	ss Line 2	NA			
		dress Last Line - City	State	Zip+4	Phon	e		Ext	t
Warre	endale		PA	15086	(724)	814-530	0		
Comp Brown		ntact Last Name	First Name Dina	MI		Suffi	¢		
	ipality			County					
	endale	E.A.	Contact Email Address	Allegheny			-	-	
	et Phor 814-53		dybrown@talismanusa						
Is the If 'No'	waste g , descri	enerated at the Compar be location of waste ger	y Mailing Address (note eration and storage. Wa	d above)? aste is generated during the		mpletion,		roduct	
natura	I gas at	the (03-067) O well prarily stored in tanks onsi	pad site located at 945 H	ulslander Road, Columbia	Township, I	Bradford (	County	, PA.	The
	ipality	Columbia		dford	S	tate	PA		
				TE DESCRIPTION					
Resi	idual	Resid	ual Waste		Unit	of	1	Tim	e
Waste	e Code	Code D	escription	Amount	Meas	and the second se	-	Fram	e
802		Brine and Wastewate		1,058	☐ cu yd ☐ lb	gal gal		One	Time
	-			PROPERTIES					
a.	pH Ra		to 7	(based on analyses or k	nowledge)		_		-
ь.	Physic	cal State	Liquid Waste (EPA I Solid (EPA Method S Gas (ambient tempe	9095)					
c.	Physic	cal Appearance	Color Translucent	yellow/brown Odo uid Phases of Separation		ocarbon			
			Describe each phase of	f separation. <u>Liquid</u>					
				YSIS ATTACHMENTS					
а.	instru	ctions, is attached.		he waste, as described in	n the		Yes		No
b.		the species of the species of the state of the species of the	aste sampling method i	A CALLER AND AND A CALL OF		-	Yes		No
C.	The quattach		control procedures emp	loyed by the laboratory(i	es) is		Yes		No
d.		The state of the s	vaste determination is at	ALCONTRACTOR AND A CONTRACTOR A		Example.	Yes		No
е.		icable, a detailed explan actual chemical analys	ation supporting use of s is attached.	generator knowledge in	Yes		No		N/A

		3. PROCESS DESCRIPTIO	N & SCHEMATIC ATT	ACHMENTS					
a.	A detailed description of the the waste, as specified in t	ne manufacturing and/or p	collution control proc		Yes Yes	No No			
b.	A schematic of the manufa as specified in the instruct		control processes pro	oducing the waste,	Yes	No No			
c.	If portions of the information a confidentiality claim, as o			on for 🗌 Yes	□ No	⊠ N/A			
	SEC	TION C. MANAGEN	IENT OF RESID	UAL WASTE					
			DISPOSAL FACILITY						
The	area below (ad.) will accomm	nodate the identification o	f two facilities. Attac	ch additional sheets	if necessary	1.			
a.	Solid waste permit number MDD980555189	r(s) for processing or disp	oosal facility being ut	tilized.					
b.	Facility Name	Clean Harbors of Ba	altimore						
	Address Line 1	1910 Russell St							
	Address Line 1								
	Address City State ZIP	Baltimore	MD	21230					
	Municipality	Baltimore	County						
c.	Facility Contact Name								
	Title								
	Phone	410-244-8200	Email Address						
d.	Volume of waste shipped t 1,058	o processing or disposal	facility in the previou		)				
a.	Solid waste permit number	(s) for processing or disp	oosal facility being ut	ilized.					
b.	Facility Name								
	Address Line 1								
	Address Line 1								
	Address City State ZIP								
	Municipality		County						
C.	Facility Contact Name								
	Title								
	Phone		Email Address						
d.	Volume of waste shipped to	o processing or disposal		us year. on (check one	1)				
u.									
u.		—	IEFICIAL USE						
a.	Has the waste been approv	2. BEN	IEFICIAL USE		☐ Yes	No No			
		2. BEN ved for beneficial use?			Yes	No No			
	Has the waste been approv If "Yes", list the general pe Volume of waste beneficial	2. BEN ved for beneficial use? rmit number or approval	number.		Yes	No No			

	and the second		SECTION D.	CERTIFICATION
Repor obtain knowl	t and all attached doc ing the information, I edge. I understand that	uments verify at the s	s and that based upon that the submitted inf submission of false info	ed and am familiar with the information submitted in this Annual a my inquiry of those individuals immediately responsible for formation is true, accurate and complete to the best of my prmation herein is made subject to the penalties of 18 Pa. C.S. a include fine and imprisonment.
Check	the following, if application	able:		
	I certify the informatio		ired in Section B-1, Ge	eneral Properties was supplied to the Department for the year
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
	I certify the informatio		ired in Section B-2, Ch	hemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
	I certify the information for the year and			ess Description and Schematic, was supplied to the Department
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
Name	of Responsible Official			Title Environmental Specialist
Dina B	Brown		10	
Signat	ure <u>A</u> -	5	No-	Date 2/25/11
		9		



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

	just be fully and accuratel				USE ONLY
each attach	bly printed in the spaces pr ed sheet as Form 26R, re he date on attached sheets	ference the item numb	per and identify the date		ed & General Notes
General Refe	erence 287.54				
Date Prepare	ed/Revised Febru	ary 11, 2011			
	SECTION A. C	LIENT (GENERATO	R OF THE WASTE) INFO	ORMATION	
Company Na					
	ergy USA Inc. ry, Name of Parent Compan	v		EDA	Generator ID#
Talisman Er		y		N/A	Generator ID#
	ailing Address Line 1	C	company Mailing Address	Line 2	
Company Ac Warrendale	ldress Last Line – City	State PA	Zip+4 15086	Phone (724) 814-530	Ext
Company Co Brown	entact Last Name	First Name Dina	MI	Suffi	
Municipality Warrendale			County Allegheny		
<b>Contact Pho</b>		ontact Email Address			
(724) 814-53		ybrown@talismanusa.			
	generated at the Company I ibe location of waste genera				Yes No
	the DCNR 587 02-001 well p				
waste is temp	orarily stored in tanks onsite.			monp, produce	
Municipality	Ward	County Tioga		State	PA
		ECTION B. WAST	E DESCRIPTION		
Residual Waste Code	Residual Code Des		Amount	Unit of Measure	Time Frame
802	Brine and Wastewater	cription		cu yd gal	Traine
002	Drine and Wastewater			lb 🛛 ton	One Time
		1. GENERAL F		dedaa)	
a. pHR b. Phys		to 7 Liquid Waste (EPA Me	(based on analyses or know	wedge)	
D. Phys	ical State	Solid (EPA Method 90 Gas (ambient tempera	95)		
c. Phys		olor Translucent y		Hydrocarbon One	
		escribe each phase of s		one	
		2. CHEMICAL ANALY	SIS ATTACHMENTS		
	esults of a detailed chemica ictions, is attached.	I characterization of the	e waste, as described in th	e 🛛	Yes 🗌 No
b. A det	ailed description of the was				Yes 🗌 No
c. The c attac	uality assurance/quality connect.	ntrol procedures emplo	yed by the laboratory(ies)	is 🛛	Yes 🗌 No
	esults of the hazardous was	and the second of the second second second	1914 3 40	Personal	Yes 🗌 No
	licable, a detailed explanati f actual chemical analysis i		enerator knowledge in [	Yes	No 🛛 N/A

		3. PROCESS DESCRIPTION	& SCHEMATIC ATTA	CHMENTS						
a.	A detailed description of the the waste, as specified in t	ne manufacturing and/or p	ollution control proc		Yes	No No				
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.									
с.	If portions of the information a confidentiality claim, as			on for 🗌 Yes	No No	⊠ N/A				
	SEC	TION C. MANAGEM	ENT OF RESID	UAL WASTE						
			DISPOSAL FACILITY							
The a	area below (ad.) will accomm	odate the identification of	two facilities. Attac	h additional sheets	if necessary					
a.	Solid waste permit number 101508	(s) for processing or disp	osal facility being ut	ilized.	*					
b.	Facility Name	PA Brine								
	Address Line 1	5148 US 322								
	Address Line 1									
	Address City State ZIP	Franklin	PA	16323						
	Municipality	Franklin	County	Venango		_				
	Facility Contact Name	Elton DeLong								
	Title	Plant Manager								
	Phone	(814) 437-3593	Email Address	info@pabrine.co	m					
d.	Volume of waste shipped t 327	o processing or disposal f	acility in the previou		)					
a.	Solid waste permit number 0008451	(s) for processing or dispo	osal facility being ut	lized.						
<b>b</b> .	Facility Name	Sunbury Generation	Wastewater Treatm	ent Facility						
	Address Line 1	Old Trail Road			-					
	Address Line 1	P.O. Box 517								
	Address City State ZIP	Shamokin Dam	PA	17876						
	Municipality	Shamokin Dam	County	Snyder						
3.	Facility Contact Name Title	Sheldon Kowaleski								
	Phone	(570) 884-1235	Email Address							
d.	Volume of waste shipped to	o processing or disposal f	acility in the previou	e vear						
	1,669	cu yd gal	☐ lb ⊠ to		)					
	And the second s		FICIAL USE							
1.	Has the waste been approv If "Yes", list the general pe		umber.		Yes	No No				
b.	Volume of waste beneficial		No.11 IDENTITY	n (check one)	)					

-		3. PROCESS DESCRIPTIO	N & SCHEMATIC ATTA	CHMENTS						
a.	A detailed description of the waste, as specified in the waste, as specified in the waste.	ne manufacturing and/or	pollution control proc			Yes		No		
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.									
C.	If portions of the informati a confidentiality claim, as	on submitted are confide described in the instructi	ntial, the substantiation ons, is attached.	on for 🗌 Yes		No		N/A		
	SEC	TION C. MANAGEN	MENT OF RESID	UAL WASTE						
		1. PROCESSING OF	R DISPOSAL FACILITY	IES)			-			
The	area below (ad.) will accomn	nodate the identification of	of two facilities. Attac	h additional sheets	if neo	cessary				
a.	Solid waste permit numbe MDD980555189	r(s) for processing or dis	posal facility being ut	ilized.						
b.	Facility Name	Clean Harbors of Ba	altimore							
	Address Line 1	1910 Russell St								
	Address Line 1									
	Address City State ZIP	Baltimore	MD	21230						
_	Municipality	Baltimore	County							
с.	Facility Contact Name				_					
	Title Phone	110 011 0000	Email Address			_				
		410-244-8200			_		-			
d.	Volume of waste shipped t 113	o processing or disposal	facility in the previou		)					
a.	Solid waste permit number 0102784	(s) for processing or dis	posal facility being ut	ilized.						
b.	Facility Name	Waste Treatment C	orp. Warren County				-			
	Address Line 1	341 West Harmar S	treet			_				
	Address Line 1									
	Address City State ZIP	Warren	PA	16365			_			
	Municipality	Warren	County	Warren	_	_	_			
C.	Facility Contact Name	Rich Gorton			_	-				
	Title	011 700 1500	Total Address							
	Phone	814-726-1500	Email Address	info@waste-trea	tmen	t.net				
d.	Volume of waste shipped t 22	o processing or disposal	facility in the previou		6					
	a second a s		NEFICIAL USE							
a.	Has the waste been approv If "Yes", list the general pe		number.			Yes		No		
							_			
b.	Volume of waste beneficial	ly used in the previous v	ear.			-				

				d am famil	iar with the information submitted in this Annual
obta knov	ining the information, I wledge. I understand that	verify t the s	that the submitted information	ation is tru ion herein	those individuals immediately responsible for ue, accurate and complete to the best of my is made subject to the penalties of 18 Pa. C.S. d imprisonment.
Che	ck the following, if applica	ble:			
	I certify the information and has not char		red in Section B-1, Genera	I Propertie	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:	_			
	I certify the information and has not char		red in Section B-2, Chemic	al Analysi	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:	_			
	I certify the information for the year and I			escription	and Schematic, was supplied to the Department
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
Nam	e of Responsible Official			Title	Environmental Specialist
Dina	Brown		0.0		
Sign	ature the	SI	S	Date	2/2.5/4
		2			1



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This form must be fully and accurately completed. All required information must be DEP USE ONLY							
each attache	bly printed in the spaces pr ed sheet as Form 26R, ref ne date on attached sheets r	erence the item numb	per and identify the da		ved & General Notes		
General Refe	rence 287.54						
Date Prepare	d/Revised Februa	ary 11, 2011					
	SECTION A. CI	LIENT (GENERATO	R OF THE WASTE) IN	FORMATION			
Company Na							
	ergy USA Inc. ry, Name of Parent Company	v		FPA	Generator ID#		
Talisman En				N/A	NEWSCOMMENTS CHAM		
Company Ma	iling Address Line 1	C	Company Mailing Addres	ss Line 2			
50 Pennwoo	d Place dress Last Line – City	State	Zip+4	Phone	Ext		
Warrendale	diess Last Line - Ony	PA	15086	(724) 814-53			
	ntact Last Name	First Name Dina	MI	Suff			
Municipality			County				
Warrendale	F-1 0		Allegheny				
Contact Phor (724) 814-53		ontact Email Address ybrown@talismanusa.	com				
	generated at the Company M				Yes 🛛 No		
If 'No', descri	be location of waste genera	tion and storage. Was	te is generated from the c	trilling, completion,	and production of		
	the DCNR 587 02-002 well pa	ad site located at 374 Fe	llows Creek Road, Ward	Township, Bradford	County, PA. The		
Municipality	orarily stored in tanks onsite. Ward	County Tioga	-	State	PA		
	Service and servic	ECTION B. WAST					
Residual	Residual			Unit of	Time		
Waste Code	Code Desc	cription	Amount	Measure	Frame		
802	Brine and Wastewater		85	□ cu yd □ gal □ lb   ⊠ ton	One Time		
		1. GENERAL F					
a. pH Ra	procession of the second se	to 7	(based on analyses or ki	nowledge)			
b. Physi	cal State	Liquid Waste (EPA Me Solid (EPA Method 90 Gas (ambient tempera	95)				
c. Physi	cal Appearance Co	olor Translucent y		r Hydrocarbon			
		umber of Solid or Liqui escribe each phase of s	d Phases of Separation separation. Liquid	One			
-		2. CHEMICAL ANALY					
	esults of a detailed chemica actions, is attached.		PLACE FILST SPEED FILST PLACE FILST FILST FILST	the	Yes 🗌 No		
	ailed description of the was	te sampling method is	attached.		Yes No		
	uality assurance/quality con			Banada Banada	Yes 🗌 No		
d. The re	esults of the hazardous was	and the second se		$\boxtimes$	Yes 🗌 No		
	licable, a detailed explanation of the second secon		enerator knowledge in	Yes	No 🛛 N/A		

-		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS							
a.		ne manufacturing and/or pollution control processes producing 🛛 Yes 🗌 No he instructions, is attached.							
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.								
c.		on submitted are confidential, the substantiation for Ses No N/A described in the instructions, is attached.							
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE							
		1. PROCESSING OR DISPOSAL FACILITY(IES)							
The	area below (ad.) will accomm	odate the identification of two facilities. Attach additional sheets if necessary.							
a.	Solid waste permit number 0102784	(s) for processing or disposal facility being utilized.							
b.	Facility Name	Waste Treatment Corp. Warren County							
	Address Line 1	341 West Harmar Street							
	Address Line 1								
	Address City State ZIP	Warren PA							
	Municipality	Warren County Warren							
C.	Facility Contact Name	Rich Gorton							
	Title								
	Phone	814-726-1500 Email Address infor@waste-treatment.net							
d.	Volume of waste shipped t 85	o processing or disposal facility in the previous year.							
a.	Solid waste permit number	(s) for processing or disposal facility being utilized.							
b.	Facility Name								
	Address Line 1								
	Address Line 1								
	Address City State ZIP								
	Municipality	County							
C.	Facility Contact Name								
	Title								
	Phone	Email Address							
d.	Volume of waste shipped t	o processing or disposal facility in the previous year.							
		2. BENEFICIAL USE							
a.	Has the waste been approv								
		rmit number or approval number.							
b.		ly used in the previous year.							
	state st made sonoliola	cuyd gal lb ton (check one)							

-			SECTION D.	CERTIFICA	TION
Repo obta knov	ort and all attached doc ining the information, I	uments verify at the s	and that based upon that the submitted inf submission of false info	my inquiry of ormation is tr rmation herein	liar with the information submitted in this Annual f those individuals immediately responsible for ue, accurate and complete to the best of my is made subject to the penalties of 18 Pa. C.S. d imprisonment.
Chec	k the following, if applica	able:			
	I certify the information	100 million (1997)	ired in Section B-1, Ge	neral Propertie	es was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
	I certify the information		ired in Section B-2, Ch	emical Analysi	is was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:	-			
	I certify the information for the year and			ss Description	and Schematic, was supplied to the Department
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:	-			
Nam	e of Responsible Official			Title	Environmental Specialist
Dina	Brown		1.		
Sign	ature Dh	S	los	Date	2/25/4
		0			



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This form m	ust be fully and accu	rately completed. All re-	quired information must	be	DEP USE	ONLY
each attach	ed sheet as Form 26F	es provided. If additional R, reference the item nur eets needs to match the d	mber and identify the da		eceived &	General Notes
General Refe	erence 287.54					
Date Prepare	d/Revised F	ebruary 11, 2011				
	SECTION A	. CLIENT (GENERAT	OR OF THE WASTE) IN	FORMATI	ON	
Company Na						
	ergy USA Inc.					
	ry, Name of Parent Cor	npany				nerator ID#
Talisman Er					N/A	
	iling Address Line 1		Company Mailing Addres	ss Line 2		
50 Pennwoo		Chata	71-14	Dhann		End
Warrendale	dress Last Line - City	State PA	2ip+4 15086	Phone (724) 81	1.5300	Ext
	ntact Last Name	First Name	15060 MI		Suffix	
Brown	inder Lust Hame	Dina	1411		ounix	
Municipality		Ding	County			
Warrendale			Allegheny			
Contact Pho	ne Ext	Contact Email Address				
(724) 814-53	321	dybrown@talismanus	a.com			
If 'No', descr	ibe location of waste g	any Mailing Address (note eneration and storage. W well pad site located at 151	aste is generated during the			d production of
	ored in tanks onsite. Ward	County Tio	and a second	State		A
		SECTION B. WAS	STE DESCRIPTION			
Residual	Res	idual Waste		Unit of		Time
Waste Code	Code	Description	Amount	Measure		Frame
802	Brine and Wastewa	ter	259		gal ton	] One Time
		1. GENERAL	L PROPERTIES	and the second		
a. pHR			(based on analyses or k	nowledge)		
	ical State	Liquid Waste (EPA Solid (EPA Method Gas (ambient temp	9095) erature & pressure)			
c. Phys	ical Appearance		t yellow/brown Odo uid Phases of Separation of separation. Liquid		bon	
		2. CHEMICAL ANA	LYSIS ATTACHMENTS			
	esults of a detailed che ictions, is attached.	emical characterization of	the waste, as described in	n the	Yes	s 🗌 No
		waste sampling method	is attached.		X Yes	s 🗌 No
c. The c attac		ty control procedures emp	ployed by the laboratory(id	es) is	X Yes	s 🗌 No
		s waste determination is a	ttached.		X Yes	s 🗌 No
	licable, a detailed expl f actual chemical analy	anation supporting use of /sis is attached.	f generator knowledge in	Yes	No No	N/A

-		3 PROCESS	DESCRIPTIO	N & SCHEM	ATIC ATTACHME	NTS	-			
a.	A detailed description of the the waste, as specified in t	ne manufactu	ring and/or	collution co	AND A REPORT OF A DESCRIPTION OF A DESCR			Yes		No
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.									
c.	If portions of the informati a confidentiality claim, as					Yes		No		N/A
	SEC	TION C. N	ANAGEN	IENT OF	RESIDUAL	WASTE		-		
		1. PR	CESSING OF	DISPOSAL	FACILITY(IES)					
The	area below (ad.) will accomm	odate the ide	entification of	of two facilit	ies. Attach add	tional sheets	if neo	cessary		
a.	Solid waste permit number MDD980555189	(s) for proce	ssing or disp	oosal facility	y being utilized.					
b.	Facility Name	Clean H	arbors of Ba	altimore						
	Address Line 1	1910 RL	issell St							
	Address Line 1									
	Address City State ZIP	Baltimor	26 Ju		ND	21230	_			
_	Municipality	Baltimor	e	(	County					
c.	Facility Contact Name	-					_			
	Title									
	Phone	(410) 24	4-8200	Email /	Address					
d.	Volume of waste shipped t 259	o processing	or disposal	facility in th	ne previous year	(check one)	1			
a.	Solid waste permit number	(s) for proces	ssing or disp	osal facility	/ being utilized.					
b.	Facility Name									
	Address Line 1									
	Address Line 1	-						-		
	Address City State ZIP									
	Municipality			0	County					
C.	Facility Contact Name						-			
	Title						-			
	Phone			Email /	Address					
d.	Volume of waste shipped t	processing	or disposal	facility in th	ne previous year	(check one)	-			
				<u>ц</u>	L	(enternerie)				
	Has the waste been approv	ed for henefi		EFICIAL US	<b></b>			Yes		No
a.								165		NO
h	If "Yes", list the general pe Volume of waste beneficial									_
b.	volume of waste beneficial	cu yd	gal	lb	T ton	(check one)	-			
			L gu			(oncon one)				

			SECTION D. CERTIFICATION	
Repo obta knov	ort and all attached doo ining the information, I vledge. I understand th	cuments verify at the s	ave personally examined and am familiar with the information submitted in this and that based upon my inquiry of those individuals immediately responsi- that the submitted information is true, accurate and complete to the best ubmission of false information herein is made subject to the penalties of 18 F on to authorities, which include fine and imprisonment.	ible for of my
Chec	k the following, if applic	able:		
	I certify the information in the second seco		red in Section B-1, General Properties was supplied to the Department for the	ne year
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
	I certify the information and has not cha		red in Section B-2, Chemical Analysis was supplied to the Department for th	ne year
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
	I certify the information for the year and		ed in Section B-3, Process Description and Schematic, was supplied to the Depa changed.	artment
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
Nam	e of Responsible Official	-	Title Environmental Specialist	
Dina	Brown		1.	
Sign	ature	-	3/5m Date 2/25/4	
-				



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This form m	B DEP	DEP USE ONLY			
typed or legil each attache	bly printed in the spaces p ad sheet as Form 26R, re ne date on attached sheets	rovided. If additional sp ference the item numb	ace is necessary, identif er and identify the date	y Date Receiv	ed & General Notes
General Refe	rence 287.54				
Date Prepare	d/Revised Febru	uary 11, 2011			
	SECTION A. C	LIENT (GENERATOR	R OF THE WASTE) INF	ORMATION	
Company Na					
	ergy USA Inc.				
	ry, Name of Parent Compar	ıy		EPA N/A	Generator ID#
alisman En	illing Address Line 1	C	ompany Mailing Address	11 sql 2 sp2 11	
0 Pennwoo			omporty maning rearies	Lino L	
Company Ad	dress Last Line - City	State	Zip+4	Phone	Ext
Varrendale		PA	15086	(724) 814-53	the second se
Company Co Brown	ntact Last Name	First Name Dina	MI	Suff	ix
lunicipality			County		
Varrendale Contact Phor	End (		Allegheny		
724) 814-53	17 TO 1	Contact Email Address lybrown@talismanusa.c	om		
	generated at the Company			П	Yes 🕅 No
	be location of waste gener			Irilling, completion	
	the DCNR 587 02-008 well r				
emporarily sto	ored in tanks onsite.				
lunicipality	Ward	County Tioga		State	PA
		SECTION B. WAST	E DESCRIPTION		
Residual	Residua			Unit of	Time
Naste Code	Code Des	scription	Amount	Measure	Frame
302	Brine and Wastewater		193	lb ⊠ ton	One Time
-		1. GENERAL P	ROPERTIES		1
. pH Ra	ange 6	to 7	(based on analyses or known	wledge)	
o. Physi	cal State	Liquid Waste (EPA Me Solid (EPA Method 90 Gas (ambient tempera	95)		
:. Physi	N	Color Translucent ye	d Phases of Separation	Hydrocarbon One	
	ſ	escribe each phase of s	eparation. Liquid		
		2. CHEMICAL ANALY			
instru	esults of a detailed chemic actions, is attached.			-	Yes 🗌 No
	ailed description of the was			$\boxtimes$	Yes 🗌 No
attach	1, 3 (102)			-	Yes 🗌 No
21. · · · · · · · · · · · · · · · · · · ·	esults of the hazardous wa		22412323	$\boxtimes$	Yes No
	licable, a detailed explanat f actual chemical analysis		enerator knowledge in	Yes	No N/A

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS							
a.		he manufacturing and/or pollution control processes producing 🛛 Yes 🗌 No. the instructions, is attached.							
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes INO as specified in the instructions, is attached.								
C.		on submitted are confidential, the substantiation for Ses No N/A described in the instructions, is attached.							
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE							
		1. PROCESSING OR DISPOSAL FACILITY(IES)							
The	area below (ad.) will accomm	nodate the identification of two facilities. Attach additional sheets if necessary.							
a.	Solid waste permit number MDD980555189	r(s) for processing or disposal facility being utilized.							
b.	Facility Name	Clean Harbors of Baltimore							
	Address Line 1	1910 Russell St							
	Address Line 1								
	Address City State ZIP	Baltimore MD 21230							
-	Municipality	Baltimore County							
c.	Facility Contact Name								
	Title Phone	(410) 244-8200 Email Address							
-		(							
d.	Volume of waste shipped t 103	o processing or disposal facility in the previous year.							
a.	Solid waste permit number	r(s) for processing or disposal facility being utilized.							
b.	Facility Name	PA Brine							
	Address Line 1	5148 US 322							
	Address Line 1								
	Address City State ZIP	Franklin PA 16323							
	Municipality	Franklin County Venango							
C.	Facility Contact Name	Elton Delong							
	Title								
	Phone	(814) 437-3593 Email Address info@pabrine.com							
d.	Volume of waste shipped t 90	o processing or disposal facility in the previous year.							
	and the second second	2. BENEFICIAL USE							
a.	Has the waste been approv	ved for beneficial use?  Yes No Prmit number or approval number.							
	II IES, IISLUIG UCHEIALDE								
b.		Ily used in the previous year.							

	and an in the second		SECTION D. CERTIFICATION
Repo obtai know	ort and all attached docu ning the information, I vledge. I understand that	uments verify t the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Chec	k the following, if applica	ble:	
	I certify the information and has not char		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	_	
	I certify the Information and has not char		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	-	
	I certify the information for the year and I		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
Name	of Responsible Official		Title Environmental Specialist
Dina	Brown		-1-
Signa	ature Sh		2/25/11 Date 2/25/11
		-	



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This	form m	ust be fully and accura	tely completed. All requ	uired information must	be	DEPI	USE C	DNLY
typed	d or legil attache	oly printed in the spaces of sheet as Form 26R,	provided. If additional s reference the item num ts needs to match the dat	pace is necessary, ident ber and identify the da	ify Da	te Receive	ed & G	eneral Notes
Gene	eral Refe	rence 287.54						
Date	Prepare	d/Revised Feb	oruary 11, 2011					
		SECTION A.	CLIENT (GENERATO	R OF THE WASTE) IN	FORMA	TION		
Com	pany Na							
		ergy USA Inc.						
		y, Name of Parent Comp	any				Gener	ator ID#
		ergy Inc. iling Address Line 1	(	Company Mailing Addres	s line 2	N/A		
	ennwoo			sompany maning Addres	o Line L			
	Company Address Last Line – City			Zip+4	Phone		-	Ext
	rendale PA 15086					814-530		
		ntact Last Name	First Name	MI		Suffix	C	132
Brow	cipality		Dina	County				
	endale			Allegheny				
and the second second second	act Phon	e Ext	Contact Email Address					
	814-53		dybrown@talismanusa.		_			
			y Mailing Address (noted		1.100		Yes	No No
			eration and storage. Was I pad site located at 2499 F					
		red in tanks onsite.	i pad site located at 2455 h	aver road, ward rownsin	J, Draulord	County,	r. 1	The waste is
	cipality	Ward	County Tioga	1	St	ate	PA	
			SECTION B. WAS	TE DESCRIPTION				
	idual	- DOVE (1997)	al Waste				Time	
Wast	e Code	Code D	escription	Amount	Measu	and the second se	Frame	
802		Brine and Wastewater		25	l cu yd	☐ gal ⊠ ton	m	One Time
-	-		1. GENERAL	PROPERTIES	110	ES LOIT		one mile
a.	pH Ra	nge 6	to 7	(based on analyses or kn	owledge)			
b.	Physic	cal State	Liquid Waste (EPA M Solid (EPA Method 90 Gas (ambient tempera	095)				
C.	Physic	cal Appearance	Color Translucent y Number of Solid or Liqui Describe each phase of s	d Phases of Separation	Hydro One	carbon		
_								
-	There	where the desided of the	2. CHEMICAL ANALY	a set a state of the set of the s	44-2	57	V	-
a.	instru	ctions, is attached.	cal characterization of th		the		Yes	No No
b.			aste sampling method is		1.2		Yes	No
C.	The qu attach		control procedures emplo	byed by the laboratory(ie	5) IS		Yes	No No
d.			aste determination is atta	ached.			Yes	□ No
e.		icable, a detailed explan actual chemical analysis	ation supporting use of g	enerator knowledge in	Yes	the second se	No	N/A

a.				MATIC ATTA								
	A detailed description of the the waste, as specified in the	e manufacturing and/o e instructions, is atta		ontrol proc	esses	producing		Yes		No		
b.	A schematic of the manufa as specified in the instructi		n control pro	cesses pro	oducing	the waste,		Yes		No		
C.	If portions of the information a confidentiality claim, as d				on for	Yes		No		N/A		
	SECT	ION C. MANAGI	EMENT O	RESID	UAL	WASTE						
		1. PROCESSING	OR DISPOSAL	FACILITY	IES)							
The a	area below (ad.) will accomm	odate the identification	n of two facil	ties. Attac	h addit	tional sheets	if neo	cessary	1.			
a.	Solid waste permit number 0008451	s) for processing or d	isposal facili	ty being ut	ilized.							
b.	Facility Name	Sunbury Generat	on Wastewa	ter Treatm	nent Fa	cility						
	Address Line 1	Old Trail Road										
	Address Line 1	P.O. BOX 517										
	Address City State ZIP	Shamokin Dam	-	PA		17876			_			
	Municipality	Shamokin Dam		County	Sny	der						
с.	Facility Contact Name Title	Sheldon Kowales	ki						_			
	Phone	(570) 884-1250	Email	Address			-					
d.	Volume of waste shipped to 25	processing or dispos	al facility in	the previou		(check one	.)	-				
a.	Solid waste permit number	s) for processing or d	isposal facili	ty being ut	ilized.							
b.	Facility Name						-			-		
	Address Line 1								-			
	Address Line 1											
	Address City State ZIP						-					
	Municipality			County								
c.	Facility Contact Name											
	Title						-					
	Phone											
d.	Volume of waste shipped to	processing or dispos	al facility in	he previou		(check one	)					
		2. B	ENEFICIAL U	SE					-			
a.	Has the waste been approve							Yes		No		
	If "Yes", list the general per	mit number or approv	al number.				-					
b.	Volume of waste beneficial			to	'n	(check one	)					

Repo obta know	ort and all attached docu ining the information, I vledge. I understand that	verify t the s	SECTION D. CERTIFICATION have personally examined and am familiar with the information submitted in this Annua is and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S on to authorities, which include fine and imprisonment.
Chee	ck the following, if applica	ble:	
	I certify the information and has not char		ired in Section B-1, General Properties was supplied to the Department for the yea
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information and has not char		ired in Section B-2, Chemical Analysis was supplied to the Department for the yea
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	_	
	I certify the information for the year and I		ed in Section B-3, Process Description and Schematic, was supplied to the Departmen t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
Nam	e of Responsible Official		Title Environmental Specialist
Dina	Brown	-	1
Sign	ature	)n	SUS2 Date 2/25/11



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This form	n must be fully and acc	urately completed. All req	uired information must be	DEP L	JSE ONLY
each atta	ached sheet as Form 26	ces provided. If additional s R, reference the item num heets needs to match the da	ber and identify the date	the second of the second of the	d & General Notes
General I	Reference 287.54				
Date Pre	pared/Revised	February 11, 2011			
1	SECTION	A. CLIENT (GENERATO	OR OF THE WASTE) INFO	ORMATION	
Company					
	Energy USA Inc.				
	idiary, Name of Parent Co Energy Inc.	ompany			Generator ID#
	Mailing Address Line 1		Company Mailing Address I	N/A	
	wood Place		company maning radiess i		
	Address Last Line - City	y State	Zip+4	Phone	Ext
Warrend		PA	15086	(724) 814-530	
Company Brown	Contact Last Name	First Name Dina	MI	Suffix	
Municipa	1. N. F.		County		
Warrend		0.1.15.11.11	Allegheny		
Contact F (724) 814		Contact Email Address dybrown@talismanusa			
		pany Mailing Address (noted			Yes 🕅 No
		generation and storage. Wa			
natural ga	s at the DCNR 587 02-017	well pad site located at 1247 I	Fallbrook Road, Ward Townsh	ip, Bradford Cour	nty, PA. The waste
	arily stored in tanks onsite.			-	
Municipa	lity Ward	County Tiog		State	PA
		SECTION B. WAS	TE DESCRIPTION		
Residua Waste Co		sidual Waste e Description	Amount	Unit of	Time
			Amount	Measure cu yd 🗌 gal	Frame
802	Brine and Wastew	ater		b 🛛 ton	One Time
		1. GENERAL	PROPERTIES		Y Y
and the second se		6 to 7	(based on analyses or know	ledge)	
b. Pl	nysical State	Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper	095)		
c. Pl	nysical Appearance	Color Translucent	yellow/brown Odor	Hydrocarbon	
		Number of Solid or Liqu	id Phases of Separation	One	
		Describe each phase of	separation. Liquid		
		2. CHEMICAL ANALY	YSIS ATTACHMENTS	-	
	e results of a detailed ch structions, is attached.	emical characterization of th	ne waste, as described in the	e 🛛 '	Yes 🗌 No
		e waste sampling method is	attached.	$\boxtimes$	Yes 🗌 No
c. Th		ity control procedures emplo		Laboration of the laboration o	Yes 🗌 No
		is waste determination is att	ached.	X	Yes No
	applicable, a detailed exp u of actual chemical ana	lanation supporting use of g	generator knowledge in [	and a second	No 🛛 N/A

		3. PROCESS DESCRIPTIO	N & SCHEMATIC ATTAC	CHMENTS	-		-
a.	A detailed description of t the waste, as specified in			esses producing	X Yes		No
b.	A schematic of the manufa as specified in the instruct		control processes proc	ducing the waste,	Yes		No
3.	If portions of the informati a confidentiality claim, as			n for 🗌 Yes	No No		N//
	SEC	TION C. MANAGEN	MENT OF RESIDU	JAL WASTE	~ 4 3	-	
			DISPOSAL FACILITY (IE				
The	area below (ad.) will accomm	nodate the identification of	f two facilities. Attach	additional sheets	if necessary	y.	
a.	Solid waste permit number 101508	r(s) for processing or dis	osal facility being util	ized.			
).	Facility Name	PA Brine					
	Address Line 1	5148 US 322				-	
	Address Line 1 Address City State ZIP	Freeblin	DA	16323			
	Municipality	Franklin	PA County	Venango			
	Facility Contact Name	Elton DeLong	county	venango			-
	Title						
-	Phone	(814) 437-3593	Email Address	info@pabrine.co	m	-	
Ι.	Volume of waste shipped t 41	o processing or disposal	facility in the previous		6		
l.,	Solid waste permit number 0102784	(s) for processing or disp	osal facility being util	ized.			
).	Facility Name	Waste Treatment Co	orp. Warren County				
	Address Line 1	341 West Harmar S	treet				
	Address Line 1						_
	Address City State ZIP Municipality	Warren	PA County	16365		_	_
	wunicipanty	Warren	County	Warren			-
_	Facility Contract Norma	Dish Orator					
	Facility Contact Name	Rich Gorton					-
	Facility Contact Name Title Phone		Email Address	info@waste-treat	Iment net		
	Title Phone	(814) 726-1500		info@waste-treat	tment.net		_
	Title	(814) 726-1500		year.			
	Title Phone Volume of waste shipped t	(814) 726-1500 p processing or disposal cu yd gal	facility in the previous	year.			
i. I.	Title Phone Volume of waste shipped to 134 Has the waste been approv	(814) 726-1500 processing or disposal cu yd gal 2. BEN red for beneficial use?	facility in the previous	year.			No
ι.	Title Phone Volume of waste shipped to 134	(814) 726-1500 p processing or disposal cu yd gal 2. BEN red for beneficial use? rmit number or approval	facility in the previous ☐ Ib ⊠ ton IEFICIAL USE number.	year.			No

			SECTION D. C	ERTIFICA	TION
Rep obta know	ort and all attached do ining the information, l wledge. I understand th	cuments I verify at the s	and that based upon that the submitted info	my inquiry of ormation is tr mation herein	liar with the information submitted in this Annual f those individuals immediately responsible for ue, accurate and complete to the best of my is made subject to the penalties of 18 Pa. C.S. d imprisonment.
Che	ck the following, if applic	able:			
	I certify the information and has not characterized		ired in Section B-1, Gen	eral Propertie	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
	I certify the information		ired in Section B-2, Che	mical Analysi	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:	_			
	I certify the information for the year and			s Description	and Schematic, was supplied to the Department
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
Nam	e of Responsible Official			Title	Environmental Specialist
Dina	Brown	1	~ 11	_	
Sign	ature	2	no	Date	2/2.5/11



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

	n must be fully and accur				ISE ONLY
each atta	legibly printed in the space ached sheet as Form 26R, . The date on attached she	reference the item num	ber and identify the date		d & General Notes
General F	Reference 287.54				
Date Prep	pared/Revised Fe	bruary 11, 2011			
	SECTION A.	CLIENT (GENERATO	R OF THE WASTE) INFO	ORMATION	
Company					
	Energy USA Inc. diary, Name of Parent Com			EDA	Conceptor ID#
	Energy Inc.	pany		N/A	Senerator ID#
Company	Mailing Address Line 1 wood Place	(	Company Mailing Address I		
	Address Last Line - City	State	Zip+4	Phone	Ext
Warrenda		PA	15086	(724) 814-530	
Company Brown	Contact Last Name	First Name Dina	MI	Suffix	
Municipal			County		
Warrenda Contact P		Contact Email Address	Allegheny		
(724) 814		dybrown@talismanusa.	com		
	ste generated at the Compa				Yes 🛛 No
	scribe location of waste ge				
	s at the DCNR 587 02-018 w y stored in tanks onsite.	ell site located at 560 Fallbro	ook Road, Ward Township, Bi	radford County, PA	A. The waste is
Municipal		County Tioga	4	State	PA
		SECTION B. WAS			
Residua	al Resid	lual Waste		Unit of	Time
Waste Co	de Code	Description	Amount	Measure	Frame
802	Brine and Wastewate	er	72	cu yd	One Time
		1. GENERAL			
	Range 6	to 7	(based on analyses or know	vledge)	
b. Pł	nysical State	Liquid Waste (EPA M Solid (EPA Method 90 Gas (ambient temper	095)		
c. Ph	ysical Appearance	Color Translucent y		Hydrocarbon	
		Number of Solid or Liqui Describe each phase of	id Phases of Separation	One	
		2. CHEMICAL ANALY			
	e results of a detailed cher structions, is attached.		and an end of the second s	e 🛛	Yes 🗌 No
	detailed description of the	waste sampling method is	attached.		Yes No
c. Th	e quality assurance/quality tached.				Yes 🗌 No
	e results of the hazardous	waste determination is atta	ached.	X	Yes No
	applicable, a detailed expla		enerator knowledge in [		No 🛛 N/A

		3. PROCESS DESCRIPTIO	ON & SCHEMATIC ATT	ACHMENTS	-	
a.	A detailed description of the the waste, as specified in t	e manufacturing and/or	pollution control pro		Yes	No No
b.	A schematic of the manufa as specified in the instruct		control processes p	roducing the waste,	Yes	□ No
c.	If portions of the information a confidentiality claim, as o	on submitted are confide lescribed in the instructi	ntial, the substantiations, is attached.	tion for 🗌 Yes	No No	🛛 N/A
	SECT	TION C. MANAGE	MENT OF RESID	DUAL WASTE		
			R DISPOSAL FACILITY		a dance of	
The	area below (ad.) will accomm				if necessary	
a.	Solid waste permit number PA101508	(s) for processing or dis	posal facility being u	utilized.		-
b.	Facility Name	PA Brine				
	Address Line 1	5148 US 322				
	Address Line 1					
	Address City State ZIP	Franklin	PA	16323		
_	Municipality	Franklin	County	Venango		
C.	Facility Contact Name Title	Elton DeLong				
	Phone	(814) 437-3593	Email Address	info@pabrine.co	m	
d.			Sector Annual Presentation		ALL .	
a.	Volume of waste shipped to 72	cu yd gal			)	
a.	Solid waste permit number	(s) for processing or dis	posal facility being u	itilized.		
b.	Facility Name					
	Address Line 1					
	Address Line 1					
	Address City State ZIP					
	Municipality		County			
с.	Facility Contact Name					
	Title					
	Phone		Email Address			
d.	Volume of waste shipped to	processing or disposal		ton (check one	)	
		2. BE	NEFICIAL USE			-
a.	Has the waste been approv				Yes	No No
	If "Yes", list the general per	mit number or approval	number			
	n ico, not the general per	min number of approval	numper.			

			SECTION D. CER	TIFICA	TION
Rep obta knov	ort and all attached doc ining the information, I wledge. I understand that	uments verify at the s	and that based upon my that the submitted informa	inquiry of tion is tr on herein	iar with the information submitted in this Annual those individuals immediately responsible for ue, accurate and complete to the best of my is made subject to the penalties of 18 Pa. C.S. d imprisonment.
Che	ck the following, if applica	ble:			
	I certify the information and has not char		red in Section B-1, General	Propertie	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
	I certify the information and has not char		red in Section B-2, Chemic	al Analysi	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:	_			
	I certify the information for the year and			escription	and Schematic, was supplied to the Department
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:	-			
Nam	e of Responsible Official			Title	Environmental Specialist
Dina	Brown		11		
Sign	ature	5	non	Date	2/25/4
		V			



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

		accurately completed. All			DEP U	JSE O	NLY	
each attache	ad sheet as Form	spaces provided. If addition 26R, reference the item d sheets needs to match the	number and identify the	entify Da date	te Receiver	d & Ge	eneral Notes	
General Refe	rence 287.54							
Date Prepare	d/Revised	February 11, 2011						
	SECTIO	NA. CLIENT (GENER	ATOR OF THE WASTE)	INFORMA	TION	-		
Company Na	me			ALCOLUCE ALCOLUCE	an a con			
	ergy USA Inc.							
	y, Name of Parent	Company				Gener	ator ID#	
Falisman En	ergy Inc. iling Address Line	4	Compony Melling Add	man Line O	N/A	_		
50 Pennwoo	the second s		Company Mailing Add	ress Line 2				
	dress Last Line - 0	City St	ate Zip+4	Phone	Phone Ex			
Varrendale		PA		0.000000	814-530	0		
ompany Co	ntact Last Name	First Name	MI		Suffix			
Brown		Dina						
Aunicipality			County					
Varrendale Contact Phor	ne Ext	Contact Email Addre	Allegheny					
724) 814-53		dybrown@talisman						
	the second s	ompany Mailing Address (n			П	Yes	No No	
		te generation and storage.		the drilling, co				
atural gas at	the (01-013) W	/ well pad site located at 1456	Fairbanks Road, Columbia	Township, Bi	adford Co	ounty.	PA. The	
vaste is temp	orarily stored in tank	ks onsite.						
lunicipality	Columbia		Bradford		tate	PA		
		SECTION B. W	ASTE DESCRIPTIO	N				
Residual		Residual Waste	1	Unit of			Time	
Vaste Code	C	ode Description	Amount	Measu		Frame		
302	Brine and Waste	ewater	75	Cu yd	gal gal	П	One Time	
-		1. GENER	RAL PROPERTIES				one mile	
. pH Ra	inge	6 to 7	(based on analyses o	r knowledge)				
	cal State	Liquid Waste (EP	PA Method 9095)					
. Physic	cal Appearance		ent yellow/brown O Liquid Phases of Separation		carbon	_		
			e of separation. <u>Liquid</u>					
			NALYSIS ATTACHMENTS					
instru	ctions, is attached			I in the		Yes	No No	
		f the waste sampling metho					No	
attach	ied.	uality control procedures e		(ies) is		Yes	□ No	
2		dous waste determination is			Recenced.	Yes	No No	
		explanation supporting use nalysis is attached.	of generator knowledge i	n 🗌 Yes		No	N/A	

		3. PROCES	S DESCRIPTI	ON & S	CHEMA	TIC ATTA	CHMEN	TS		-	-	-
a.	A detailed description of the the waste, as specified in t	e manufact	turing and/or	r polluti						Yes		No
b.	A schematic of the manufa as specified in the instruct			contro	proce	sses pro	ducing	the waste,		Yes		No
c.	If portions of the information a confidentiality claim, as o						on for	Yes		No		N/A
-	SECT	TION C.	MANAGE	MENT	OF	RESIDU	JAL V	VASTE				
			ROCESSING									
The	area below (ad.) will accomm	odate the id	dentification	of two	aciliti	es. Attacl	h additi	onal sheets	s if nee	cessary	1.	
a.	Solid waste permit number 0008451	(s) for proc	essing or di	sposal f	acility	being uti	lized.					
b.	Facility Name	Sunbur	ry Generatio	on Wast	ewate	r Treatm	ent Fac	cility				
	Address Line 1	Old Tra	ail Road									
	Address Line 1	P.O. B	OX 517								_	
	Address City State ZIP	Shamo	kin Dam		P	Ą		17876				
	Municipality	Shamo	kin Dam		C	ounty	Snyc	ler				
	Facility Contact Name Title	Sheldo	n Kowalesk	i	_	_						
	Phone	(570) 8	84-1235	E	mail A	ddress						
d.	Volume of waste shipped to 75	o processin	g or disposa		y in the	previous		(check one	e)			
а.	Solid waste permit number	(s) for proce	essing or dis	sposal f	acility	being util	lized.					
b.	Facility Name	_			_				_		-	_
	Address Line 1											
	Address Line 1											
	Address City State ZIP											
	Municipality				C	ounty						
5.	Facility Contact Name					-					-	
	Title	-										
	Phone	-		E	mail A	ddress						
d.	Volume of waste shipped to	nrocessin	a or dispose	al facility	in the	nreviou	s vear					
	Volume of Waste Shipped to	cu yd	g gal		lb	tor		(check one	e)			
			2. BE	NEFICIA	L USE							
э.	Has the waste been approv	ed for bene	ficial use?							Yes	$\boxtimes$	No
	If "Yes", list the general pe	mit numbe	r or approva	Inumbe	er.							
b. Volume of waste beneficially used in the previous year.												
M									)			

SECTION	D.	CERTIFICATION
ALC: 100 ALC: 1 1 ALC: 1 ALC: 1		

			SECTION D.	GERTITIOA	INDIX,
Repo obtai know	ort and all attached do ining the information,	cuments l verify at the s	and that based upo that the submitted i ubmission of false in	on my inquiry of nformation is tra formation herein	iar with the information submitted in this Annual those individuals immediately responsible for ue, accurate and complete to the best of my is made subject to the penalties of 18 Pa. C.S. d imprisonment.
Chec	k the following, if applic	able:			
	I certify the information and has not characterized		ired in Section B-1, 0	Seneral Propertie	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
	I certify the information and has not characterized		red in Section B-2, (	Chemical Analysis	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:	-			
	I certify the information for the year and			cess Description	and Schematic, was supplied to the Department
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
Name	e of Responsible Official			Title	Environmental Specialist
Dina	Brown		10		
Signa	ature Ah	- 4	Non	Date	2/25/4
		1			* 1



### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

and the second second second	ust be fully and a	accurately (	completed. All red	uired information must	De	DEF	USE O	NLT	
each attache	d sheet as Form	26R, refer	rided. If additional s ence the item nun eds to match the da	space is necessary, iden ober and identify the o te noted below.	ntify D late	ate Receiv	ed & Ge	eneral N	otes
General Refe	rence 287.54								
Date Prepare	d/Revised	February	/ 11, 2011						
	SECTIO	NA. CLI	ENT (GENERATO	OR OF THE WASTE) I	NFORM	TION	-		
Company Na									
Talisman En	ergy USA Inc.								
	y, Name of Parent	Company					Gener	ator ID	#
Talisman En						N/A			_
50 Pennwood	iling Address Line	11		Company Mailing Addre	ess Line 2				
	dress Last Line - I	City	State	Zip+4	Phor			Ext	-
Narrendale	aress Last Line -	only	PA	15086		) 814-53	00	LAI	
Company Con	ntact Last Name	_	First Name	MI	(1.2.1	Suffi			-
Brown			Dina	and the second s			_		_
Municipality Warrendale				County					
Contact Phon	ie Ext	Con	tact Email Address	Allegheny					-
724) 814-53			rown@talismanusa	com					
			iling Address (note			Π	Yes	X	No
					e drilling, co	ompletion	and p	roducti	on of
f 'No', descril natural gas at	be location of was the (01-003)	te generation J well pad si	on and storage. Wa	ste is generated during th uckwheat Road, Granville					
f 'No', descril natural gas at waste is tempo	be location of was the (01-003) prarily stored in tank	te generation J well pad si	on and storage. <u>Wa</u> ite located at 1349 Bi	ste is generated during th uckwheat Road, Granville	Township,	Bradford	County		
If 'No', descrip natural gas at	be location of was the (01-003)	te generatio J well pad si ks onsite.	on and storage. <u>Wa</u> ite located at 1349 Bi County Brac	iste is generated during th uckwheat Road, Granville Iford	Township,				
f 'No', descri natural gas at waste is tempo Municipality	be location of was the (01-003) prarily stored in tank Granville	te generatio J well pad si ks onsite.	county Brac CTION B. WAS	ste is generated during th uckwheat Road, Granville	Township,	Bradford State	County	PA. 1	he
f 'No', descril natural gas at waste is tempo Municipality Residual	be location of was the (01-003) orarily stored in tank Granville	te generatio J well pad si ks onsite. SE( Residual W	on and storage. <u>Wa</u> lite located at 1349 Bi County Brac CTION B. WAS aste	Inste is generated during the uckwheat Road, Granville Iford TE DESCRIPTION	Township, S Unit	Bradford itate	County	PA. 1	he
f 'No', descril natural gas at waste is tempo Municipality Residual Waste Code	be location of was the (01-003) orarily stored in tank Granville	te generation J well pad si ks onsite. SE( Residual Wi Code Descri	on and storage. <u>Wa</u> lite located at 1349 Bi County Brac CTION B. WAS aste	In the second se	Township, S Unit Meas	Bradford itate of sure	County	PA. 1	he
f 'No', descril natural gas at waste is tempo Municipality Residual Waste Code	be location of was the (01-003) orarily stored in tank Granville	te generation J well pad si ks onsite. SE( Residual Wi Code Descri	on and storage. <u>Wa</u> lite located at 1349 Bi County Brac CTION B. WAS aste	Inste is generated during the uckwheat Road, Granville Iford TE DESCRIPTION	Township, S Unit	Bradford itate of ure gal	County	PA. 1 Time Fram	he e
f 'No', descril natural gas at waste is tempo Municipality Residual Waste Code	be location of was the (01-003) orarily stored in tank Granville	te generation J well pad si ks onsite. SE( Residual Wi Code Descri	on and storage. <u>Wa</u> lite located at 1349 Bi County Brac CTION B. WAS aste ption	In the second se	Township, S Unit Meas	Bradford itate of sure	County	PA. 1	he e
If 'No', descril natural gas at waste is tempo Municipality Residual Waste Code 802 a. pH Ra	be location of was the (01-003) orarily stored in tank Granville C Brine and Waste	te generation J well pad si ks onsite. SE( Residual Wi Code Descri	on and storage. <u>Wa</u> lite located at 1349 Bi County Brac CTION B. WAS aste ption	In the second se	Township, S Unit Meas Cu yd Ib	Bradford itate of ure gal	County	PA. 1 Time Fram	he e
If 'No', descril natural gas at waste is tempo Municipality Residual Waste Code 802 a. pH Ra	be location of was the (01-003) orarily stored in tank Granville C Brine and Waste	te generation J well pad si ks onsite. SE( Residual W Code Descri ewater 6	County Brace County Brace CTION B. WAS aste ption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method S	Interest is generated during the uckwheat Road, Granville diford Interest I	Township, S Unit Meas Cu yd Ib	Bradford itate of ure gal	County	PA. 1 Time Fram	he e
f 'No', descril hatural gas at waste is tempo Municipality Residual Waste Code 302 a. pH Ra b. Physic	be location of was the (01-003) orarily stored in tank Granville C Brine and Waste	te generation J well pad si ks onsite. SE( Residual W Code Descri ewater 6	County Brace County Brace CTION B. WAS aste ption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient tempe	Interest is generated during the uckwheat Road, Granville difford Interest	Township, S Unit Meas Cu yd Cu yd Ib	Bradford itate of ure gal	County	PA. 1 Time Fram	he e
f 'No', descril hatural gas at waste is tempo Municipality Residual Waste Code 302 a. pH Ra b. Physic	be location of was the (01-003) orarily stored in tank Granville O Brine and Waste ange cal State	te generatio J well pad si ks onsite. SEC Residual W Code Descri ewater 6 6 Colo	County Brace County Brace CTION B. WAS aste ption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method S Gas (ambient tempe or Translucent	te is generated during the uckwheat Road, Granville ford TE DESCRIPTION Amount 106 PROPERTIES (based on analyses or Method 9095) 0095) rature & pressure)	Township, S Unit Meas Cu yd Ib knowledge)	of ure ☐ gal ⊠ ton	County	PA. 1 Time Fram	he e
f 'No', descril hatural gas at vaste is tempo Municipality Residual Waste Code 302 . pH Ra . Physic	be location of was the (01-003) orarily stored in tank Granville O Brine and Waste ange cal State	te generatio J well pad si ks onsite. SEC Residual W. Code Descri ewater 6	County Brace County Brace CTION B. WAS aste ption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method S Gas (ambient tempe or Translucent	te is generated during the uckwheat Road, Granville difford the text of tex of text of text of text of	Township, S Unit Meas Cu yd Ib knowledge)	of ure ☐ gal ⊠ ton	County	PA. 1 Time Fram	he e
f 'No', descril hatural gas at vaste is tempo Municipality Residual Waste Code 302 . pH Ra . Physic	be location of was the (01-003) orarily stored in tank Granville O Brine and Waste ange cal State	te generatio J well pad si ks onsite. SEC Residual W Code Descri ewater 6 6	County Brac County Brac CTION B. WAS aste ption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method S Gas (ambient tempe or Translucent ther of Solid or Liqu cribe each phase of	te is generated during the uckwheat Road, Granville diford the text of	Township, S Unit Meas Cu yd Ib knowledge)	of ure ☐ gal ⊠ ton	County	PA. 1 Time Fram	he e
f 'No', descril hatural gas at vaste is tempo funicipality Residual Waste Code 302 . pH Ra . Physic . Physic . The re	be location of was the (01-003) orarily stored in tank Granville Brine and Waste ange cal State cal Appearance	te generatio J well pad si ks onsite. SEC Residual W. Code Descri ewater 6 6 Colo Num Desc	County Brac County Brac CTION B. WAS aste ption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method S Gas (ambient tempe or Translucent ther of Solid or Liqu cribe each phase of 2. CHEMICAL ANAL	te is generated during the uckwheat Road, Granville difford the text of tex of text of text of text of	Township, S Unit Meas Cu yd Ib (nowledge) or Hydro One	of ure ☐ gal ⊠ ton	County	PA. 1 Time Fram	he e
f 'No', descril hatural gas at vaste is tempo funicipality Residual Waste Code 302 . pH Ra . Physic . Physic . The re instruct	be location of was the (01-003) orarily stored in tank Granville Brine and Waste ange cal State cal Appearance	te generatio J well pad si ks onsite. SEC Residual W. Code Descri ewater 6 6 Colo Num Desc	County Brac County Brac CTION B. WAS aste ption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient tempe or Translucent or Translucent ber of Solid or Liqu cribe each phase of 2. CHEMICAL ANAL characterization of t	In the second se	Township, S Unit Meas Cu yd Ib (nowledge) or Hydro One	Bradford itate of ure □ gal ⊠ ton ocarbon	Yes	PA. 1 Time Fram	ime No
f 'No', descril natural gas at vaste is tempo funicipality Residual Waste Code 302 . pH Ra . Physic . Physic . The re instruct. . A deta	be location of was the (01-003) orarily stored in tank Granville C Brine and Waste cal State cal Appearance esults of a detailed ctions, is attached illed description o	te generatio J well pad si ks onsite. SEC Residual W Code Descri ewater 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	County Brac County Brac CTION B. WAS aste ption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method S Gas (ambient tempe or Translucent ber of Solid or Liqu cribe each phase of 2. CHEMICAL ANAL characterization of the	In the waste, as described i settached.	Township, S Unit Meas Cu yd Ib (nowledge) or Hydro One n the	Bradford itate of gal gal ton ocarbon	Yes Yes	PA. 1 Time Fram One 1	ime No No
f 'No', descrill hatural gas at vaste is tempo funicipality Residual Waste Code 302 . pH Ra . Physic . Physic . The re instruct. . A deta	be location of was the (01-003) orarily stored in tank Granville C Brine and Waste ange cal State cal Appearance esults of a detailed ctions, is attached ailed description o uality assurance/q	te generatio J well pad si ks onsite. SEC Residual W Code Descri ewater 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	County Brac County Brac CTION B. WAS aste ption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method S Gas (ambient tempe or Translucent ber of Solid or Liqu cribe each phase of 2. CHEMICAL ANAL characterization of the	In the second se	Township, S Unit Meas Cu yd Ib (nowledge) or Hydro One n the	Bradford itate of ure □ gal ⊠ ton ocarbon	Yes	PA. 1 Time Fram	ime No
f 'No', descril hatural gas at vaste is tempo funicipality Residual Waste Code 302 . pH Ra . Physic . Physic . Physic . The re instruct. . A deta . The quattach	be location of was the (01-003) orarily stored in tank Granville C Brine and Waste ange cal State cal Appearance esults of a detailed ctions, is attached ailed description o uality assurance/q ed.	te generatio J well pad si ks onsite. SEC Residual W Code Descri ewater 6 6 Colo Num Desc I chemical colo I chemical colo I chemical colo I chemical colo	County Brac County Brac CTION B. WAS aste ption 1. GENERAL to 7 Liquid Waste (EPA M Solid (EPA Method S Gas (ambient tempe or Translucent ber of Solid or Liqu cribe each phase of 2. CHEMICAL ANAL characterization of the	In the waste, as described i settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached. Settached.	Township, S Unit Meas Cu yd Ib (nowledge) or Hydro One n the	Bradford itate of gal gal ton ocarbon	Yes Yes	PA. 1 Time Fram One 1	he ime No No

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS						
a.		A detailed description of the manufacturing and/or pollution control processes producing 🛛 Yes 🗌 No the waste, as specified in the instructions, is attached.						
b.		A schematic of the manufacturing and/or pollution control processes producing the waste, Xes No as specified in the instructions, is attached.						
c.	If portions of the informati a confidentiality claim, as	on submitted are confidential, the substantiation for Yes No N/A described in the instructions, is attached.						
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE						
		1. PROCESSING OR DISPOSAL FACILITY(IES)						
The	area below (ad.) will accomm	nodate the identification of two facilities. Attach additional sheets if necessary.						
a.	Solid waste permit number 0008451	r(s) for processing or disposal facility being utilized.						
b.	Facility Name	Sunbury Generation Wastewater Treatment Facility						
	Address Line 1	Old Trail Road						
	Address Line 1	P.O. Box 517						
	Address City State ZIP	Shamokin Dam PA 17876						
	Municipality	Shamokin Dam County Snyder						
c.	Facility Contact Name	Sheldon Kowaleski						
	Title							
	Phone	(570) 884-1235 Email Address						
d.	Volume of waste shipped t 42	o processing or disposal facility in the previous year.						
a.	Solid waste permit number 101508	r(s) for processing or disposal facility being utilized.						
b.	Facility Name	PA Brine						
	Address Line 1	5148 US 322						
	Address Line 1							
	Address City State ZIP	Franklin PA 16323						
	Municipality	Franklin County Venango						
c.	Facility Contact Name	Elton DeLong						
	Title							
	Phone	(814) 437-3593 Email Address info@pabrine.com						
d.	Volume of waste shipped t 42	o processing or disposal facility in the previous year.						
		2. BENEFICIAL USE						
a.	Has the waste been approv If "Yes", list the general pe							
		ly used in the previous year.						
b.	volume of waste beneficial	ly used in the previous year.						

1		3. PROCESS D	ESCRIPTION	& SCHEM	ATIC ATTACHME	NTS	-	-		
a.	A detailed description of the waste, as specified in t	ne manufacturin	ng and/or p	ollution co	THE VERY NEW YORK AND A VERY AND A VERY AND A			Yes		No
b.		A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes INO as specified in the instructions, is attached.								
c.	If portions of the information a confidentiality claim, as					Yes		No		N/A
-	SEC	TION C. MA	NAGEM	ENT OF	RESIDUAL	WASTE				
		1. PROC	ESSING OR	DISPOSAL	FACILITY(IES)					
The	area below (ad.) will accomm	odate the ident	tification of	two facilit	ies. Attach add	itional sheets	if neo	cessary	r.	
a.	Solid waste permit number MDD980555189	(s) for process	ing or dispe	osal facilit	y being utilized.					
b.	Facility Name	Clean Har	bors of Bal	timore						
	Address Line 1	1910 Russ	sell St							
	Address Line 1									
	Address City State ZIP	Baltimore			ND	21230				_
	Municipality	Baltimore		(	County					-
C.	Facility Contact Name									
	Title							_		
	Phone	410-244-8	200	Email	Address					
d.	Volume of waste shipped t 22		r disposal f	acility in th	ne previous yea	r. (check one)	1			
a.	Solid waste permit number	(s) for process	ing or dispo	sal facility	being utilized.					
b.	Facility Name									_
	Address Line 1									
	Address Line 1						-	-		
	Address City State ZIP									
	Municipality			(	County					
c.	Facility Contact Name						_	-		
	Title									
	Phone			Email	Address					
d.	Volume of waste shipped to	processing or	r disposal f	acility in th	ne previous year	r. (check one)				
-				FICIAL US	-				~~~	
a.	Has the waste been approv	ed for beneficia	The second second	TIGIAL US	-		П	Yes		No
	If "Yes", list the general pe			umber			-	100	KA	
b.	Volume of waste beneficial									
<b>.</b>	Forume of waste beneficial	cu yd	gal	D Ib	ton	(check one)				
			-							

			SECTION D. CERTIFICATION	
Rep obta know	ort and all attached doc ining the information, I wledge. I understand tha	verify at the s	ave personally examined and am familiar with the information submitted in this Ann and that based upon my inquiry of those individuals immediately responsible that the submitted information is true, accurate and complete to the best of ubmission of false information herein is made subject to the penalties of 18 Pa. C on to authorities, which include fine and imprisonment.	for my
Che	ck the following, if applica	able:		
	I certify the informatio		red in Section B-1, General Properties was supplied to the Department for the y	ear
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
	I certify the informatio		red in Section B-2, Chemical Analysis was supplied to the Department for the y	rear
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
	I certify the information for the year and	1	ed in Section B-3, Process Description and Schematic, was supplied to the Departm t changed.	ent
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
Nam	e of Responsible Official		Title Environmental Specialist	
Dina	Brown	,	10	
Sign	ature In	5	Date 2/25/4	
	000	0		



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed each	or legil attache	ust be fully and accurate bly printed in the spaces p ed sheet as Form 26R, re	rovided. If additional s ference the item num	pace is necessary, identi ber and identify the da	fy Da	DEP I te Receive	and the second second second	ONLY eneral Notes
		e date on attached sheets	needs to match the dat	e noted below.				
		rence 287.54			_			
Date	Prepare		ary 11, 2011		-			
C			LIENT (GENERATO	R OF THE WASTE) IN	FORMA	TION	-	
	nany Nai	ergy USA Inc.						
		y, Name of Parent Compar	iy			EPA	Gene	rator ID#
		ergy Inc.				N/A		
	ennwooi	iling Address Line 1	(	Company Mailing Addres	s Line 2			
Comp		dress Last Line - City	State PA	Zip+4 15086	Phone (724)	814-530	0	Ext
	any Co	ntact Last Name	First Name Dina	MI		Suffix		
	ipality			County				
	endale	e Ext C	ontact Email Address	Allegheny				
	814-53		ybrown@talismanusa.	com				
Is the	waste g	generated at the Company	Mailing Address (noted	above)?	1		Yes	No No
	, descri Il gas at	be location of waste gener		te is generated during the undell Creek Road, Armer				
		emporarily stored in tanks or		dideir Greek Nodu, Annei	na rownan	ip, Diadic	JIU CL	Juny LA.
Munic	ipality	Armenia	County Bradi		St	ate	PA	
				TE DESCRIPTION				
	idual e Code	Residual Code Des		Amount	Unit			Time Frame
	coue		cription	1	] cu yd	gal		riane
802		Brine and Wastewater		258	] Ib	🖾 ton		One Time
			1. GENERAL					_
a. b.	pH Ra		to 7 Liquid Waste (EPA M	(based on analyses or kn	owledge)		_	
<b>D</b> .	Filysic		Solid (EPA Method 9)	095)				
C.	Physic	N	olor Translucent y umber of Solid or Liqui	ellow/brown Odor d Phases of Separation	Hydro One	carbon	-	
		D	escribe each phase of	separation. Liquid	-	-		
			2. CHEMICAL ANALY	SIS ATTACHMENTS	-			-
a.	instru	sults of a detailed chemica ctions, is attached.			the		Yes	🗌 No
b.		iled description of the was					Yes	No No
c.	The qu attach	uality assurance/quality co ed.	ntrol procedures emplo	oyed by the laboratory(ie	s) is		Yes	No No
d.		sults of the hazardous was	ste determination is atta	ached.			Yes	No No
e.		icable, a detailed explanat actual chemical analysis i		enerator knowledge in	Yes		No	N/A

	A 1 4 7 1 1	3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS the manufacturing and/or pollution control processes producing X Yes No							
a.	A detailed description of the manufacturing and/or pollution control processes producing Yes the waste, as specified in the instructions, is attached.								
b.	A schematic of the manufa as specified in the instruct	facturing and/or pollution control processes producing the waste, 🛛 Yes 🗌 No ctions, is attached.							
C.		tion submitted are confidential, the substantiation for D Yes D No N/A described in the instructions, is attached.							
27-	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE							
		1. PROCESSING OR DISPOSAL FACILITY(IES)							
The	area below (ad.) will accomn	modate the identification of two facilities. Attach additional sheets if necessary.							
a.	Solid waste permit number 0008451	er(s) for processing or disposal facility being utilized.							
b.	Facility Name Sunbury Generation Wastewater Treatment Facility								
	Address Line 1	Old Trail Road							
	Address Line 1	P.O. Box 517							
	Address City State ZIP	Shamokin Dam PA 17876							
	Municipality	Shamokin Dam County Snyder							
•	Facility Contact Name Title	Sheldon Kowaleski							
	Phone	(570) 884-1235 Email Address							
d.	Volume of waste shipped t 142	to processing or disposal facility in the previous year.							
ı.	Solid waste permit number 101508	er(s) for processing or disposal facility being utilized.							
<b>)</b> ,	Facility Name	PA Brine							
	Address Line 1	5148 US 322							
	Address Line 1								
	Address City State ZIP	Franklin PA 16323							
	Municipality	Franklin County Venango							
2.	Facility Contact Name Title	Elton DeLong							
		Elton DeLong (814) 437-3593 Email Address info@pabrine.com							
	Title Phone Volume of waste shipped t	(814) 437-3593 Email Address info@pabrine.com to processing or disposal facility in the previous year.							
	Title Phone	(814) 437-3593 Email Address info@pabrine.com							
	Title Phone Volume of waste shipped t	(814) 437-3593 Email Address info@pabrine.com to processing or disposal facility in the previous year.							
1.	Title Phone Volume of waste shipped t	(814) 437-3593 Email Address info@pabrine.com to processing or disposal facility in the previous year. cu yd gal b k ton (check one) 2. BENEFICIAL USE							
l.	Title Phone Volume of waste shipped to 21 Has the waste been approv	(814) 437-3593 Email Address info@pabrine.com to processing or disposal facility in the previous year. Cu yd Gal Ib X ton (check one) 2. BENEFICIAL USE							
c. d. a.	Title Phone Volume of waste shipped to 21 Has the waste been approv If "Yes", list the general pe	(814) 437-3593       Email Address info@pabrine.com         to processing or disposal facility in the previous year.         cu yd       gal         lb       ton (check one)         2. BENEFICIAL USE         Yved for beneficial use?							

		3. PROCESS DESCRIPTIO	N & SCHEMATIC ATTACHME	ENTS				
a.		A detailed description of the manufacturing and/or pollution control processes producing X Yes No the waste, as specified in the instructions, is attached.						
b.		A schematic of the manufacturing and/or pollution control processes producing the waste, as specified in the instructions, is attached.						No
с.	If portions of the informati a confidentiality claim, as			Yes		No		N/A
	SEC	TION C. MANAGEN	IENT OF RESIDUAL	WASTE				
			DISPOSAL FACILITY(IES)					
The	area below (ad.) will accomm	nodate the identification o	f two facilities. Attach add	litional sheets	if nec	essary		
a.	Solid waste permit number MDD980555189	r(s) for processing or disp	osal facility being utilized	•				
b.	Facility Name	Clean Harbors of Ba	ltimore					
	Address Line 1	1910 Russell St						
	Address Line 1		115					
	Address City State ZIP	Baltimore	MD	21230			_	_
	Municipality	Baltimore	County			_		_
с.	Facility Contact Name Title							
	Phone	410-244-8200	Email Address				_	-
-								
d.	Volume of waste shipped t 95	cu yd gal	b S ton	r. (check one	)			
a.	Solid waste permit number	(s) for processing or disp	osal facility being utilized					
b.	Facility Name						-	-
	Address Line 1							
	Address Line 1							
	Address City State ZIP						-	
	Municipality		County			-		
c.	Facility Contact Name							
	Title							
	Phone		Email Address				_	
d.	Volume of waste shipped t	o processing or disposal cu yd gal	facility in the previous yea	r. (check one)	)			
		2. BEN	EFICIAL USE			-	-	-
a.	Has the waste been approv					Yes		No
	If "Yes", list the general pe	rmit number or approval i	number.					
b.	Volume of waste beneficial	ly used in the previous ye	ear.			-		-
		🗌 cu yd 🗌 gal	lb ton	(check one)	)			

			SECTION D. O	CERTIFICAT	TION
Repo obta knov	ort and all attached do ining the information, I vledge. I understand th	cuments I verify at the s	s and that based upon that the submitted info	my inquiry of ormation is tru mation herein	iar with the information submitted in this Annual those individuals immediately responsible for ue, accurate and complete to the best of my is made subject to the penalties of 18 Pa. C.S. I imprisonment.
Chee	k the following, if applic	able:			
	I certify the information and has not characterized		ired in Section B-1, Ger	neral Properties	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
	I certify the information		ired in Section B-2, Che	emical Analysis	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
	I certify the information for the year and			ss Description	and Schematic, was supplied to the Department
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:	-			
Nam	e of Responsible Official			Title	Environmental Specialist
Dina	Brown		- 10	_	
Sign	ature / ~	-	3002	Date	2/25/11
-				-	( (



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This	form mu	ist be fully and ac	curately completed. All re	equired information must b	e D	EP USE	ONLY
each	attache	d sheet as Form 2		I space is necessary, identifumber and identify the dat date noted below.		ceived & G	eneral Notes
Gene	ral Refer	ence 287.54					
Date I	Prepared	/Revised	February 11, 2011				
		SECTION	A. CLIENT (GENERAT	FOR OF THE WASTE) INF	ORMATIC	N	
Comp	any Nar		the second testimory				
Talisr	nan Ene	ergy USA Inc.					
		, Name of Parent C	Company				rator ID#
		ergy Inc.				I/A	
	any Mai	ling Address Line 1		Company Mailing Address	Line 2		
		Iress Last Line - Ci	ty Stat	e Zip+4	Phone		Ext
	endale	inoso Edot Elina Ol	PA	15086	(724) 814	-5300	LAL
		tact Last Name	First Name	MI	and the second se	uffix	
Brown	n		Dina				
	ipality			County			
and the second states of	endale			Allegheny			
Contraction of the second	ct Phon 814-532		Contact Email Addres				
			dybrown@talismanus npany Mailing Address (not			T Yes	No No
				aste is generated during the c	irilling comple		
	I gas at t			Sweeney Road, Armenia Tow			
		rarily stored in tanks	onsite.				
Munic	ipality	Armenia		adford	State	PA	
				STE DESCRIPTION		-	
	idual Code		esidual Waste de Description	Amount	Unit of Measure		Time Frame
	Coue				cuyd	al	Frame
802		Brine and Wastev	water	313	lb 🛛 t		One Time
			1. GENERA	L PROPERTIES			
a.	pH Ra	nge	6 to 7	(based on analyses or kno	wledge)		
b.	Physic	al State	Liquid Waste (EPA				
C.	Physic	al Appearance		t yellow/brown Odor	Hydrocarb	on	
				quid Phases of Separation	One		
			Describe each phase	of separation. Liquid			
			2 CHEMICAL AND	LYSIS ATTACHMENTS			
a.	The re:	sults of a detailed c		the waste, as described in t	he	X Yes	□ No
		tions, is attached.					
b.		AND POST AND AND AND ADDRESS OF A DREAM	the waste sampling method			X Yes	No No
C.	attache	əd.		ployed by the laboratory(ies		X Yes	🗌 No
d.	The res	sults of the hazardo	ous waste determination is a	attached		X Yes	No
e.			planation supporting use o	Call and the same	T Yes	21 100	N/A

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS						
a.		e manufacturing and/or pollution control processes producing 🛛 Yes 🗌 No he instructions, is attached.						
b.	A schematic of the manufa as specified in the instruct	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.						
c.		on submitted are confidential, the substantiation for Ses No N/A described in the instructions, is attached.						
	SECT	TION C. MANAGEMENT OF RESIDUAL WASTE						
-		1. PROCESSING OR DISPOSAL FACILITY(IES)						
The a	area below (ad.) will accomm	odate the identification of two facilities. Attach additional sheets if necessary.						
a.	Solid waste permit number 0008451	(s) for processing or disposal facility being utilized.						
b.	Facility Name	Sunbury Generation Wastewater Treatment Facility						
	Address Line 1	Old Trail Road						
	Address Line 1	P.O. Box 517						
	Address City State ZIP	Shamokin Dam PA 17876						
	Municipality	Shamokin Dam County Snyder						
с.	Facility Contact Name	Sheldon Kowaleski						
	Title Phone	(570) 884-1235 Email Address						
d.	Volume of waste shipped to 167	o processing or disposal facility in the previous year.						
a.	Solid waste permit number 101508	(s) for processing or disposal facility being utilized.						
b.	Facility Name	PA Brine						
	Address Line 1	5148 US 322						
	Address Line 1							
	Address City State ZIP	Franklin PA 16323						
	Municipality	Franklin County Venango						
c.	Facility Contact Name	Elton DeLong						
	Title							
	Phone	(814) 437-3593 Email Address info@pabrine.com						
d.	Volume of waste shipped to 51	o processing or disposal facility in the previous year.						
		2. BENEFICIAL USE						
a.	Has the waste been approv							
	If "Yes", list the general pe	rmit number or approval number.						
b.		ly used in the previous year.						

		3. PROCESS DESCRIPTIO	N & SCHEMATIC ATTA	CHMENTS			
a.	A detailed description of the the waste, as specified in t	e manufacturing and/or p	collution control proc		Yes	No No	
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.						
c.	If portions of the information a confidentiality claim, as o			on for 🔲 Yes	No No	⊠ N/A	
	SECT	TION C. MANAGEN	IENT OF RESIDU	JAL WASTE			
			DISPOSAL FACILITY				
The a	area below (ad.) will accomm	odate the identification o	f two facilities. Attacl	h additional sheets	if necessary	•	
a.	Solid waste permit number MDD980555189	(s) for processing or disp	oosal facility being uti	lized.			
b.	Facility Name	Clean Harbors of Ba	ltimore				
	Address Line 1	1910 Russell St					
	Address Line 1	D-liference	110	01000		_	
	Address City State ZIP Municipality	Baltimore Baltimore	MD County	21230			
-	Facility Contact Name	Daiumore	County				
с.	Title						
	Phone	410-244-8200	Email Address				
d.	Volume of waste shipped to 53	o processing or disposal	facility in the previou		)		
a.	Solid waste permit number 0102784	(s) for processing or disp	oosal facility being uti	lized.			
b.	Facility Name	Waste Treatment Co	orp. Warren County				
	Address Line 1	341 West Harmar St					
	Address Line 1						
	Address City State ZIP	Warren	PA County	Warren			
-	Municipality	11.40 911	County	warren			
C.	Facility Contact Name Title	Rich Gorton					
	Phone	(814) 726-1500	Email Address	info@waste-trea	tment net		
d.	Volume of waste shipped to				anonenor		
α.	42	🗋 cu yd 🗌 gal	☐ lb 🛛 tor		)		
			IEFICIAL USE		-		
a.	Has the waste been approv				Yes	No No	
_	If "Yes", list the general pe						
b.	Volume of waste beneficial	ly used in the previous ye	ear.	n (check one)	)		

SECTION D. CERTIFICATION	
I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this Au Report and all attached documents and that based upon my inquiry of those individuals immediately responsible obtaining the information, I verify that the submitted information is true, accurate and complete to the best of knowledge. I understand that the submission of false information herein is made subject to the penalties of 18 Pa. §4904, relating to unsworn falsification to authorities, which include fine and imprisonment.	e for f my
Check the following, if applicable:	
I certify the information required in Section B-1, General Properties was supplied to the Department for the and has not changed.	year
Form Submitted: D Form 26R	
Other (specify)	
Date Submitted:	
I certify the information required in Section B-2, Chemical Analysis was supplied to the Department for the and has not changed.	year
Form Submitted: D Form 26R	
Other (specify)	
Date Submitted:	
I certify the information required in Section B-3, Process Description and Schematic, was supplied to the Depart for the year and has not changed.	nent
Form Submitted:  Form 26R	
Other (specify)	
Date Submitted:	
Name of Responsible Official Title Environmental Specialist	
Dina Brown	
Signature An Ston Date 2/25/11	



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

					uired information must b		DEPI	JSE (	DNLY	
each a	attached s	heet as Form	26R, refe		space is necessary, identi- ober and identify the dat te noted below.		ate Receive	ed & G	eneral N	lotes
Genera	al Reference	e 287.54								
Date P	repared/Re	evised	Februar	y 11, 2011						
				•	OR OF THE WASTE) INI	OPM	TION		-	
Compa	ny Name	SECTION	A. OL	ILINI (GENERAIC	OF THE WASTE IN	ORWA	ATION	-		
		USA Inc.								
		ame of Parent	Company				EPA	Gene	rator ID	)#
	an Energy						N/A			
	ny Mailing	Address Line	1		Company Mailing Address	s Line 2				
Compa	ny Addres	s Last Line - C	ity	State	Zip+4	Phon	e		Ext	
Warren	C 1040-0000			PA	15086	(724)	814-530	0		
		t Last Name		First Name	MI		Suffix			
Brown Municij				Dina	County					
Warrer	and the second se				Allegheny					
and the second second	t Phone	Ext	Co	ntact Email Address	Allegheny					
	14-5321			prown@talismanusa	com					
A company of the second	and the second se	rated at the Co		ailing Address (noted			Π	Yes		No
					ste is generated during drilli	ng, comp				
natural	gas at the	(01-017)			8 Route 14, Canton Townsh					
		in tanks onsite.		0		-		-		
Munici	bality	Canton		County Brad		5	tate	PA		
					TE DESCRIPTION			-	-	
Resid Waste			Residual V ode Desci		Amount	Unit Meas			Time	
				ipuon	F	] cu yd	gal		Flam	9
802	Br	ine and Waste	water		330	lb	⊠ ton	Π	One 1	Time
			1- B	1. GENERAL	PROPERTIES		-			
a.	pH Range		6	to 7	(based on analyses or know	owledge)	-			
b.	Physical \$	State		Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper	095)					
с.	Physical /	Appearance		mber of Solid or Liqu	id Phases of Separation	Hydro One	ocarbon			_
			Des	scribe each phase of	separation. Liquid					
	1	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		2. CHEMICAL ANAL	YSIS ATTACHMENTS					-
a.		s of a detailed ns, is attached.		characterization of the	ne waste, as described in	the		Yes		No
	and the second sec			sampling method is			X	Yes		No
	attached.				oyed by the laboratory(ies	s) is		Yes		No
				e determination is at			$\boxtimes$	Yes		No
		le, a detailed e			generator knowledge in	Yes		No		N/A

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS				
a.		he manufacturing and/or pollution control processes producing 🛛 Yes 🗌 No the instructions, is attached.				
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.					
c.		on submitted are confidential, the substantiation for Session Yes No N/A described in the instructions, is attached.				
~	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE				
		1. PROCESSING OR DISPOSAL FACILITY(IES)				
The	area below (ad.) will accomm	nodate the identification of two facilities. Attach additional sheets if necessary.				
a.	Solid waste permit number 0008451	r(s) for processing or disposal facility being utilized.				
b.	Facility Name	Sunbury Generation Wastewater Treatment Facility				
	Address Line 1	Old Trail Road				
	Address Line 1	P.O. Box 517				
	Address City State ZIP	Shamokin Dam PA 17876				
	Municipality	Shamokin Dam County Synder				
c.	Facility Contact Name	Sheldon Kowaleski				
	Title Phone	(570) 884-1235 Email Address				
d.	Volume of waste shipped t 263	o processing or disposal facility in the previous year.				
a.	Solid waste permit number 101508	r(s) for processing or disposal facility being utilized.				
b.	Facility Name	PA Brine				
	Address Line 1	5148 US 322				
-	Address Line 1					
	Address City State ZIP	Franklin PA 16323				
	Municipality	Franklin County Venango				
C.	Facility Contact Name Title	Elton DeLong				
	Phone	(814) 437-3593 Email Address info@pabrine.com				
d.	a spectral sector sec	o processing or disposal facility in the previous year.				
α.	67	cu yd gal lb X ton (check one)				
		2. BENEFICIAL USE				
a.	Has the waste been approv If "Yes", list the general pe	ved for beneficial use?  Yes X No mit number or approval number.				
b.	Volume of waste beneficia	Ily used in the previous year.				



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This form must be fully and accurately completed. All required information must be					DEP USE ONLY			
each attach	ed sheet as Form 26R,	s provided. If additional sp reference the item num its needs to match the date	per and identify the da		Received &	& General N	Votes	
General Ref	erence 287.54							
Date Prepar	ed/Revised Fe	bruary 11, 2011						
A . W.	SECTION A.	CLIENT (GENERATO	R OF THE WASTE) IN	FORMAT	ION			
Company N	ame						-	
	nergy USA Inc.							
Talisman Er	ary, Name of Parent Comp	bany			EPA Ge N/A	nerator II	J#	
	ailing Address Line 1	C	ompany Mailing Address	s Line 2	11/10			
50 Pennwoo	od Place				-			
	ddress Last Line – City	State	Zip+4	Phone		Ex	t	
Warrendale		PA	15086	(724) 8	4-5300			
Brown	ontact Last Name	First Name Dina	MI		Suffix			
Municipality			County					
Warrendale			Allegheny					
Contact Pho	and the second sec	Contact Email Address	and the second second					
(724) 814-5		dybrown@talismanusa.				50		
		ny Mailing Address (noted			Ye		No	
				drilling com	lotion or	ad product		
			te is generated during the					
natural gas a	t the (257) well pad	site located at 1838 East Lav						
natural gas a is temporarily	t the (257) well pad so stored in tanks onsite.	site located at 1838 East Lav	vrence Road, Jackson Tov		County,			
natural gas a	t the (257) well pad so stored in tanks onsite.	site located at 1838 East Lav County Tioga	vrence Road, Jackson Tov	vnship, Tioga	County,	PA. The		
natural gas a is temporarily	t the (257) well pad s stored in tanks onsite. Jackson	site located at 1838 East Lav	vrence Road, Jackson Tov	vnship, Tioga	e f	PA. The	waste	
natural gas a is temporarily Municipality	t the (257) well pad s stored in tanks onsite. Jackson Resid	County Tioga SECTION B. WAST	vrence Road, Jackson Tov	vnship, Tioga Stat Unit of Measure	e f	PA. The PA	e	
natural gas a is temporarily Municipality Residual Waste Code	t the (257) well pad s stored in tanks onsite. Jackson Resid	County Tioga SECTION B. WAST ual Waste Description	TE DESCRIPTION Amount	vnship, Tioga Stat Unit of Measure cu yd	e f gal	PA. The PA Tim Fram	e ne	
natural gas a is temporarily Municipality Residual Waste Code	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D	site located at 1838 East Lav County Tioga SECTION B. WAST ual Waste Description	wrence Road, Jackson Tov         CE DESCRIPTION         Amount         234       []	vnship, Tioga Stat Unit of Measure cu yd	e f	PA. The PA Tim	e ne	
natural gas a is temporarily Municipality Residual Waste Code 802	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D Brine and Wastewate	County Tioga SECTION B. WAST ual Waste Description	Amount 234 PROPERTIES	vnship, Tioga Stat Unit of Measure Cu yd	e f gal	PA. The PA Tim Fram	e ne	
natural gas a is temporarily Municipality Residual Waste Code 802 a. pH R	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D Brine and Wastewate	site located at 1838 East Lav County Tioga SECTION B. WAST ual Waste Description r 1. GENERAL F	CE DESCRIPTION Amount 234 CROPERTIES (based on analyses or kni ethod 9095) 195)	vnship, Tioga Stat Unit of Measure Cu yd	e f gal	PA. The PA Tim Fram	e ne	
natural gas a is temporarily Municipality Residual Waste Code 802 a. pH R b. Phys	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D Brine and Wastewate ange 6	Site located at 1838 East Lav County Tioga SECTION B. WAST ual Waste Description r 1. GENERAL F to 7 Liquid Waste (EPA Me Solid (EPA Method 90	Amount Amount 234 CROPERTIES (based on analyses or know ethod 9095) 195) ature & pressure)	Vnship, Tioga Stat Unit of Measure Cu yd	e f gal ton [	PA. The PA Tim Fram	e ne	
natural gas a is temporarily Municipality Residual Waste Code 802 a. pH R b. Phys	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D Brine and Wastewate ange 6 ical State	Site located at 1838 East Lav County Tioga SECTION B. WAST ual Waste Description r 1. GENERAL F to 7 Liquid Waste (EPA Me Solid (EPA Method 90 Gas (ambient temperal	Amount Amount 234 CROPERTIES (based on analyses or known back of 9095) 195) ature & pressure) ellow/brown Odor	Vnship, Tioga Stat Unit of Measure cu yd	e f gal ton [	PA. The PA Tim Fram	e ne	
natural gas a is temporarily Municipality Residual Waste Code 802 a. pH R b. Phys	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D Brine and Wastewate ange 6 ical State	County Tioga SECTION B. WAST UNASTE Description r 1. GENERAL F to 7 Liquid Waste (EPA Me Solid (EPA Method 90 Gas (ambient tempera Color Translucent ye	Amount     Amount     234     Correction     Amount     234     Correction     (based on analyses or known     ature & pressure)     ellow/brown     Odor     d Phases of Separation	vnship, Tioga Stat Unit of Measure Cu yd	e f gal ton [	PA. The PA Tim Fram	e ne	
natural gas a is temporarily Municipality Residual Waste Code 802 a. pH R b. Phys	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D Brine and Wastewate ange 6 ical State	County Tioga SECTION B. WAST Ual Waste Description T	Vrence Road, Jackson Tov         Content of the second	vnship, Tioga Stat Unit of Measure Cu yd	e f gal ton [	PA. The PA Tim Fram	e ne	
natural gas a is temporarily Municipality Residual Waste Code 802 a. pH R b. Phys c. Phys c. Phys	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D Brine and Wastewate ange 6 ical State ical Appearance	County Tioga SECTION B. WAST Ual Waste Description T	Te DESCRIPTION  Amount  234  PROPERTIES (based on analyses or known bethod 9095)  95) ature & pressure) ellow/brown Odor d Phases of Separation separation. Liquid  SIS ATTACHMENTS	vnship, Tioga Stat Unit of Measure Cu yd [ ] Ib D owledge) Hydroca One	e f gal ton [	PA. The PA Tim Fram	e ne	
natural gas a is temporarily Municipality Residual Waste Code 802 a. pH R b. Phys c. Phys c. Phys	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D Brine and Wastewate ange 6 ical State ical Appearance	County Tioga SECTION B. WAST UNAL ANALY ANAL ANALY County Tioga SECTION B. WAST UNAL ANALY ANAL ANALY Color Translucent y Number of Solid or Liqui Describe each phase of s 2. CHEMICAL ANALY Anical characterization of the	Amount         234         PROPERTIES         (based on analyses or knime         ethod 9095)         95)         ature & pressure)         ellow/brown       Odor         d Phases of Separation         separation.         Liquid	vnship, Tioga Stat Unit of Measure Cu yd [ ] Ib D owledge) Hydroca One	e F gal gal ton [	PA. The PA PA Tim. Fram One PS	e ne Time No	
natural gas a is temporarily Municipality Residual Waste Code 802 a. pH R b. Phys c. Phys c. Phys a. The n instri b. A det	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D Brine and Wastewate ange 6 ical State ical Appearance results of a detailed chemuctions, is attached. tailed description of the v	County Tioga SECTION B. WAST UNAL ANALY INTERPOLATION B. TO SECTION B. WAST UNAL ANALY INTERPOLATION B. TO SECTION B. WAST INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATIONI INTERPOLATIONI INT	Amount         234         PROPERTIES         (based on analyses or kniethod 9095)         95)         ature & pressure)         ellow/brown       Odor         d Phases of Separation         separation.         Liquid         SIS ATTACHMENTS         e waste, as described in         attached.	vnship, Tioga Stat Unit of Measure Cu yd [ ] Ib D owledge) 	e F gal gal ton f wrbon	PA. The PA PA Tim Fram One PS	e ne Time No No	
natural gas a is temporarily Municipality Residual Waste Code 802 a. pH R b. Phys c. Phys c. Phys a. The r instrib. A det	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D Brine and Wastewate ange 6 ical State ical Appearance results of a detailed chemuctions, is attached. tailed description of the volucity assurance/quality	County Tioga SECTION B. WAST UNAL ANALY ANAL ANALY County Tioga SECTION B. WAST UNAL ANALY ANAL ANALY Color Translucent y Number of Solid or Liqui Describe each phase of s 2. CHEMICAL ANALY Anical characterization of the	Amount         234         PROPERTIES         (based on analyses or kniethod 9095)         95)         ature & pressure)         ellow/brown       Odor         d Phases of Separation         separation.         Liquid         SIS ATTACHMENTS         e waste, as described in         attached.	vnship, Tioga Stat Unit of Measure Cu yd [ ] Ib D owledge) 	e F gal gal ton [	PA. The PA PA Tim Fram One PS	e ne Time No	
natural gas a is temporarily Municipality Residual Waste Code 802 a. pH R b. Phys c. Phys c. Phys a. The r instri b. A der c. The c attac	t the (257) well pad so stored in tanks onsite. Jackson Resid Code D Brine and Wastewate ange 6 ical State ical Appearance results of a detailed chemuctions, is attached. tailed description of the vipuality assurance/quality hed.	County Tioga SECTION B. WAST UNAL ANALY INTERPOLATION B. TO SECTION B. WAST UNAL ANALY INTERPOLATION B. TO SECTION B. WAST INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATION INTERPOLATIONI INTERPOLATIONI INT	Amount         234         PROPERTIES         (based on analyses or known bethod 9095)         95)         ature & pressure)         ellow/brown       Odor         d Phases of Separation         separation.         Liquid         SIS ATTACHMENTS         e waste, as described in         attached.         yed by the laboratory(ies)	vnship, Tioga Stat Unit of Measure Cu yd [ ] Ib D owledge) 	e F gal gal ton f wrbon	PA. The PA PA Tim Fram One PS	e ne Time No No	

1		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS					
a.	A detailed description of the manufacturing and/or pollution control processes producing Xes No the waste, as specified in the instructions, is attached.						
b.	A schematic of the manufa as specified in the instruct	facturing and/or pollution control processes producing the waste, X Yes I No ctions, is attached.					
c.		tion submitted are confidential, the substantiation for Ses No N/A described in the instructions, is attached.					
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE					
		1. PROCESSING OR DISPOSAL FACILITY(IES)					
The	area below (ad.) will accomm	modate the identification of two facilities. Attach additional sheets if necessary.					
a.	Solid waste permit numbe 0102784	er(s) for processing or disposal facility being utilized.					
<b>)</b> .	Facility Name	Waste Treatment Corp. Warren County					
	Address Line 1 Address Line 1	341 West Harmar Street					
	Address City State ZIP	Warren PA 16365					
	Municipality	Warren County Warren					
	Facility Contact Name Title	Rich Gorton					
	Phone	(814) 726-1500 Email Address info@waste-treatment.net					
<b>1</b> .	Volume of waste shipped t 92	to processing or disposal facility in the previous year.					
a.	Solid waste permit number 101508	er(s) for processing or disposal facility being utilized.					
<b>b</b> .	Facility Name	PA Brine					
	Address Line 1	5148 US 322					
	Address Line 1						
	Address City State ZIP	Franklin PA 16323					
	Municipality	Franklin County Venango					
	mannanpanny						
c.	Facility Contact Name Title	Elton DeLong					
2.	Facility Contact Name						
	Facility Contact Name Title Phone	Elton DeLong					
	Facility Contact Name Title Phone Volume of waste shipped t	Elton DeLong         (814) 437-3593       Email Address info@pabrine.com         to processing or disposal facility in the previous year.         cu yd       gal         lb       X ton (check one)					
c. d.	Facility Contact Name Title Phone Volume of waste shipped t 142 Has the waste been approv	Elton DeLong         (814) 437-3593       Email Address info@pabrine.com         to processing or disposal facility in the previous year.         □ cu yd       □ gal         □ b       ⊠ ton (check one)         2. BENEFICIAL USE         wed for beneficial use?       □ Yes					
1.	Facility Contact Name Title Phone Volume of waste shipped t 142 Has the waste been approv If "Yes", list the general pe	Elton DeLong         (814) 437-3593       Email Address info@pabrine.com         to processing or disposal facility in the previous year.					

I certify, under penalty of law, that I have personally examined and am familiar with the information Report and all attached documents and that based upon my inquiry of those individuals immobility obtaining the information, I verify that the submitted information is true, accurate and com knowledge. I understand that the submission of false information herein is made subject to the §4904, relating to unsworn falsification to authorities, which include fine and imprisonment. Check the following, if applicable:	
Check the following, if applicable:	nediately responsible for plete to the best of my
I certify the information required in Section B-1, General Properties was supplied to the and has not changed.	Department for the year
Form Submitted:  Form 26R	
Other (specify)	
Date Submitted:	
I certify the information required in Section B-2, Chemical Analysis was supplied to the and has not changed.	Department for the year
Form Submitted:  Form 26R	
Other (specify)	_
Date Submitted:	
I certify the information required in Section B-3, Process Description and Schematic, was su for the year and has not changed.	upplied to the Department
Form Submitted: D Form 26R	
Other (specify)	
Date Submitted:	-
Name of Responsible Official Title Environmental Spec	- ialist
Dina Brown	
Signature Shar Date 2/25/0	1



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This form must be fully and accurately completed. All required information must be DEP USE ONLY								
each	attache	d sheet as Form 26R,		pace is necessary, identif ber and identify the dat te noted below.		aived & Ge	eneral N	lotes
Gener	al Refe	rence 287.54			40			
Date P	repare	d/Revised Fe	bruary 11, 2011					
		SECTION A.	CLIENT (GENERATO	R OF THE WASTE) IN	ORMATION	4		
	any Na	ne						
		ergy USA Inc.						
		y, Name of Parent Comp ergy Inc.	bany		EP N/	A Gener	rator ID	)#
		iling Address Line 1		Company Mailing Address		4		
		d Place		a company maning riserese				
		dress Last Line – City	State	Zip+4	Phone		Ex	t
Warre	A STATE AND A STAT	4 4 1 4 Manua	PA	15086	(724) 814-5			
Brown		ntact Last Name	First Name Dina	MI	Su	ffix		
Munici			Dina	County				
Warre	ndale			Allegheny				
	ct Phon		Contact Email Address					
	814-53		dybrown@talismanusa				57	
			ny Mailing Address (noted	ste is generated during the o		] Yes		No
	gas at	the (261) well pad	site located at 1178 Skyline	Drive, in Jackson Townshi	p. Tioga County	PA. The	waste	is
tempor	arily sto	ored in tanks onsite.						
Munici	ipality	Jackson	County Tiog		State	PA	-	
			SECTION B. WAS	TE DESCRIPTION		-		
Resi			ual Waste	Amount	Unit of		Time	
Waste	Code		escription	Amount	Measure ] cu yd 🗌 ga	1	Fram	le
802		Brine and Wastewate	r	-303	lb 🛛 to		One	Time
			1. GENERAL	PROPERTIES				
a.	pH Ra		to 7	(based on analyses or know	owledge)			
b.	Physic	cal State	Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper	095)				
C.	Physic	cal Appearance	Color Translucent		Hydrocarbo	n		
			Number of Solid or Liqu	id Phases of Separation	One			
			Describe each phase of	separation. Liquid				
			2. CHEMICAL ANAL	VOID ATTACHMENTS				
a.	The re	sults of a detailed chem		ne waste, as described in t	the D	Yes		No
u.		ctions, is attached.		ie music, as accorded in	Line K	7 100		NO
b.	A deta	iled description of the v	vaste sampling method is		and the second se	Yes		No
c.	attach	ed.		oyed by the laboratory(ies				No
d.	the second se		waste determination is att					No
е.		icable, a detailed explar actual chemical analys	ation supporting use of g	generator knowledge in	Yes	] No	$\boxtimes$	N/A

		3. PROCESS DESCRIPTIO	ON & SCHEMATIC ATT	ACHMENTS		
a.	A detailed description of the waste, as specified in t			cesses producing	Yes Yes	□ No
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.					
c.	If portions of the informati a confidentiality claim, as			ion for 🗌 Yes	No No	N/A
-	SEC	TION C. MANAGEI	MENT OF RESID	UAL WASTE		
		1. PROCESSING O	R DISPOSAL FACILITY	(IES)		
The	area below (ad.) will accomm	nodate the identification	of two facilities. Atta	ch additional sheets	if necessary	
a.	Solid waste permit number 0102784	r(s) for processing or dis	posal facility being u	tilized.		
b.	Facility Name	Waste Treatment C	Corp. Warren County			
	Address Line 1	341 West Harmar S				
	Address Line 1					
	Address City State ZIP	Warren	PA	16365		
_	Municipality	Warren	County	Warren		
с.	Facility Contact Name	Rich Gorton				
	Title					
	Phone	(814) 726-1500	Email Address	info@waste-trea	itment.net	
d.	Volume of waste shipped t 368	to processing or disposa	I facility in the previou	and the second se	)	
a.	Solid waste permit number 0008451	r(s) for processing or dis	posal facility being ut	tilized.		
b.	Facility Name	Sunbury Generation	n Wastewater Treatn	nent Facility		
	Address Line 1	Old Trail Road				
	Address Line 1	P.O. Box 517				
	Address City State ZIP	Shamokin Dam	PA	17876		
	Municipality	Shamokin Dam	County	Snyder		
c.	Facility Contact Name	Sheldon Kowaleski				
	Title	(570) 001 1005	Provide A difference			
_	Phone	(570) 884-1235	Email Address			
d.	Volume of waste shipped t 17	o processing or disposa	I facility in the previou		)	
-		2. BE	NEFICIAL USE	_		
a.	Has the waste been approv				Yes	No No
	If "Yes", list the general ne	mit number or approval	number.			
b.	If "Yes", list the general pe Volume of waste beneficial					

			SECTION D. CERTIFICATION
Rep obta know	ort and all attached doo ining the information, I wledge. I understand the	verify at the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Che	ck the following, if applic	able:	
	I certify the information and has not cha		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the informatic		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information for the year and		red in Section B-3, Process Description and Schematic, was supplied to the Department of changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	-	
Nam	e of Responsible Official		Title Environmental Specialist
Dina	Brown		4.
Sign	ature An	3	Date 2/25/11
		0	



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed each	or legil attache	bly printed in the spaces	provided. If additional s eference the item num	uired information must space is necessary, ident ber and identify the da te noted below.	fy Dat	DEP e Receive	USE C		Votes
Gene	ral Refe	rence 287.54			-				
Date I	Prepare	d/Revised Feb	ruary 11, 2011						
		SECTION A.	CLIENT (GENERATO	OR OF THE WASTE) IN	FORMA	TION			
	any Na								
		ergy USA Inc. y, Name of Parent Compa	anv			FPA	Gener	ator II	7#
		ergy Inc.	,			N/A	Conten	ator it	511
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	any Ma	iling Address Line 1 d Place		Company Mailing Addres	s Line 2				
Comp		dress Last Line – City	State PA	Zip+4 15086	Phone (724)	814-530	00	Ex	t
	any Co	ntact Last Name	First Name Dina	MI	1	Suffi			
Munic	ipality endale			County Allegheny					
Conta	ct Phon		Contact Email Address						-
	814-53		dybrown@talismanusa			-		57	
If 'No'	, descri	enerated at the Company be location of waste gene	eration and storage. Wa	ste is generated during the	drilling, cor	npletion.	Yes and p	roduct	No ion of
waste	is tempo	prarily stored in tanks onsite	ad site located at 2509 Fa	Ilbrook Road, Armenia Tov	wnsnip, Bra	atora Co	ounty F	A. In	e
	ipality	Armenia	County Brad	2310 2010 L	St	ate	PA		
	_		SECTION B. WAS	TE DESCRIPTION					
	idual e Code		al Waste escription	Amount	Unit o Measu			Tim	
	Coue		scription	r	cu yd	gal		Fram	le
802		Brine and Wastewater		1,010	lb	🖾 ton		One	Time
			1. GENERAL						_
a. b.	pH Ra	nge 6 cal State	to 7 Liquid Waste (EPA M	(based on analyses or kn	iowledge)				-
υ.	Filysi		Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper	095)					
C.	Physic	cal Appearance	Color Translucent		Hydro	carbon			
			Describe each phase of		One			-	
			2. CHEMICAL ANAL	YSIS ATTACHMENTS					
a.		sults of a detailed chemi ctions, is attached.	and the second	he waste, as described in	the		Yes		No
b.	A deta	iled description of the wa				$\boxtimes$	Yes		No
c.	The quattach		ontrol procedures empl	oyed by the laboratory(ie	s) is		Yes		No
d.	The re	sults of the hazardous w	A CARLE AND A CARLEND AND A				Yes		No
e.		icable, a detailed explana actual chemical analysis		generator knowledge in	Yes		No	$\boxtimes$	N/A

-		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS				
a.		he manufacturing and/or pollution control processes producing Yes No the instructions, is attached.				
o.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.					
2.		on submitted are confidential, the substantiation for Ses No N/A described in the instructions, is attached.				
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE				
		1. PROCESSING OR DISPOSAL FACILITY(IES)				
The	area below (ad.) will accomn	nodate the identification of two facilities. Attach additional sheets if necessary.				
ı.	Solid waste permit number 0008451	r(s) for processing or disposal facility being utilized.				
<b>)</b> ,	Facility Name	Sunbury Generation Wastewater Treatment Facility				
	Address Line 1	Old Trail Road				
	Address Line 1	P.O. Box 517				
	Address City State ZIP	Shamokin Dam PA 17876				
	Municipality	Shamokin Dam County Snyder				
	Facility Contact Name	Sheldon Kowaleski				
	Title Phone	(570) 884-1235 Email Address				
i.	Volume of waste shipped t 1,418	to processing or disposal facility in the previous year.				
۱.	Solid waste permit number 101508	r(s) for processing or disposal facility being utilized.				
	Facility Name	PA Brine				
	Address Line 1	5148 US 322				
	Address Line 1					
	Address City State ZIP	Franklin PA 16323				
	Municipality	Franklin County Venango				
<b>.</b>	Facility Contact Name Title	Elton DeLong				
	Phone	(814) 437-3593 Email Address info@pabrine.com				
1.	Volume of waste shipped t 164	to processing or disposal facility in the previous year.				
	104					
	H. d.	2. BENEFICIAL USE				
1.	Has the waste been approv If "Yes", list the general pe	ved for beneficial use?  Ves 🛛 No Permit number or approval number.				
۶.	Volume of waste beneficial	Ily used in the previous year.				
		cu yd gal b ton (check one)				

		3. PROCESS DESCRIPTION	& SCHEMATIC ATTAC	HMENTS		-		-
a.	A detailed description of the manufacturing and/or pollution control processes producing the waste, as specified in the instructions, is attached.					Yes		No
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, as specified in the instructions, is attached.					Yes		No
c.	If portions of the informati a confidentiality claim, as			for Yes		No		N/A
	SEC	TION C. MANAGEM	ENT OF RESIDU	AL WASTE				
		1. PROCESSING OR	DISPOSAL FACILITY	S)				
The	area below (ad.) will accomm				if neo	cessary	1.	
a.	Solid waste permit number(s) for processing or disposal facility being utilized. MDD980555189							
b.	Facility Name Clean Harbors of Baltimore							
	Address Line 1	1910 Russell St						
	Address Line 1							
	Address City State ZIP	Baltimore	MD	21230				
	Municipality	Baltimore	County					
C.	Facility Contact Name							
	Title							
	Phone	410-244-8200	Email Address					
d.	Volume of waste shipped to processing or disposal facility in the previous year. 213							
a.	Solid waste permit number 0102784	(s) for processing or disp	osal facility being utili:	zed.				
b.	Facility Name	Waste Treatment Corp. Warren County					-	
	Address Line 1 341 West Harmar Street							
	Address Line 1							
	Address City State ZIP	Warren	PA	16365				
	Municipality	Warren	County	Warren				
c.	Facility Contact Name							
	Title	Rich Gorton						
	Phone	(814) 726-1500	Email Address	info@waste-trea	tmen	t.net		
H.	Volume of waste shipped t 21	o processing or disposal f	acility in the previous	year. (check one)	)			
-		2. BEN	EFICIAL USE					
a.	Has the waste been approved for beneficial use?					Yes	X	No
	If "Yes", list the general permit number or approval number.						-	
b.	Volume of waste beneficial							
	and an and a second a second to the	cuyd gal	☐ lb ☐ ton	(check one)				

SECTION D. CERTIFICATIO	SECTION	D.	CERTIFICATIO	N
-------------------------	---------	----	--------------	---

Repo obtain know	rt and all attached docu hing the information, I v ledge. I understand that	ments verify the s	and that base that the submi ubmission of fa	examined and am familiar with d upon my inquiry of those tted information is true, acc lse information herein is mad , which include fine and impris	individuals immedia urate and complete e subject to the pen	tely responsible for to the best of my
-	the following, if applicat		and in Castian	P.1. Concerl Descention was	annual to the Desi	and many for the second
	and has not chan			B-1, General Properties was s	supplied to the Depa	artment for the year
	Form Submitted:		Form 26R			
	Date Submitted:	Ц	Other (specify)			
			red in Section	B-2, Chemical Analysis was s	supplied to the Depa	artment for the year
	Form Submitted:		Form 26R			
				diministry for the second		
				and the second		
				Later Constitution		



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed or each at	r legit tache	ly printed in the spaces d sheet as Form 26R,	provided. If additional s	uired information must b pace is necessary, identif ber and identify the dat e noted below.	y Da	DEP L ate Receive			lotes
General	Refe	rence 287.54							
Date Pre	epared	d/Revised Fel	oruary 11, 2011						
		SECTION A.	CLIENT (GENERATO	R OF THE WASTE) INF	ORMA	TION	_		
Compan									
		ergy USA Inc. y, Name of Parent Comp	anv			EPA (	Gener	ator ID	)#
	and a second second	ergy Inc.				N/A			
		ling Address Line 1	(	Company Mailing Address	Line 2				
50 Penr		d Place dress Last Line – City	State	Zip+4	Phon	0	_	Ext	-
Warren		iless Last Line - Oity	PA	15086		814-530	0	LA	
		ntact Last Name	First Name Dina	MI		Suffix			
Municip				County					
Warrent	1	e Ext	Contact Email Address	Allegheny					
(724) 81			dybrown@talismanusa.	com					
			y Mailing Address (noted				Yes		No
If 'No', d	lescril	be location of waste gen	eration and storage. Was	ste is generated during the o					
natural g		the 01-024 well pa	ad site located at 720 Knigh	ts Road, Troy Township, Bi	adford Co	ounty, PA	. The	waste	is
Municip		red in tanks onsite. Troy	County Brad	ford	S	tate	PA		
		iiiaj	SECTION B. WAS						-
Residu	ual	Reside	al Waste		Unit	of		Time	3
Waste C	Code	Code D	escription	Amount	Meas	the state of the s		Fram	e
802		Brine and Wastewate		2,001	cu yd Ib	☐ gal ⊠ ton	Π	One	Time
			1. GENERAL	PROPERTIES	1.14			0110	- mile
a, p	oH Ra	nge 6	to 7	(based on analyses or know	wledge)				
b. F	Physic	cal State	Liquid Waste (EPA M Solid (EPA Method 90 Gas (ambient temper	095)					
c. F	Physic	al Appearance	Color Translucent y Number of Solid or Liqu	id Phases of Separation	Hydro One	ocarbon			
			Describe each phase of	separation. Liquid			-		
	-		2. CHEMICAL ANAL	SIS ATTACHMENTS		-		-	
		sults of a detailed chem ctions, is attached.	ical characterization of th	e waste, as described in t	he		Yes		No
			aste sampling method is			Read .	Yes		No
a	attach	ed.	an de so te properte se se se	oyed by the laboratory(ies	) is	-	Yes		No
- FC			aste determination is att		_		Yes		No
		icable, a detailed explan actual chemical analysi	ation supporting use of g s is attached.	enerator knowledge in	Yes		No	$\boxtimes$	N/A

-		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS
a.		ne manufacturing and/or pollution control processes producing Xes No he instructions, is attached.
b.	A schematic of the manufa as specified in the instruct	cturing and/or pollution control processes producing the waste, X Yes INo ions, is attached.
c.		on submitted are confidential, the substantiation for Yes No N/A described in the instructions, is attached.
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE
		1. PROCESSING OR DISPOSAL FACILITY(IES)
The	area below (ad.) will accomm	nodate the identification of two facilities. Attach additional sheets if necessary.
a.	Solid waste permit number 0008451	(s) for processing or disposal facility being utilized.
b.	Facility Name	Sunbury Generation Wastewater Treatment Facility
	Address Line 1	Old Trail Road (P.O. BOX 517)
	Address Line 1	
	Address City State ZIP	Shamokin Dam PA 17876
-	Municipality	Shamokin Dam County Snyder
c.	Facility Contact Name	Sheldon Kowaleski
	Title Phone	(570) 884-1235 Email Address
d.	Volume of waste shipped t 638	o processing or disposal facility in the previous year.
a.	Solid waste permit number 101508	(s) for processing or disposal facility being utilized.
b.	Facility Name	PA Brine
	Address Line 1	5148 US 322
	Address Line 1	
	Address City State ZIP	Franklin PA 16323
	Municipality	Franklin County Venango
c.	Facility Contact Name	Elton DeLong
	Title	
	Phone	(814) 437-3593 Email Address info@pabrine.com
d.	Volume of waste shipped to 378	o processing or disposal facility in the previous year.
	- This was	2. BENEFICIAL USE
a.	Has the waste been approv If "Yes", list the general pe	red for beneficial use?  Yes X No rmit number or approval number.
b.		ly used in the previous year.

-		3. PROCESS DESCRIPTION	& SCHEMATIC ATTACH	MENTS	-	-		-	
a.		ne manufacturing and/or po he instructions, is attached	llution control process	Monthly Million and Mi		Yes		No	
b.	A schematic of the manufa as specified in the instruct	cturing and/or pollution co ions, is attached.	ntrol processes produ	cing the waste,		Yes		No	
c.		on submitted are confident described in the instruction		for 🗌 Yes		No		N/A	
	SEC	TION C. MANAGEME	ENT OF RESIDUA	L WASTE	-			-	
		1. PROCESSING OR D	ISPOSAL FACILITY (IES)					-	
The	area below (ad.) will accomm	odate the identification of	two facilities. Attach a	dditional sheets	if neo	cessary			
a.	Solid waste permit number MDD980555189	r(s) for processing or dispo	sal facility being utilize	ed.					
b.	Facility Name	Facility Name Clean Harbors of Baltimore							
	Address Line 1	1910 Russell St							
	Address Line 1						-		
	Address City State ZIP	Baltimore	MD	21230	_				
	Municipality	Baltimore	County					_	
с.	Facility Contact Name								
	Title								
	Phone	410-244-8200	Email Address						
d.	Volume of waste shipped t 796	o processing or disposal fa	cility in the previous y	ear. (check one)	)				
a.	Solid waste permit number 0102784	(s) for processing or dispo	sal facility being utilize	ed.					
b.	Facility Name	Waste Treatment Cor	p. Warren County						
	Address Line 1	341 West Harmar Stre							
	Address Line 1								
	Address City State ZIP	Warren	PA	16365					
	Municipality	Warren	County \	Narren					
c.	Facility Contact Name	Rich Gorton							
	Title								
	Phone	(814) 726-1500	Email Address i	nfo@waste-trea	tmen	t.net			
d.	Volume of waste shipped to 190	o processing or disposal fa	cility in the previous y	ear. (check one)	)				
		2. BENE	FICIAL USE		-				
a.	Has the waste been approv				Π	Yes	X	No	
	If "Yes", list the general pe		imber.				-		
b.	Volume of waste beneficial							-	
1 m	a substantia and the grade of a state of the second second second second second second second second second se	🗌 cuyd 🔲 gal	☐ lb ☐ ton	(check one)	)				

			SECTION D.	CERTIFICATION
Rep obta know	ort and all attached do ining the information, wledge. I understand th	cuments I verify hat the s	and that based upo that the submitted in ubmission of false inf	ned and am familiar with the information submitted in this Annual on my inquiry of those individuals immediately responsible for iformation is true, accurate and complete to the best of my ormation herein is made subject to the penalties of 18 Pa. C.S. in include fine and imprisonment.
Che	ck the following, if applic	cable:		
	I certify the informati		red in Section B-1, G	eneral Properties was supplied to the Department for the year
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
	I certify the informati		red in Section B-2, C	hemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
	I certify the informatio	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	present the factor of the second seco	ess Description and Schematic, was supplied to the Department
	Form Submitted:		Form 26R	
			Other (specify)	
	Date Submitted:			
Nam	e of Responsible Officia	1		Title Environmental Specialist
Dina	Brown			
	ature	C	Ma	Date 2/25/11
Sign		- /		

.



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

type each	d or legil attache	bly printed in the space of sheet as Form 26R	ately completed. All request s provided. If additional s , reference the item num ets needs to match the dat	pace is necessary, ider ber and identify the o	ntify Da	DEP I ate Receive	Contract of the local division of the local		lotes
Gen	eral Refe	rence 287.54							
Date	Prepare	d/Revised Fe	ebruary 11, 2011						
1		SECTION A	CLIENT (GENERATO	R OF THE WASTEN	NEORMA	TION			-
Com	pany Na								
		ergy USA Inc.							
		y, Name of Parent Com	pany			EPA	Gene	rator ID	)#
		ergy Inc.				N/A			-
		iling Address Line 1	(	Company Mailing Addre	ess Line 2				
	ennwoo	dress Last Line – City	State	Zip+4	Phon	0	-	Ext	+
	rendale	uless Last Line - Oity	PA	15086		814-530	0	LA	
	and the second se	ntact Last Name	First Name	MI	(( 1)	Suffix			-
Brow		a share a share a share a	Dina						
Muni	cipality			County					
Warr	rendale			Allegheny	_		_		_
	act Phor		Contact Email Address						
	) 814-53		dybrown@talismanusa. ny Mailing Address (noted				Yes		No
If 'No natur	o', descri al gas at	be location of waste ge	neration and storage. Was site located at 720 Knights D	te is generated during th				roducti	
	cipality	Troy	County Bradi	ford	S	tate	PA		_
			SECTION B. WAS	TE DESCRIPTION					
Res	sidual	Resid	lual Waste		Unit	of		Time	9
Wast	te Code	Code	Description	Amount	Meas	and the second se		Fram	e
802		Brine and Wastewate	er	1041	Cu yd	gal gal	0	One	Time
			1. GENERAL	PROPERTIES		23 1011		ono	i into
a.	pH Ra	nge 6	to 7	(based on analyses or l	(nowledge)				
b.	Physic	cal State	Liquid Waste (EPA M Solid (EPA Method 90 Gas (ambient temperation)	ethod 9095) 095)					
C.	Physic	cal Appearance	Color Translucent y Number of Solid or Liqui Describe each phase of	d Phases of Separation		ocarbon			
		-	2. CHEMICAL ANALY	SIS ATTACHMENTS					
a.		sults of a detailed chen ctions, is attached.	nical characterization of th		n the		Yes		No
b.			waste sampling method is	attached.			Yes		No
c.	The quattach		control procedures emplo	oyed by the laboratory(i	es) is		Yes		No
d.	21 A 2 2 4 4		waste determination is atta	ached.			Yes		No
e.		icable, a detailed explain actual chemical analys	nation supporting use of g iis is attached.	enerator knowledge in	Yes		No		N/A

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS
a.		the manufacturing and/or pollution control processes producing Xes No the instructions, is attached.
b.	A schematic of the manufa as specified in the instruc	acturing and/or pollution control processes producing the waste, X Yes INo tions, is attached.
c.		ion submitted are confidential, the substantiation for Ses No N/A described in the instructions, is attached.
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE
		1. PROCESSING OR DISPOSAL FACILITY(IES)
The	area below (ad.) will accomm	nodate the identification of two facilities. Attach additional sheets if necessary.
a.	Solid waste permit numbe 0008451	r(s) for processing or disposal facility being utilized.
b.	Facility Name	Sunbury Generation Wastewater Treatment Facility
	Address Line 1	Old Trail Road
	Address Line 1	P.O. Box 517
	Address City State ZIP	Shamokin Dam PA 17876
	Municipality	Shamokin Dam County Snyder
	Facility Contact Name	Sheldon Kowaleski
	Title	
	Phone	(570) 884-1235 Email Address
d.	Volume of waste shipped t 753	to processing or disposal facility in the previous year.
1.	Solid waste permit number 101508	r(s) for processing or disposal facility being utilized.
).	Facility Name	PA Brine
	Address Line 1	5148 US 322
	Address Line 1	
	Address City State ZIP	Franklin PA 16323
	Municipality	Franklin County Venango
	E	Elton DeLong
2.	Facility Contact Name	
	Facility Contact Name Title	
	-	(814) 437-3593 Email Address info@pabrine.com
	Title Phone	(814) 437-3593 Email Address info@pabrine.com
	Title Phone	
	Title Phone Volume of waste shipped t	(814) 437-3593 Email Address info@pabrine.com to processing or disposal facility in the previous year. Cuyd gal b X ton (check one)
	Title Phone Volume of waste shipped t 108	(814) 437-3593 Email Address info@pabrine.com to processing or disposal facility in the previous year. Cu yd gal b K ton (check one) 2. BENEFICIAL USE
	Title Phone Volume of waste shipped t 108 Has the waste been approv	(814) 437-3593       Email Address info@pabrine.com         to processing or disposal facility in the previous year.
l.:	Title Phone Volume of waste shipped t 108 Has the waste been approv If "Yes", list the general pe	(814) 437-3593 Email Address info@pabrine.com to processing or disposal facility in the previous year. Cuyd gal b K ton (check one) 2. BENEFICIAL USE

		3. PROCESS DESCRIPTIO	ON & SCHEMAT	IC ATTACHMEN	ITS				
a.	A detailed description of the the waste, as specified in t			rol processes	producing		Yes		No
b.	A schematic of the manufa as specified in the instruct	cturing and/or pollution lons, is attached.	control proces	ses producing	the waste,		Yes		No
C.	If portions of the information a confidentiality claim, as				Yes		No		N/A
1	SEC	TION C. MANAGEI	MENT OF F	RESIDUAL	NASTE		10		
		1. PROCESSING O							
The a	area below (ad.) will accomm	odate the identification	of two facilities	s. Attach addit	ional sheets	if neo	cessary		
a.	Solid waste permit number MDD980555189	(s) for processing or dis	posal facility b	eing utilized.					
b.	Facility Name	Clean Harbors of B	altimore						
	Address Line 1	1910 Russell St							
	Address Line 1								
	Address City State ZIP	Baltimore	ME		21230	_		_	
	Municipality	Baltimore	Co	unty					
C,	Facility Contact Name								
	Title							_	
	Phone	410-244-8200	Email Ad	dress					
d.	Volume of waste shipped t 180	o processing or disposal	facility in the	previous year.	(check one)				
a.	Solid waste permit number	(s) for processing or dis	posal facility b	eing utilized.					
b.	Facility Name					_		-	
	Address Line 1					-		-	
	Address Line 1					-			
	Address City State ZIP								
	Municipality		Co	unty					
c.	Facility Contact Name				-			-	
	Title						-		
	Phone		Email Ad	dress					
d.	Volume of waste shipped to	processing or disposal	facility in the	previous year.	(check one)	-			
		2 BFI	NEFICIAL USE				-	-	-
a.	Has the waste been approv		TEI TOIAE OOE				Yes		No
	If "Yes", list the general pe		number			-	1000	-	10 M
b.	Volume of waste beneficial							-	
<i>.</i>	Foreine of maste scheneller	🗌 cu yd 🗌 gal	D Ib	ton	(check one)				

- 2	Section of the sectio		SECTION D. CERTIFICATION
Repo obta knov	ort and all attached doc ining the information, I vledge. I understand that	verify at the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Chec	ck the following, if applica	able:	
	I certify the informatio		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the informatio and has not cha		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	-	
	I certify the information for the year and		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
Name	e of Responsible Official		Title Environmental Specialist
Dina	Brown		
Signa	atureh	-	9152 Date 2/25/4

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

2540-PM-BWM0347 Rev. 1/2011

pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

typed each	or legil attache	ust be fully and accurate oly printed in the spaces p d sheet as Form 26R, r e date on attached sheets	provided. If additional s eference the item num	pace is necessary, identiber and identify the d	tify Date Receiv	USE ONLY ved & General Notes
Gener	al Refe	rence 287.54				
Date P	repare	d/Revised Febr	uary 11, 2011			
		SECTION A.	CLIENT (GENERATO	OR OF THE WASTE) IN	FORMATION	
	any Na			A THE BRITER PARTY	the second second	
		ergy USA Inc. y, Name of Parent Compa	ny		FPA	Generator ID#
		ergy Inc.	iny in the second se		N/A	
Comp	any Ma	iling Address Line 1 d Place		Company Mailing Addres	ss Line 2	
		dress Last Line – City	State	Zip+4	Phone	Ext
Warre			PA	15086	(724) 814-53	
		ntact Last Name	First Name Dina	,MI	Suff	ix
Brown			Dina	County		
Warre				Allegheny		
	ct Phor		Contact Email Address			
	814-53		dybrown@talismanusa			Yes 🕅 No
		penerated at the Company be location of waste gene			drilling, completion	
natura	I gas at	(03-008) (	G well pad site located at	2202 Wolfe Hollow Road,		
		e is temporarily stored in ta		1 <b>6</b> - 1	C 4 - 4 -	
Munic	ipality	Columbia	County Brad	TE DESCRIPTION	State	PA
Poel	idual		al Waste	TE DESCRIPTION	Unit of	Time
1.00.00	Code	107787878787	scription	Amount	Measure	Frame
802		Brine and Wastewater		5,903	🗌 cu yd 🗌 gal	
002		Dinio and matomator	1. GENERAL		☐ lb 🛛 ton	One Time
a.	pH Ra	inge 6	to 7	(based on analyses or k	nowledge)	
b.			Liquid Waste (EPA N		nowiedge/	
			Solid (EPA Method 9 Gas (ambient tempe	095)		
C.	Physi	cal Appearance		yellow/brown Odo	r Hydrocarbon	
				id Phases of Separation		
			Describe each phase of	separation. Liquid		
_			2. CHEMICAL ANAL	VSIS ATTACHMENTS		
a.		esults of a detailed chemic ctions, is attached.			n the	Yes 🗌 No
b.		ailed description of the wa	ste sampling method is	attached.		Yes No
C.		uality assurance/quality c				Yes 🗌 No
d.		sults of the hazardous wa	aste determination is at	tached.	$\boxtimes$	Yes 🗌 No
e.		licable, a detailed explana factual chemical analysis		generator knowledge in	Yes	No 🖾 N/A

-		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS
a.		ne manufacturing and/or pollution control processes producing 🛛 Yes 🗌 No he instructions, is attached.
b,	A schematic of the manufa as specified in the instruct	cturing and/or pollution control processes producing the waste, X Yes No ions, is attached.
c.		on submitted are confidential, the substantiation for Yes No N/A described in the instructions, is attached.
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE
	- I - I	1. PROCESSING OR DISPOSAL FACILITY(IES)
The		nodate the identification of two facilities. Attach additional sheets if necessary.
a.	Solid waste permit number 0008451	(s) for processing or disposal facility being utilized.
b.	Facility Name	Sunbury Generation Wastewater Treatment Facility
	Address Line 1	Old Trail Road (P.O. BOX 517)
	Address Line 1	
	Address City State ZIP Municipality	Shamokin Dam         PA         17876           Shamokin Dam         County         Snyder
C.	Facility Contact Name Title	Sheldon Kowaleski
	Phone	(570) 884-1235 Email Address
d.	Volume of waste shipped t 586	o processing or disposal facility in the previous year.
a.	Solid waste permit number 101508	(s) for processing or disposal facility being utilized.
b.	Facility Name	PA Brine
	Address Line 1	5148 US 322
	Address Line 1	
	Address City State ZIP	Franklin PA 16323
-	Municipality	Franklin County Venango
C.	Facility Contact Name Title	Elton DeLong
	Phone	(814) 437-3593 Email Address info@pabrine.com
-		
d.	2,614	o processing or disposal facility in the previous year.
-		2. BENEFICIAL USE
a.	Has the waste been approv	
		rmit number or approval number.
b.	Volume of waste beneficial	ly used in the previous year.
		cuyd gal b ton (check one)

-		3. PROCESS DESCRIPTIO	N & SCHEMATIC ATTACH	MENTS		-	-	
a.	A detailed description of the the waste, as specified in t			ses producing		Yes		No
b.		A schematic of the manufacturing and/or pollution control processes producing the waste, Xes No as specified in the instructions, is attached.						
c.	If portions of the information a confidentiality claim, as			for 🗌 Yes		No		N/A
	SEC	TION C. MANAGEN	IENT OF RESIDUA	L WASTE				
			DISPOSAL FACILITY(IES			-		
The	area below (ad.) will accomm	odate the identification o	f two facilities. Attach a	dditional sheets	if neo	cessary	1.	
a.	Solid waste permit number MDD980555189	r(s) for processing or disp	oosal facility being utiliz	ed.				
b.	Facility Name	Clean Harbors of Ba	altimore					
	Address Line 1	1910 Russell St						
	Address Line 1				-		_	
	Address City State ZIP	Baltimore	MD	21230				
	Municipality	Baltimore	County					_
с.	Facility Contact Name							-
	Title		Part A A Assess					
	Phone	410-244-8200	Email Address					
d.	Volume of waste shipped t 1,638	o processing or disposal	facility in the previous y	ear. (check one)	)			
a.	Solid waste permit number 0102784	(s) for processing or disp	osal facility being utilize	ed.				
b.	Facility Name	Waste Treatment Co	orp. Warren County					
	Address Line 1	341 West Harmar St	treet					
	Address Line 1							
	Address City State ZIP	Warren	PA	16365				
	Municipality	Warren	County	Warren				
с.	Facility Contact Name	Rich Gorton						-
	Title		-					
	Phone	(814) 726-1500	Email Address	nfo@waste-trea	atmen	t.net		
d.	Volume of waste shipped t 1,064	o processing or disposal	facility in the previous y	ear. (check one	)			
		2. BEN	EFICIAL USE					
a.	Has the waste been approv					Yes		No
	If "Yes", list the general pe		number.				-	
b.	Volume of waste beneficial							
		🗋 cu yd 🗌 gal	🗌 lb 🗌 ton	(check one	)			

	and the second second	SECTION D. CERTIFICATION
Rep obta know	ort and all attached do ining the information, wledge. I understand th	w, that I have personally examined and am familiar with the information submitted in this Annual ocuments and that based upon my inquiry of those individuals immediately responsible for I verify that the submitted information is true, accurate and complete to the best of my hat the submission of false information herein is made subject to the penalties of 18 Pa. C.S. alsification to authorities, which include fine and imprisonment.
Che	ck the following, if appli	cable:
	I certify the informati	ion required in Section B-1, General Properties was supplied to the Department for the year anged.
	Form Submitted:	Form 26R
		Other (specify)
	Date Submitted:	
	I certify the informati	ion required in Section B-2, Chemical Analysis was supplied to the Department for the year anged.
	Form Submitted:	Form 26R
		Other (specify)
	Date Submitted:	
	I certify the informatic for the year and	on required in Section B-3, Process Description and Schematic, was supplied to the Department d has not changed.
	Form Submitted:	Form 26R
		Other (specify)
	Date Submitted:	
	e of Responsible Officia Brown	Title Environmental Specialist
	ature	- 3162 Date 2/25/4



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This	form m	ust be fully and accu	rately completed. All rec	uired information must	be	DEP	USE (	ONLY
each	attache	d sheet as Form 26R	es provided. If additional s , reference the item nun sets needs to match the da	nber and identify the da		ate Receive	ed & G	eneral Notes
Gene	aral Refe	rence 287.54						
Date	Prepare	d/Revised F	ebruary 11, 2011					
		SECTION A	. CLIENT (GENERATO	OR OF THE WASTE) IN	FORMA	TION		
Com	pany Na							
		ergy USA Inc.						_
		y, Name of Parent Con	npany				Gene	rator ID#
		ergy Inc. Iling Address Line 1		Company Mailing Addres	e Line 7	N/A		
	ennwoo			company manning Addres	S Line 2			
		dress Last Line - City	State	Zip+4	Phon	e	-	Ext
and the second sec	endale		PA	15086	(724)	814-530	00	
		ntact Last Name	First Name	MI		Suffi	x	
Brow	S7		Dina	Country				
	cipality endale			County Allegheny				
and the second se	act Phon	e Ext	Contact Email Address					
(724)	814-53	21	dybrown@talismanusa	a.com				
If 'No	', descri	be location of waste ge	any Mailing Address (note eneration and storage. Wa I pad site located at 225 Bud	aste is generated during the		mpletion,		
	orarily sto cipality	ered in tanks onsite. Troy	County Brad	dford	s	tate	PA	
			SECTION B. WAS	<b>STE DESCRIPTION</b>				
	sidual	Resi	dual Waste		Unit	of		Time
Wast	e Code	Code	Description	Amount	Meas	and the second se	-	Frame
802		Brine and Wastewat	er	228	l cu yd	gal gal	IT	One Time
			1. GENERAL	PROPERTIES		ES ION	10	One rime
a.	pH Ra	nge 6		(based on analyses or kr	nowledge)			
b.	Physic	cal State	Liquid Waste (EPA M Solid (EPA Method S Gas (ambient tempe	9095)				
с.	Physic	cal Appearance		yellow/brown Odo uid Phases of Separation f separation. Liquid	r <u>Hydro</u> One	ocarbon		
			2. CHEMICAL ANAL	YSIS ATTACHMENTS				
a.		sults of a detailed che ctions, is attached.	mical characterization of t	Man 1	the		Yes	No No
b.	A deta	iled description of the	waste sampling method is			$\boxtimes$	Yes	No.
C.	The quattach		y control procedures emp	loyed by the laboratory(ie	s) is		Yes	□ No
d.	The re	sults of the hazardous	waste determination is at	tached.		$\boxtimes$	Yes	No No
e.		icable, a detailed expla actual chemical analy	anation supporting use of sis is attached.	generator knowledge in	Yes		No	N/A

	1997	3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS						
a.		he manufacturing and/or pollution control processes producing Xes No the instructions, is attached.						
b.	A schematic of the manufa as specified in the instruct	acturing and/or pollution control processes producing the waste, X Yes I No tions, is attached.						
c.		on submitted are confidential, the substantiation for D Yes D No X N/A described in the instructions, is attached.						
-	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE						
		1. PROCESSING OR DISPOSAL FACILITY(IES)						
The a	rea below (ad.) will accomn	nodate the identification of two facilities. Attach additional sheets if necessary.						
a.	Solid waste permit number 0008451	r(s) for processing or disposal facility being utilized.						
b.	Facility Name Sunbury Generation Wastewater Treatment Facility							
	Address Line 1 Address Line 1	Old Trail Road (P.O. BOX 517)						
	Address City State ZIP	Shamokin Dam PA 17876						
	Municipality	Shamokin Dam County Snyder						
	Facility Contact Name	Sheldon Kowaleski						
	Title							
	Phone	(570) 884-1235 Email Address						
d.	Volume of waste shipped t 143	o processing or disposal facility in the previous year.						
a.	Solid waste permit number 101508	r(s) for processing or disposal facility being utilized.						
b.	Facility Name	PA Brine						
	Address Line 1	5148 US 322						
	Address Line 1							
	Address City State ZIP	Franklin PA 16323						
	Municipality	Franklin County Venango						
c.	Facility Contact Name Title	Elton DeLong						
	Phone	(814) 437-3593 Email Address info@pabrine.com						
		(orig) for cooo						
d.	42	o processing or disposal facility in the previous year.						
		2. BENEFICIAL USE						
ı.	Has the waste been approv							
		rmit number or approval number.						
b.	Volume of waste beneficial	lly used in the previous year.						
		cuyd gal b ton (check one)						

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS					
a.		he manufacturing and/or pollution control processes producing 🛛 Yes 🔲 No the instructions, is attached.					
b.		A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.					
c.		on submitted are confidential, the substantiation for 🛛 Yes 🗌 No 🛛 🕅 Na described in the instructions, is attached.					
	SECT	TION C. MANAGEMENT OF RESIDUAL WASTE					
		1. PROCESSING OR DISPOSAL FACILITY(IES)					
The	area below (ad.) will accomm	nodate the identification of two facilities. Attach additional sheets if necessary.					
a.	Solid waste permit number 0102784	r(s) for processing or disposal facility being utilized.					
b.	Facility Name	Waste Treatment Corp. Warren County					
	Address Line 1	341 Harmar Street					
	Address Line 1						
	Address City State ZIP	Warren PA 16365					
	Municipality	Warren County Warren					
с.	Facility Contact Name	Rich Gorton					
	Title Phone	(814) 726-1500 Email Address info@waste-treatment net					
d.	Volume of waste shipped to 43	o processing or disposal facility in the previous year.					
a.	Solid waste permit number	r(s) for processing or disposal facility being utilized.					
b.	Facility Name						
	Address Line 1						
	Address Line 1						
	Address City State ZIP						
	Municipality	County					
c.	Facility Contact Name						
	Title						
	Phone	Email Address					
	1 mone						
d.		o processing or disposal facility in the previous year.					
d.		o processing or disposal facility in the previous year.					
d. a.	Volume of waste shipped to	o processing or disposal facility in the previous year. C u yd gal b ton (check one) 2. BENEFICIAL USE					
	Volume of waste shipped to Has the waste been approv	o processing or disposal facility in the previous year.  Cuyd gal b ton (check one)  C. BENEFICIAL USE  red for beneficial use?  Yes X No					
	Volume of waste shipped to Has the waste been approv If "Yes", list the general pe	o processing or disposal facility in the previous year. C u yd gal b ton (check one) 2. BENEFICIAL USE					

	and the second second		SECTION D. CERTIFICATION
Repo obta know	ort and all attached docu ining the information, I wledge. I understand that	uments verify t the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Chee	ck the following, if applica	ble:	
	I certify the information and has not char		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	-	
	I certify the information and has not char		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information for the year and I		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	-	
Nam	e of Responsible Official		Title Environmental Specialist
Dina	Brown		In S/m
Sign	ature	2E	14 Date 7/25/4
		0	



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

		ust be fully and accurate				USE ONLY
each	attache	bly printed in the spaces p ed sheet as Form 26R, re re date on attached sheets	eference the item num	ber and identify the dat		ed & General Notes
Gene	ral Refe	rence 287.54				
Date	Prepare	d/Revised Febr	uary 11, 2011			
1		SECTION A. C	LIENT (GENERATO	R OF THE WASTE) INF	ORMATION	
	oany Na					
		ergy USA Inc. y, Name of Parent Compa	nv.	and the second s	EDA	Generator ID#
A REAL PROPERTY AND A REAL		ergy Inc.	iny .		N/A	Generator 10#
Comp	bany Ma	iling Address Line 1 d Place	C	Company Mailing Address	Line 2	
		dress Last Line - City	State	Zip+4	Phone	Ext
	endale		PA	15086	(724) 814-530	
Brow		ntact Last Name	First Name Dina	MI	Suffi	x
and the second se	cipality			County		
Warre	endale			Allegheny		
	act Phon		Contact Email Address			
	814-53		dybrown@talismanusa.			Yes 🕅 No
		penerated at the Company be location of waste gene				
	al gas at			Mountain Avenue, Armenia		
		orarily stored in tanks onsite				
Munic	cipality	Armenia	County Bradf		State	PA
	till and	Residua	SECTION B. WAS	TE DESCRIPTION	Unit of	There
	idual e Code	Code Des		Amount	Measure	Time Frame
802		Brine and Wastewater			cu yd 🗌 gal	
002		Dime and wastewater			Ib 🛛 ton	One Time
-			1. GENERAL		ada da añ	
a. b.	pH Ra	10/1	to 7 Liquid Waste (EPA M	(based on analyses or kno	wiedge)	
ы.	Filysi		Solid (EPA Method 90 Gas (ambient tempera	)95)		
C.	Physic		Color Translucent y	ellow/brown Odor	Hydrocarbon	
			Number of Solid or Liqui Describe each phase of :	d Phases of Separation separation. <u>Liquid</u>	One	
-			2. CHEMICAL ANALY	and the second		
a.	instru	sults of a detailed chemic ctions, is attached.			-	Yes 🗌 No
b.		iled description of the wa			$\boxtimes$	Yes 🗌 No
c.	The quattach	uality assurance/quality co ed.	ontrol procedures emplo	oyed by the laboratory(ies	) is 🛛	Yes 🗌 No
d.	The re	sults of the hazardous wa			Frend	Yes 🗌 No
е.		icable, a detailed explanat actual chemical analysis		enerator knowledge in	Yes	No 🛛 N/A

	3 PROCESS DESCRIPT	ION & SCHEM	ATIC ATTACHMEN	ITS		
A detailed description of th	e manufacturing and/o	r pollution co			Yes Yes	No No
		control pro	cesses producing	the waste,	Yes	No No
				Yes	No No	N/A
SECT	ION C. MANAGE	MENT OF	RESIDUAL	NASTE		
area below (ad.) will accomm	odate the identification	of two facili	ties. Attach addit	tional sheets	if necessary	1.
Solid waste permit number MDD980555189	(s) for processing or di	sposal facilit	y being utilized.			
Facility Name	Clean Harbors of B	Baltimore				
Address Line 1	1910 Russell St					
			Contraction in the second s	21230		
	Baltimore		County			
	1				_	
Phone	410-244-8200	Email	Address			
Volume of waste shipped to 58	processing or dispose cuyd gal	al facility in t	he previous year.			
Solid waste permit number	s) for processing or di	sposal facilit	y being utilized.			
Facility Name						
Address Line 1						
Address Line 1						
Address City State ZIP						
Municipality			County			
Facility Contact Name						
Title						
Phone		Email	Address			
Volume of waste shipped to	processing or dispose	al facility in t	ne previous year.		,	
	2 R	INFEICIAL LIS	F			
Has the waste been approv		INCLIGIAL US	-		Yes	No No
		Inumber				
	cuyd gal	☐ Ib	🗍 ton	(check one)	1	
	A detailed description of the the waste, as specified in the A schematic of the manufa- as specified in the instruction of the informatic a confidentiality claim, as description Second Second Solid waste permit number MDD980555189 Facility Name Address Line 1 Address Line 1 Address City State ZIP Municipality Facility Contact Name Title Phone Volume of waste shipped to 58 Solid waste permit number Facility Name Address Line 1 Address Lin	A detailed description of the manufacturing and/o the waste, as specified in the instructions, is attacc A schematic of the manufacturing and/or pollution as specified in the instructions, is attached. If portions of the information submitted are confid a confidentiality claim, as described in the instruct SECTION C. MANAGE 1. PROCESSING O trea below (ad.) will accommodate the identification Solid waste permit number(s) for processing or di MDD980555189 Facility Name Address Line 1 Address Line 1 Address City State ZIP Municipality Facility Contact Name Title Phone Facility Name Address Line 1 Address Line 1 Address Sing or dispose 58 Cuyd gal Solid waste permit number(s) for processing or dispose 58 Cuyd gal Cuyd gal 2. Bi Has the waste been approved for beneficial use? If "Yes", list the general permit number or approva Volume of waste beneficially used in the previous	A detailed description of the manufacturing and/or pollution co the waste, as specified in the instructions, is attached.  A schematic of the manufacturing and/or pollution control proc as specified in the instructions, is attached.  If portions of the information submitted are confidential, the su a confidentiality claim, as described in the instructions, is attact SECTION C. MANAGEMENT OF 1. PROCESSING OR DISPOSAL trea below (ad.) will accommodate the identification of two facilit Solid waste permit number(s) for processing or disposal facilit MDD980555189  Facility Name Address Line 1 Address Line 1 Address City State ZIP Municipality Phone Clean Harbors of Baltimore 410-244-8200 Email Volume of waste shipped to processing or disposal facility in ti 58 Cu yd Gal b Solid waste permit number(s) for processing or disposal facility Municipality Clean Harbors of Baltimore 410-244-8200 Email Volume of waste shipped to processing or disposal facility in ti 58 Cu yd Gal Facility Contact Name Title Phone Address Line 1 Address Line 1 Addre	A detailed description of the manufacturing and/or pollution control processes the waste, as specified in the instructions, is attached. A schematic of the manufacturing and/or pollution control processes producing as specified in the instructions, is attached. If portions of the information submitted are confidential, the substantiation for a confidentiality claim, as described in the instructions, is attached. SECTION C. MANAGEMENT OF RESIDUAL 1 1. PROCESSING OR DISPOSAL FACILITY(IES) rea below (ad.) will accommodate the identification of two facilities. Attach addit Solid waste permit number(s) for processing or disposal facility being utilized. MDD980555189 Facility Name Address Line 1 Address Line 1 Address City State ZIP Baltimore Hunicipality Facility Contact Name Title Phone 410-244-8200 Email Address Volume of waste shipped to processing or disposal facility being utilized. Facility Name Address Line 1 Email Address Volume of waste shipped to processing or disposal facility being utilized. Facility Name Cuyd gal b ton Solid waste permit number(s) for processing or disposal facility being utilized. Facility Name Cuyd gal b ton Solid waste permit number(s) for processing or disposal facility being utilized. Facility Name Cuyd gal b ton Solid waste permit number(s) for processing or disposal facility being utilized. Facility Name Cuyd gal b ton Solid waste permit number(s) for processing or disposal facility being utilized. Facility Contact Name Title Phone Email Address Volume of waste shipped to processing or disposal facility in the previous year. Cuyd gal b ton County Facility Contact Name Title Phone Email Address Volume of waste shipped to processing or disposal facility in the previous year. Cuyd gal b ton Cuyd gal b	A schematic of the manufacturing and/or pollution control processes producing the waste, as specified in the instructions, is attached.         If portions of the Information submitted are confidential, the substantiation for a confidentiality claim, as described in the instructions, is attached.	A detailed description of the manufacturing and/or pollution control processes producing       ☑ Yes         the waste, as specified in the instructions, is attached.       A schematic of the manufacturing and/or pollution control processes producing the waste, as specified in the instructions, is attached.       ☑ Yes         If portions of the information submitted are confidential, the substantiation for Yes       □ No       □ No         a confidentiality claim, as described in the instructions, is attached.       ■ No       □ No         Section C. MANAGEMENT OF RESIDUAL WASTE         1. PROCESSING on DIsPOSAL FACILITY(IES)         trea below (ad.) will accommodate the identification of two facilities. Attach additional sheets if necessary         Solid waste permit number(s) for processing or disposal facility being utilized.         MDD980555189       ■         Facility Name       Clean Harbors of Baltimore         Address Line 1       1910 Russell St         Address Line 1       1910 Russell St         Address Line 1       10-244-8200         Phone       410-244-8200       Email Address         Volume of waste shipped to processing or disposal facility in the previous year.       58         Solid waste permit number(s) for processing or disposal facility being utilized.       ■         Facility Name

			SECTION D. C	ERTIFICA	TION
Repo obta knov	ort and all attached docu ining the information, I	uments verify t the s	and that based upon r that the submitted infor ubmission of false inform	ny inquiry of rmation is tra nation herein	liar with the information submitted in this Annual those individuals immediately responsible for ue, accurate and complete to the best of my is made subject to the penalties of 18 Pa. C.S. d imprisonment.
Chec	k the following, if applica	ble:			
	I certify the information and has not char		ired in Section B-1, Gene	eral Propertie	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:	-			
	I certify the information and has not char		ired in Section B-2, Cher	nical Analysi	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
	I certify the information for the year and I	a second a second a		s Description	and Schematic, was supplied to the Department
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
Nam	e of Responsible Official			Title	Environmental Specialist
Dina	Brown		11		
Sign	ature An	S	lor	Date	2125/4
		1		-	the test



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

				uired information must be		USE ONLY
each	attache		eference the item num	pace is necessary, identify ber and identify the date te noted below.		ed & General Notes
Gene	ral Refe	rence 287.54				
Date	Prepare	d/Revised Febr	uary 11, 2011			
		SECTION A. C	LIENT (GENERATO	OR OF THE WASTE) INFO	ORMATION	
	pany Na			Concernance of the second	and the second s	
		ergy USA Inc.				
		y, Name of Parent Compa ergy Inc.	ny		EPA N/A	Generator ID#
Com		iling Address Line 1		Company Mailing Address I		
Com		dress Last Line - City	State PA	Zip+4 15086	Phone (724) 814-53	Ext 00
	oany Co	ntact Last Name	First Name Dina	MI	Suff	
Muni	cipality endale			County Allegheny		
	act Phor		Contact Email Address			
	814-53		dybrown@talismanusa			
		enerated at the Company				Yes 🛛 No
	al gas at	the (01-006) I well	nad site located at 234 F	ste is generated during the dr Phinney Drive, Troy Township,	Bradford Coun	, and production of
		pred in tanks onsite.	puu ono rooutou ur co rr	mining prints, may rounship,	brudioid bouil	y PAR The Wallow is
Muni	cipality	Troy	County Brad		State	PA
-				TE DESCRIPTION		
	idual	Residua		A	Unit of	Time
	e Code	Code De	scription	Amount	Measure cu yd 🗌 gal	Frame
802		Brine and Wastewater			b X ton	One Time
	-		1. GENERAL	PROPERTIES		
a.	pH Ra		to 7	(based on analyses or know	/ledge)	
b.	Physic	cal State	Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper	095)		
C.	Physic		Color Translucent	vellow/brown Odor id Phases of Separation	Hydrocarbon One	
			Describe each phase of	separation. <u>Liquid</u>		
			2. CHEMICAL ANAL			
a.	instru	ctions, is attached.		ne waste, as described in th	-	Yes No
b.		iled description of the wa				Yes No
C.	attach	ed.		oyed by the laboratory(ies)	-	Yes No
d.	a second a second	sults of the hazardous wa	Participation and a second sec			Yes 🗌 No
e,		icable, a detailed explana actual chemical analysis		generator knowledge in	Yes	No 🛛 N/A

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS
a.		he manufacturing and/or pollution control processes producing Xes No the instructions, is attached.
b.	A schematic of the manufa as specified in the instruct	acturing and/or pollution control processes producing the waste, X Yes No tions, is attached.
C.		on submitted are confidential, the substantiation for D Yes D No X N/A described in the instructions, is attached.
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE
		1. PROCESSING OR DISPOSAL FACILITY(IES)
The	area below (ad.) will accomm	nodate the identification of two facilities. Attach additional sheets if necessary.
a.	Solid waste permit number 0008451	r(s) for processing or disposal facility being utilized.
b.	Facility Name	Sunbury Generation Wastewater Treatment Facility
	Address Line 1	Old Trail Road
	Address Line 1	P.O. Box 517
	Address City State ZIP	Shamokin Dam PA 17876
	Municipality	Shamokin Dam County Snyder
	Facility Contact Name Title	Sheldon Kowaleski
	Phone	(570) 884-1235 Email Address
d.	Volume of waste shipped t 43	to processing or disposal facility in the previous year.
<b>1</b> ,	Solid waste permit number 101508	r(s) for processing or disposal facility being utilized.
<b>)</b> .	Facility Name	PA Brine
	Address Line 1	5148 US 322
	Address Line 1	
	Address City State ZIP	Franklin PA 16323
	Municipality	Franklin County Venango
	Facility Contact Name Title	Elton DeLong
	Phone	(814) 437-3593 Email Address info@pabrine.com
1.	Volume of wants chinned t	o processing or disposal facility in the previous year.
	71	cuyd gal lb X ton (check one)
		2. BENEFICIAL USE
-	Has the waste been approv	ved for beneficial use? Yes No
a.		
ı. D.	If "Yes", list the general pe	rmit number or approval number.

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS				
a.	A detailed description of th		his			
a.		he manufacturing and/or pollution control processes producing 🛛 Yes 🗌 the instructions, is attached.	No			
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes as specified in the instructions, is attached.					
с.		on submitted are confidential, the substantiation for Session of Yes No Session of the instructions, is attached.	N/A			
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE				
		1. PROCESSING OR DISPOSAL FACILITY(IES)				
The	area below (ad.) will accomm	nodate the identification of two facilities. Attach additional sheets if necessary.				
a.	Solid waste permit number MDD980555189	r(s) for processing or disposal facility being utilized.				
b.	Facility Name	Clean Harbors of Baltimore				
	Address Line 1	1910 Russell St				
	Address Line 1					
	Address City State ZIP	Baltimore MD 21230				
	Municipality	Baltimore County				
<b>.</b>	Facility Contact Name					
	Title					
	Phone	410-244-8200 Email Address				
d.	Volume of waste shipped t 365	o processing or disposal facility in the previous year.				
a.	Solid waste permit number 0102784	r(s) for processing or disposal facility being utilized.				
b.	Facility Name	Waste Treatment Corp. Warren County	-			
	Address Line 1	341 West Harmar Street				
	Address Line 1					
	Address City State ZIP	Warren PA 16365				
	Municipality	Warren County Warren				
c.	Facility Contact Name	Rich Gorton				
	Title		-			
	Phone	(814) 726-15001 Email Address info@waste-treatment.net				
<b>4</b> .	Volume of waste shipped t 25	o processing or disposal facility in the previous year.				
		2. BENEFICIAL USE	-			
a.	Has the waste been approv		No			
		rmit number or approval number.				
b.		ly used in the previous year.				
	and the second s	cuyd gal b ton (check one)				

1000		S	ECTION D. CERTII	FICATION		
Re ob kn	port and all attache taining the informat owledge. I understa	ed documents and the tion, I verify that the and that the submission	at based upon my inque submitted information	uiry of those indi is true, accurate herein is made su	information submitted in this Ann viduals immediately responsible e and complete to the best of ubject to the penalties of 18 Pa. Conent.	for my
	eck the following, if a					
	I certify the info		Section B-1, General Pro	operties was supp	olied to the Department for the year	ear
	Form Submitted		6R			
		Other (	specify)			
	Date Submitted:					
		rmation required in a ot changed.	Section B-2, Chemical A	analysis was supp	olied to the Department for the year	ear
	Form Submitted	:	6R			
				Longer Frankling		
ubmit	ted:					
		requirss D	escription a	nd Scheh	e Department	
	and			the segment of the second		
Submit	tted:			Constant Constant		
				A CONTRACTOR		
ubmit	ted:					
onsibl	le Official		Title	Enviror		-
				100		
1	-	0	Date			
				-		
				_		
				1.00		
					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

			tely completed. All requ provided. If additional s			P USE O		Votes
each	attache	d sheet as Form 26R,	reference the item num is needs to match the dat	ber and identify the da				
Gene	ral Refe	rence 287.54			-			
Date I	Prepare	d/Revised Feb	ruary 11, 2011					
		SECTION A.	CLIENT (GENERATO	R OF THE WASTE) IN	FORMATION	1		
	any Na	me						
		ergy USA Inc. y, Name of Parent Comp	201		ED	A Gener	rator II	7#
		ergy Inc.	any		N/A	0.0 m	atorit	J#
Comp	any Ma	iling Address Line 1 d Place	C	Company Mailing Addres				
	any Ad	dress Last Line – City	State PA	Zip+4 15086	Phone (724) 814-5	300	Ex	t
and the second se	any Co	ntact Last Name	First Name Dina	MI	(124) 014-0 Sul			
	ipality			County				
	endale			Allegheny		_		_
	814-53	Carl Marcia	Contact Email Address dybrown@talismanusa.	com				
			y Mailing Address (noted			] Yes	X	No
If 'No'	, descri	be location of waste gen	eration and storage. Was	te is generated during the		n, and p	roduct	ion of
	l gas at		II pad site located at 3637 F	allbrook Road, Armenia T	ownship, Bradford	County	, PA.	The
	ipality	prarily stored onsite. Armenia	County Bradf	ford	State	PA		
-			SECTION B. WAS					
Res	idual	Residu	al Waste		Unit of	1	Tim	e
Waste	Code	Code D	escription	Amount	Measure		Fram	le
802		Brine and Wastewater		332	]cuyd []ga ]lb ⊠tor		One	Time
			1. GENERAL	and the second se				
a.	pH Ra		to 7	(based on analyses or kn	iowledge)	-		
b.	Physic	cal State	Liquid Waste (EPA M Solid (EPA Method 90 Gas (ambient tempera	095)				
c.	Physic	cal Appearance	Color Translucent y Number of Solid or Liqui	ellow/brown Odor	Hydrocarbo One	n		
			Describe each phase of		0110	_		
			2. CHEMICAL ANALY	SIS ATTACHMENTS				-
a.		sults of a detailed chem ctions, is attached.	cal characterization of th	e waste, as described in	the 🗵	] Yes		No
b.	A deta	iled description of the w	aste sampling method is			] Yes		No
C.	The quartach		control procedures emplo	oyed by the laboratory(ie	s) is	] Yes		No
d.		LINE / BUSY AND DO WATCH	aste determination is atta		X			No
e,		icable, a detailed explan actual chemical analysi	ation supporting use of g	enerator knowledge in	Yes	] No		N/A

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS						
а.	A detailed description of the manufacturing and/or pollution control processes producing Xes No the waste, as specified in the instructions, is attached.							
b.	A schematic of the manufa as specified in the instruct	acturing and/or pollution control processes producing the waste, Xes INo tions, is attached.						
c.		ion submitted are confidential, the substantiation for D Yes D No X N/A described in the instructions, is attached.						
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE						
		1. PROCESSING OR DISPOSAL FACILITY(IES)						
The	area below (ad.) will accomm	nodate the identification of two facilities. Attach additional sheets if necessary.						
a.	Solid waste permit number 0008451	r(s) for processing or disposal facility being utilized.						
<b>)</b> .	Facility Name	Sunbury Generation Wastewater Treatment Facility						
	Address Line 1	Old Trail Road (P.O. BOX 517)						
	Address Line 1							
	Address City State ZIP Municipality	Shamokin Dam         PA         17876           Shamokin Dam         County         Snyder						
-								
	Facility Contact Name Title	Sheldon Kowaleski						
	Phone	(570) 884-1235 Email Address						
ł.	Volume of waste shipped t 205	to processing or disposal facility in the previous year.						
1.	Solid waste permit number 101508	r(s) for processing or disposal facility being utilized.						
o	Facility Name	PA Brine						
	Address Line 1	5148 US 322						
	Address Line 1							
	Address City State ZIP	Franklin PA 16323						
	Municipality	Franklin County Venango						
	Facility Contact Name	Elton DeLong						
	Title	(04.0) 407.0500 Free! Address 14.00 4.1						
	Phone	(814) 437-3593 Email Address info@pabrine.com						
4.	Volume of waste shipped to 64	to processing or disposal facility in the previous year.						
		2. BENEFICIAL USE						
ı.	Has the waste been approv If "Yes", list the general pe	ved for beneficial use?  Yes X No ermit number or approval number.						
<b>)</b> .		Ily used in the previous year.						
		cu yd gal b ton (check one)						

		3. PROCESS DESCRIPTION					-
a.	A detailed description of the manufacturing and/or pollution control processes producing Yes No the waste, as specified in the instructions, is attached.						
b.	A schematic of the manufa as specified in the instruct		ontrol processes produ	ucing the waste,	Yes		No
o.	If portions of the informati a confidentiality claim, as			for 🗌 Yes	No No		N/A
	SEC	TION C. MANAGEM	ENT OF RESIDU	AL WASTE			
-		1. PROCESSING OR	DISPOSAL FACILITY (IES	3)			
The	area below (ad.) will accomm	nodate the identification of	two facilities. Attach	additional sheets	if necessary		-
a.	Solid waste permit number MDD980555189	r(s) for processing or disp	osal facility being utiliz	zed.			
<b>b</b> .	Facility Name	Clean Harbors of Ba	Itimore				
	Address Line 1	1910 Russell St					
	Address Line 1 Address City State ZIP	Delline	110	01000			
	Municipality	Baltimore	MD County	21230		_	-
-		Baltimore	County				_
	Facility Contact Name Title						_
	Phone	410-244-8200	Email Address				-
_						_	
4.	Volume of waste shipped t 44	o processing or disposal cu yd gal	acility in the previous ☐ Ib ⊠ ton	year. (check one	)		
a.	Solid waste permit number 0102784	(s) for processing or disp	osal facility being utiliz	ed.			
),	Facility Name	Waste Treatment Co	rp. Warren County			-	
	Address Line 1	341 Harmar Street					
	Address Line 1						
	Address City State ZIP	Warren	PA	16365			
	Municipality	Warren	County	Warren			
5.	Facility Contact Name	Rich Gorton					
2.	Title						
		Rich Gorton (814) 726-1500	Email Address	info@waste-trea	tment.net		-
	Title	(814) 726-1500					
	Title Phone Volume of waste shipped t	(814) 726-1500 o processing or disposal f	facility in the previous	year.			
). J.	Title Phone Volume of waste shipped t	(814) 726-1500 o processing or disposal f cu yd gal 2. BEN	facility in the previous	year.			No
J.	Title Phone Volume of waste shipped t 19 Has the waste been approv	(814) 726-1500 o processing or disposal f cu yd gal 2. BEN red for beneficial use?	facility in the previous	year.	)		No
J.	Title Phone Volume of waste shipped t 19	(814) 726-1500 o processing or disposal f cu yd gal 2. BEN red for beneficial use? rmit number or approval r	facility in the previous Ib X ton EFICIAL USE number.	year.	)		No

Rep obta know	oort and all attached do aining the information, wledge. I understand th	cuments I verify nat the s	SECTION D. CERTIFICATION have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Che	ck the following, if applic	able:	
	I certify the informati		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the informati		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	-	
	I certify the information for the year and		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		Other (specify)
Nam	Date Submitted: ne of Responsible Officia	-	Other (specify)



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

	ust be fully and accurate				USE ONLY
each attach	bly printed in the spaces p ed sheet as Form 26R, r he date on attached sheets	eference the item num	ber and identify the da		ved & General Notes
General Refe	erence 287.54				
Date Prepare	ed/Revised Febr	uary 11, 2011			
	SECTION A. (	CLIENT (GENERATO	R OF THE WASTE) IN	<b>IFORMATION</b>	
Company Na Talisman Er	ame hergy USA Inc.				
If a Subsidia	ry, Name of Parent Compa	ny		- TT (1.5)	Generator ID#
Talisman Er				N/A	
50 Pennwoo	ailing Address Line 1		Company Mailing Addres	ss Line 2	
and the second se	Idress Last Line - City	State PA	Zip+4 15086	Phone (724) 814-53	Ext
Company Co	ontact Last Name	First Name	MI	(724) 014-55 Suff	
Brown Municipality Warrendale		Dina	County Allegheny		
Contact Pho	ne Ext	Contact Email Address	Allegheny		
(724) 814-53		dybrown@talismanusa.	.com		
If 'No', descr natural gas at tanks onsite.		ration and storage. Was pad site in Armenia Town	ste is generated during the ship, Bradford County, P		nporarily stored in
Municipality	Armenia	County Brad		State	PA
Residual		al Waste	TE DESCRIPTION	Unit of	Time
Waste Code		scription	Amount	Measure	Frame
802	Brine and Wastewater		81	□ cuyd	One Time
		1. GENERAL	PROPERTIES		
a. pHR		to 7	(based on analyses or k	nowledge)	
b. Phys	ical State	Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper	095)		
c. Phys		Color <u>Translucent y</u> Number of Solid or Liqu Describe each phase of	id Phases of Separation	i i jai o con o ci i	
		2. CHEMICAL ANALY			
	esults of a detailed chemic actions, is attached.	cal characterization of th	e waste, as described ir	the	Yes 🗌 No
	ailed description of the wa			$\boxtimes$	Yes 🗌 No
attac				-	Yes 🗌 No
100 C C C C C C C C C C C C C C C C C C	esults of the hazardous wa	Constant of the second s			Yes 🗌 No
	licable, a detailed explana of actual chemical analysis		enerator knowledge in	Yes	No 🛛 N/A

		3. PROCESS D	ESCRIPTION	& SCHEM	ATIC ATTA	CHMENT	S		-		-
a.	A detailed description of the the waste, as specified in t				ntrol proc	esses p	roducing		Yes		No
b.		A schematic of the manufacturing and/or pollution control processes producing the waste, Xes No as specified in the instructions, is attached.									
2.	If portions of the information a confidentiality claim, as a					on for	Yes		No		N/A
	SEC	TION C. MA	NAGEM	ENT OF	RESID	UAL W	ASTE	~~~		-	
-			ESSING OR							-	
The	area below (ad.) will accomm	odate the iden	tification of	two faciliti	es. Attac	h additio	onal sheets	if neo	cessary	1.	
a.	Solid waste permit number 101508	(s) for process	ing or dispo	sal facility	being uti	lized.					
b.	Facility Name	PA Brine									
	Address Line 1	5148 US 3	322								
	Address Line 1	-						-			
	Address City State ZIP Municipality	Franklin Franklin			A ounty	Mana	16323				
_		I C AD MONT		U	ounty	Vena	ngo	-			_
с,	Facility Contact Name Title	Elton DeL	ong								
	Phone	(814) 437-	3503	Email 4	ddress	info@	pabrine.co	m			-
4.	Volume of waste shipped to	1 /			A MANAGER AND A MANAGER		pabrine.co	iu.			-
			gal		to to		(check one	)			
1.	Solid waste permit number	(s) for process	ing or dispo	sal facility	being uti	lized.					
b.	Facility Name				-			-			
	Address Line 1							-			-
	Address Line 1										
	Address City State ZIP										
-	Municipality			C	ounty						
c.	Facility Contact Name								_		
	Title										
	Phone			Email A	ddress						
ł.	Volume of waste shipped to	cu yd	r disposal fa	icility in th	e previou		(check one)				
-			2. BENE	FICIAL USE		-					
3.	Has the waste been approv	ed for beneficia							Yes	X	No
	If "Yes", list the general pe			umber.				-		-	
<b>)</b> .	Volume of waste beneficial										-
		_ cu yd	gal	□ lb	T to	n	(check one)				

		SECTION D. CERTIFICATION
Rep obta knov	ort and all attached doc ining the information, I wledge. I understand tha	at I have personally examined and am familiar with the information submitted in this Annua ents and that based upon my inquiry of those individuals immediately responsible for rify that the submitted information is true, accurate and complete to the best of m he submission of false information herein is made subject to the penalties of 18 Pa. C.S cation to authorities, which include fine and imprisonment.
Che	ck the following, if applica	e:
	I certify the informatio	equired in Section B-1, General Properties was supplied to the Department for the yea
	Form Submitted:	Form 26R
		Other (specify)
	Date Submitted:	
	I certify the informatio and has not cha	equired in Section B-2, Chemical Analysis was supplied to the Department for the yea
	Form Submitted:	Form 26R
		Other (specify)
	Date Submitted:	
	I certify the information for the year and	quired in Section B-3, Process Description and Schematic, was supplied to the Departmen a not changed.
	Form Submitted:	Form 26R
		Other (specify)
	Date Submitted:	
Nam	e of Responsible Official	Title Environmental Specialist
Dina	Brown	1.
Sign	ature	5162 Date 2/25/4



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed each	or legil attache	d sheet as Form 26R,	tely completed. All required provided. If additional s reference the item num its needs to match the dat	pace is necessary, identi ber and identify the da	fy Date	DEP U Received	Contractor Street	NLY neral Notes
Gene	ral Refe	rence 287.54						
Date	Prepare	d/Revised Fe	bruary 11, 2011					
		SECTION A.	CLIENT (GENERATO	R OF THE WASTE) IN	FORMAT	ION		
	bany Na							
		ergy USA Inc. y, Name of Parent Comp	anv			FPA C	Genera	ator ID#
Talisr	man En	ergy Inc.	, any			N/A		
1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	and the second second	lling Address Line 1	(	Company Mailing Address	s Line 2			
and a contract to the second	ennwoo	d Place dress Last Line – City	State	Zip+4	Phone			Ext
	endale		PA	15086	(724) 81	14-530	0	
Brow		ntact Last Name	First Name Dina	MI		Suffix		
	cipality			County				
	endale act Phor	e Ext	Contact Email Address	Allegheny			_	
	814-53	-	dybrown@talismanusa	.com				
			ny Mailing Address (noted	above)?			Yes	No No
	, descri al gas at	be location of waste ger	Deration and storage. Was	ste is generated during the	drilling, comp	is temp	and pr	oduction of
tanks	onsite.			and the second sec				30000111
Munic	cipality	Troy	County Brad		Stat	e	PA	
Pee	idual	Pasid	SECTION B. WAS	TE DESCRIPTION	Unit of		-	Time
	e Code	2100010	Description	Amount	Measure			Frame
802		Brine and Wastewate			] cu yd [	] gal	Π	One Time
			1. GENERAL		110 6	3 1011		One mile
a.	pH Ra		to 7	(based on analyses or known	owledge)			
b.	Physic	cal State	Liquid Waste (EPA M Solid (EPA Method 9 Gas (ambient temper	095)				
C.	Physic	cal Appearance	Color Translucenty Number of Solid or Liqu Describe each phase of	id Phases of Separation	Hydroca One	arbon		
	-		2. CHEMICAL ANALY			-	-	
a.		sults of a detailed chem ctions, is attached.	ical characterization of th		the		res	No No
b.			vaste sampling method is	attached.	-	N	res	No
c.	The quattach		control procedures emplo	oyed by the laboratory(ies	s) is		res	No No
d.	The re	sults of the hazardous	vaste determination is att	274272			res	No No
e.		icable, a detailed explar actual chemical analys	ation supporting use of g is is attached.	enerator knowledge in	Yes		Vo	N/A

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS	-						
a.	A detailed description of the manufacturing and/or pollution control processes producing Xes No the waste, as specified in the instructions, is attached.								
b.		A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.							
c.		ion submitted are confidential, the substantiation for Yes No described in the instructions, is attached.	⊠ N/A						
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE							
	and the second second second	1. PROCESSING OR DISPOSAL FACILITY(IES)							
The	area below (ad.) will accomm	modate the identification of two facilities. Attach additional sheets if necessary.							
a.	Solid waste permit numbe MDD980555189	er(s) for processing or disposal facility being utilized.							
b.	Facility Name	Clean Harbors of Baltimore							
	Address Line 1	1910 Russell St							
	Address Line 1								
	Address City State ZIP	Baltimore MD 21230							
	Municipality	Baltimore County							
c.	Facility Contact Name								
	Title								
	Phone	410-244-8200 Email Address							
d.	Volume of waste shipped t 641	to processing or disposal facility in the previous year.							
a.	Solid waste permit number 101508	er(s) for processing or disposal facility being utilized.							
b.	Facility Name	PA Brine							
	Address Line 1	5148 US 322							
	Address Line 1								
	Address City State ZIP	Franklin PA 16323							
-	Municipality	Franklin County Venango							
c.	Facility Contact Name	Elton DeLong							
	Title								
	Phone	(814) 437-3593 Email Address info@pabrine.com							
d.	Volume of waste shipped t 299	to processing or disposal facility in the previous year.							
u.									
u.		2. BENEFICIAL USE							
a.	Has the waste been approv		No No						
-		ved for beneficial use?	No No						
-	If "Yes", list the general pe		No No						

		-	SECTION D. CERTIFICATION
Repo obta know	ort and all attached docu ining the information, I wledge. I understand tha	verify t the s	have personally examined and am familiar with the information submitted in this Annual is and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Chee	ck the following, if applica	ble:	
	I certify the information and has not char		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information and has not char		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information for the year and I		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
Nam	e of Responsible Official		Title Environmental Specialist
Dina	Brown		14
Sign	ature Sh	31	52 Date 2/25/9



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed each	or legil attache	ust be fully and accura oly printed in the spaces d sheet as Form 26R, e date on attached shee	fy Date Receive	DEP USE ONLY Date Received & General Notes		
		rence 287.54				
			bruary 11, 2011			
				OR OF THE WASTE) IN	FORMATION	
Comp	any Na					
		ergy USA Inc.				
		y, Name of Parent Comp	bany		and a carter	Generator ID#
		ergy Inc. Iling Address Line 1		Company Mailing Addres	N/A	
	ennwoo			company maning radies	J LINC L	
		dress Last Line - City	State	Zip+4	Phone	Ext
Autor Service	endale		PA	15086	(724) 814-530	
Brown		ntact Last Name	First Name Dina	MI	Suffi	c
	ipality		Dina	County		
	endale			Allegheny		
100000000	ict Phon	NES CENTRAL	Contact Email Address			
	814-53		dybrown@talismanusa ny Mailing Address (noted			Yes 🛛 No
If 'No' natura	, descri al gas at	be location of waste ger	D well pad site located at 9	ste is generated during the 58 Tennessee Gas Road, 1	drilling, completion,	and production of
	ipality	Troy	County Brac	iford	State	PA
			SECTION B. WAS	TE DESCRIPTION		
	idual	210,217	ual Waste		Unit of	Time
Waste	e Code	Code D	Description	Amount	Measure	Frame
802		Brine and Wastewate	r	/05	]cuyd []gal ]lb ⊠ton	One Time
			1. GENERAL	- I to		I La one nine
a.	pH Ra	nge 6	to 7	(based on analyses or kn	owledge)	
b.	Physic	cal State	Liquid Waste (EPA N Solid (EPA Method 9 Gas (ambient tempe	0095)		
C.	Physic	cal Appearance	Color Translucent Number of Solid or Liqu Describe each phase of	id Phases of Separation	Hydrocarbon One	
a.		sults of a detailed chem ctions, is attached.	2. CHEMICAL ANAL nical characterization of the	YSIS ATTACHMENTS he waste, as described in	the 🛛	Yes No
b.			vaste sampling method is	attached.		Yes No
c.		uality assurance/quality		oyed by the laboratory(ie:		Yes No
d.			waste determination is at	tached.	$\boxtimes$	Yes 🗌 No
e.		icable, a detailed explan	nation supporting use of g	generator knowledge in	Yes	No 🛛 N/A

		3. PROCESS DESCRIPTION			X Yes		-
a.	A detailed description of the manufacturing and/or pollution control processes producing the waste, as specified in the instructions, is attached.						No
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, as specified in the instructions, is attached.						No
	If portions of the information submitted are confidential, the substantiation for Yes a confidentiality claim, as described in the instructions, is attached.				No No		N/A
	SEC	TION C. MANAGEME	ENT OF RESID	UAL WASTE			
		1. PROCESSING OR D					
The	area below (ad.) will accomm	odate the identification of	two facilities. Attac	ch additional sheets	if necessary	у.	
1.	Solid waste permit number(s) for processing or disposal facility being utilized. MDD980555189						
b.	Facility Name	Clean Harbors of Balt	imore				
	Address Line 1 Address Line 1	1910 Russell St					
	Address City State ZIP	Baltimore	MD	21230			
	Municipality	Baltimore	County				
с.	Facility Contact Name Title						-
	Phone	410-244-8200	Email Address				
	Volume of waste shipped t 84	o processing or disposal fa	cility in the previou				
l	Solid waste permit number 0008451	(s) for processing or dispo	sal facility being ut	ilized.			
).	Facility Name	Sunbury Generation V	Vastewater Treatm	nent Facility			
	Address Line 1	Old Trail Road (P.O. E	3OX 517)			-	
	Address Line 1						
	Address City State ZIP	Shamokin Dam	PA	17876		_	
	Municipality	Shamokin Dam	County	Snyder		-	
с.	Facility Contact Name Title	Sheldon Kowaleski					
	Phone	(570) 884-1235	Email Address				
	Volume of waste shipped to 621	processing or disposal fa	cility in the previou				
-		2. BENE	FICIAL USE			-	
۱.							No
<b>)</b> .	Volume of waste beneficial			n (check one)		-	-

SECTION	D.	CERTIFICATION
	Sec. 1.	WEIGHT IV/ LIVIN

	and the second second second		ocontono, ocninatorittori
Repo obta knov	ort and all attached docu ining the information, I vledge. I understand tha	verify t the s	have personally examined and am familiar with the information submitted in this Annual is and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Chee	ck the following, if applica	ble:	
	I certify the information and has not char		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information and has not char		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information for the year and I		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	_	
Nam	e of Responsible Official		Title Environmental Specialist
Dina	Brown		10 11
Sign	ature Aha	5	USn Date 2/2.5/4



### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed each	or legit attache	ust be fully and accurate bly printed in the spaces p d sheet as Form 26R, re e date on attached sheets	rovided. If additional s ference the item num	pace is necessary, ident ber and identify the da	ify Da	DEP L te Receive	NAME OF A	ONLY eneral Notes
Gener	ral Refe	rence 287.54						
Date F	Prepare	d/Revised Febru	ary 11, 2011				_	
5	-	SECTION A. C	LIENT (GENERATO	R OF THE WASTE) IN	FORMA	TION		
	any Na		a series and the series of the					
		ergy USA Inc.				EDA		ator ID#
		y, Name of Parent Compan ergy Inc.	y .			N/A	sener	ator ID#
		ling Address Line 1	(	Company Mailing Addres	s Line 2	13074		
50 Pe	ennwood	d Place						
	and the second s	dress Last Line – City	State	Zip+4	Phon		1	Ext
	endale	staat ( ant Mana	PA First Name	15086	(724)	814-530		
Brown		ntact Last Name	Dina	MI		Suffix		
	ipality			County				
	endale			Allegheny				
	ct Phon		ontact Email Address					
the second s	814-53		ybrown@talismanusa.					57 N
		enerated at the Company be location of waste gener			drilling co		Yes	No No
	l gas at			ws Hollow Road, Jackson				
waste	is tempo	prarily stored in tanks onsite.						
Munic	ipality	Jackson	County Tioga		S	tate	PA	1
				TE DESCRIPTION				
	idual	Residual	1 3 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		Unit			Time
waste	e Code	Code Des	cription	Amount	Meas cuyd	gal gal	-	Frame
802		Brine and Wastewater		21		⊠ ton		One Time
			1. GENERAL	PROPERTIES	-	had they		
a.	pH Ra	nge 6	to 7	(based on analyses or kr	nowledge)			
b.	Physic	cal State	Liquid Waste (EPA M Solid (EPA Method 90 Gas (ambient tempera	)95)				
C.	Physic	al Appearance C	olor Translucent y	ellow/brown Odor	Hydro	carbon		
		N	umber of Solid or Liqui	d Phases of Separation	One			
		D	escribe each phase of :	separation. Liquid				
-			2 CUENICH AND	ATTACHMENTS	-			
2	The re	sults of a detailed chemica	2. CHEMICAL ANALY		the	Ø	Vec	□ No
a.	instru	ctions, is attached.			uio			
b.		iled description of the was				Brand .	Yes	No No
C.	The quattach	ality assurance/quality co ed.	ntrol procedures emplo	oyed by the laboratory(ie	s) is		Yes	No No
d.		sults of the hazardous was	ste determination is atta	ached.		X	Yes	□ No
e.		icable, a detailed explanati actual chemical analysis i		enerator knowledge in	Yes		No	N/A

		3. PROCESS DESCRIPT		NGES WITH TRACE.						
a.	A detailed description of the manufacturing and/or pollution control processes producing X Yes I No the waste, as specified in the instructions, is attached.									
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.									
c.	If portions of the information a confidentiality claim, as a			ion for 🗌 Yes		No		N/A		
	SEC	TION C. MANAGE	MENT OF RESID	UAL WASTE						
			OR DISPOSAL FACILITY							
The	area below (ad.) will accomm	odate the identification	of two facilities. Atta	ch additional sheets	if neo	cessary	1.			
a.	Solid waste permit number 0102784	(s) for processing or di	sposal facility being u	tilized.						
b.	Facility Name Waste Treatment Corp Warren County									
	Address Line 1	341 West Harmar	Street							
	Address Line 1			10005	_	_		-		
	Address City State ZIP Municipality	Warren	PA County	16365 Warren						
-			County	warren	_			_		
3.	Facility Contact Name Title	Rich Gorton								
	Phone	(814) 726-1500	Email Address	info@waste-trea	tmen	t net				
d.	Volume of waste shipped t			-	interio			-		
	21	🗌 cu yd 🔄 gal	🗌 lb 🖾 t		)					
a.	Solid waste permit number	(s) for processing or di	sposal facility being u	tilized.						
b.	Facility Name									
<b>.</b> .	Address Line 1				-					
	Address Line 1				-		-	-		
	Address City State ZIP							-		
	Municipality		County							
c.	Facility Contact Name									
	Title									
	Phone		Email Address							
d.	Volume of waste shipped to	o processing or dispos		us year. on (check one	)					
-		2 B	ENEFICIAL USE					-		
a.	Has the waste been approv				П	Yes		No		
	If "Yes", list the general pe		al number.		-					
-	Volume of waste beneficial									
b.	volume of waste beneficial	ly used in the previous	year.							

	and the second	-	SECTION D. CERTIFICATION
Rep obta know	ort and all attached doc ining the information, I wledge. I understand tha	uments verify it the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Che	ck the following, if applica	ble:	
	I certify the information		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	-	
	I certify the information and has not char		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	_	
	I certify the information for the year and		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
Nam	e of Responsible Official		Title Environmental Specialist
Dina	Brown		
Sign	lature the	31	52 Date 2/25/4
		0	



#### DEPARTMENT OF ENVIRONMENTAL PROTECTION DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

		ust be fully and accurate bly printed in the spaces				DEP I	and the second	NLY eneral Notes
each	attache	d sheet as Form 26R, r e date on attached sheets	eference the item num	ber and identify the da			1.446.4	
Gene	ral Refe	rence 287.54						
Date	Prepare	d/Revised Febr	uary 11, 2011					
		SECTION A. (	CLIENT (GENERATO	R OF THE WASTE) IN	FORMA	TION		
	bany Nai	me ergy USA Inc.						
		y, Name of Parent Compa	iny			EPA	Gener	ator ID#
		ergy Inc.				N/A		
	ennwoo	iling Address Line 1	(	Company Mailing Addres	ss Line 2			
Comp	any Ad	dress Last Line - City	State	Zip+4	Phone	B	-	Ext
and the second se	endale		PA	15086	(724)	814-530		
Brow		ntact Last Name	First Name Dina	MI		Suffix		
Munio	cipality		Pilla	County				
	endale		0	Allegheny				
1000000000	814-53		Contact Email Address dybrown@talismanusa.	com				
Is the	waste g	enerated at the Company	Mailing Address (noted	above)?			Yes	No No
		be location of waste gene	ration and storage. Was	te is generated during the	drilling, co	mpletion,	and p	roduction of
	al gas at prarily sto	ored in tanks onsite.	pad site located at 1021	Kelly Road, Troy Townshi	o, Bradford	County, I	PA. 11	he waste is
	cipality	Troy	County Brad	ford	S	tate	PA	
			SECTION B. WAS	TE DESCRIPTION	-			
	idual e Code		al Waste scription	Amount	Unit Meas			Time Frame
1.2.3.1	ecoue	The second se	scription	286	_ cu yd	gal	1	riame
802		Brine and Wastewater			lb	🖾 ton		One Time
-	pH Ra	nge 6	1. GENERAL	PROPERTIES (based on analyses or ki	anuladaa)			
a. b.			Liquid Waste (EPA M		iowieuge)		-	
			Solid (EPA Method 90 Gas (ambient temper	095)				
C.	Physic	cal Appearance	Color Translucent y	Contraction and the second states and the	r Hydro	carbon	-	
			Number of Solid or Liqu	id Phases of Separation	One			
			Describe each phase of	separation. Liquid			_	
			2. CHEMICAL ANALY	SIS ATTACHMENTS	-		-	
a.		sults of a detailed chemic ctions, is attached.	cal characterization of th	e waste, as described in	the		Yes	No No
b.	A deta	iled description of the wa	AND A REAL PROPERTY AND A DECISION OF THE ACCURATE ACCURATE AND A DECISION OF THE ACCURATE ACCURA	AND DECEMBED		$\boxtimes$	Yes	No No
c.	The quattach	uality assurance/quality c ed.	ontrol procedures emplo	oyed by the laboratory(ie	s) is		Yes	No No
d.		sults of the hazardous wa	aste determination is att	ached.		X	Yes	No
е.		icable, a detailed explana		AND COLORED	T Yes		100	N/A

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS						
a.	A detailed description of the manufacturing and/or pollution control processes producing Yes No the waste, as specified in the instructions, is attached.							
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.							
C.		ion submitted are confidential, the substantiation for D Yes D No X N/A described in the instructions, is attached.						
	SEC	TION C. MANAGEMENT OF RESIDUAL WASTE						
		1. PROCESSING OR DISPOSAL FACILITY(IES)						
The	area below (ad.) will accomn	nodate the identification of two facilities. Attach additional sheets if necessary.						
a.	Solid waste permit number 0008451	r(s) for processing or disposal facility being utilized.						
b.	Facility Name	Sunbury Generation Wastewater Treatment Facility						
	Address Line 1 Address Line 1	Old Trail Road, P.O. BOX 517						
	Address City State ZIP	Shamokin Dam PA 17876						
	Municipality	Shamokin Dam County Snyder						
2.	Facility Contact Name Title	Sheldon Kowaleski						
	Phone	(570) 884-1235 Email Address						
d.	Volume of waste shipped t 261	to processing or disposal facility in the previous year.						
a.	Solid waste permit number 101508	r(s) for processing or disposal facility being utilized.						
b.	Facility Name	PA Brine						
	Address Line 1	5148 US 322						
	Address Line 1							
	Address City State ZIP	Franklin PA 16323						
	Municipality	Franklin County Venango						
C.	Facility Contact Name	Elton DeLong						
	Title							
	Dhana	(014) 107 0500 Email Address into Onchring com						
	Phone	(814) 437-3593 Email Address info@pabrine.com						
		(814) 437-3593 Email Address info@pabrine.com to processing or disposal facility in the previous year. Cu yd gal b K ton (check one)						
	Volume of waste shipped t	to processing or disposal facility in the previous year.						
d. a.	Volume of waste shipped t 25 Has the waste been approv	to processing or disposal facility in the previous year.  Cuyd Gal Beneficial Use Ved for beneficial use? Cutoficial use Cutof						
1.	Volume of waste shipped t 25 Has the waste been approv If "Yes", list the general pe	to processing or disposal facility in the previous year.  Cuyd Cuyd Cuyd Cuyd Cuyd Cuyd Cuyd Cuy						

			SECTION D. CERTIFICATION
Rep obta know	ort and all attached doc ining the information, I wledge. I understand tha	uments verify at the s	have personally examined and am familiar with the information submitted in this Annual is and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my ubmission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Che	ck the following, if applica	ble:	
	I certify the informatio		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the informatio and has not cha	1	ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information for the year and		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
Nam	e of Responsible Official		Title Environmental Specialist
Dina	Brown		11
Sign	lature An	S	Date 2/25/4
		0	



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed each	or legit attache	d sheet as Form 26R	es provided. If additional	quired information must b space is necessary, identit mber and identify the dat ate noted below.	fy Date Receive	USE ONLY ed & General Note	es
Gene	ral Refe	rence 287.54					
Date I	Prepare	d/Revised F	ebruary 11, 2011				
-		SECTION A	. CLIENT (GENERAT	OR OF THE WASTE) INI	ORMATION		
	any Na	me					
		ergy USA Inc.					
		y, Name of Parent Con	npany			Generator ID#	
		ergy Inc. iling Address Line 1		Company Mailing Address	N/A		
	ennwood			Company Maning Address	Line L		
		dress Last Line - City	State	Zip+4	Phone	Ext	-
Warre	endale		PA	15086	(724) 814-530		
		ntact Last Name	First Name	Mi	Suffi	¢	
Brown			Dina				
	ipality endale			County Allegheny			
and the second second second	ct Phon	e Ext	Contact Email Address				
	814-53		dybrown@talismanus				
If 'No'	, descri	be location of waste ge		ad above)? aste is generated during the mas Lane, Troy Township, Br	drilling, completion,	and production	
	l gas at	bred in tanks onsite.	bad site located at 257 Thoi	mas Lane, Troy Township, Br	adiord County, PA	. The waste is	
	ipality	Troy	County Bra	dford	State	PA	
			SECTION B. WA	STE DESCRIPTION			
Res	idual	Resi	dual Waste		Unit of	Time	
Waste	Code	Code	Description	Amount	Measure	Frame	-
802		Brine and Wastewat	ter	93	] cu yd	One Tin	no
0			1. GENERA	L PROPERTIES			ne
a.	pH Ra	nge 6		(based on analyses or know	owledge)		
b.		cal State	Liquid Waste (EPA Solid (EPA Method Gas (ambient temp	9095)			
с.	Physic	cal Appearance		t yellow/brown Odor juid Phases of Separation	Hydrocarbon One		
			Describe each phase o	a separation. Liquid			
		1		LYSIS ATTACHMENTS			
a.	instru	ctions, is attached.		the waste, as described in		_	10
b.			waste sampling method				lo
C.	attach	ed.		bloyed by the laboratory(ies	i) is 🛛	Yes 🗌 N	10
d.		A MILLING OF THE REAL PROPERTY OF	s waste determination is a				lo
е.		icable, a detailed expla	anation supporting use of	generator knowledge in	Yes	No 🛛 N	I/A

		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS						
a.		e manufacturing and/or pollution control processes producing Xes he instructions, is attached.						
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.							
<b>.</b>		on submitted are confidential, the substantiation for Yes No lescribed in the instructions, is attached.	N N					
	SECT	TION C. MANAGEMENT OF RESIDUAL WASTE						
		1. PROCESSING OR DISPOSAL FACILITY(IES)						
The	area below (ad.) will accomm	odate the identification of two facilities. Attach additional sheets if necessa	ry.					
a.	Solid waste permit number 0008451	(s) for processing or disposal facility being utilized.						
<b>b</b> .	Facility Name	Sunbury Generation Wastewater Treatment Facility						
	Address Line 1	Old Trail Road						
	Address Line 1	P.O. Box 517						
	Address City State ZIP	Shamokin Dam PA 17876						
	Municipality	Shamokin Dam County Snyder						
	Facility Contact Name Title	Sheldon Kowaleski						
	Phone	(570) 884-1235 Email Address						
d.	Volume of waste shipped to 93	p processing or disposal facility in the previous year.						
a.	Solid waste permit number	(s) for processing or disposal facility being utilized.						
b.	Facility Name							
	Address Line 1							
	Address Line 1							
	Address City State ZIP							
	Municipality	County						
C.	Facility Contact Name							
	Title							
	Phone	Email Address						
d.	Volume of waste shipped to	processing or disposal facility in the previous year.						
		2. BENEFICIAL USE						
а.	Has the waste been approv	ed for beneficial use? Yes	No No					
	If "Yes", list the general pe	mit number or approval number.						
b.		ly used in the previous year.						
		cuyd gal b ton (check one)						

	and and a loss		SECTION D. CERTIFICATION
Repo obta knov	ort and all attached docu ining the information, I vledge. I understand that	uments verify t the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Chee	ck the following, if applica	ble:	
	I certify the information and has not char		ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:	_	
	I certify the information and has not char		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information for the year and I		ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
Nam	e of Responsible Official		Title Environmental Specialist
Dina	Brown	~	10
Sign	ature AL	5	Date 7/25/4
-			

ΤΑΙΙΣΜΑΝ

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TALISMAN ENERGY USA INC. 50 Pennwood Place Warrendale, Pennsylvania 15086 Tel: (724) 814-5300 Fax: (724) 814-5301

February 28, 2011

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N

Pennsylvania Department of Environmental Protection Northcentral Regional Office Bureau of Waste Management 208 W. 3rd Street, Suite 101 Williamsport, PA 17701

RE: Submittal of Form 26R Chemical Analysis of Residual Waste Annual Report by the Generator for 2010

To Whom It May Concern:

Please find enclosed Talisman Energy USA Inc.'s Form 26R Chemical Analysis of Residual Waste Annual Report by the Generator for 2010. Should you have any questions or comments concerning our reports please do not hesitate to contact me at (724) 814-5321 or dybrown@talismanusa.com.

Sincerely,

Stone

Dina E. Brown Environmental Specialist

Enclosures

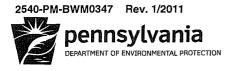


#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed each	or legil attache	ust be fully and accura oly printed in the spaces d sheet as Form 26R, e date on attached shee	ntify Date Receiv	USE ONLY ed & General Notes		
Gener	al Refe	rence 287.54				
Date F	Prepare	<b>d/Revised</b> Fel	oruary 11, 2011			
		SECTION A.	<b>CLIENT</b> (GENERATOR	R OF THE WASTE)	NFORMATION	
	any Na					······································
		ergy USA Inc.				
		y, Name of Parent Comp ergy Inc.	any		N/A	Generator ID#
		ling Address Line 1	C	ompany Mailing Addre		
		d Place	0	ompany maning Addit		
		dress Last Line – City	State	Zip+4	Phone	Ext
	endale		PA	15086	(724) 814-530	
Comp	any Co	ntact Last Name	First Name	MI	Suffi	x
Browr			Dina			
	ipality			County		
Warre	endale ct Phon	e Ext	Contact Email Address	Allegheny		
	814-53		dybrown@talismanusa.c	om		
			y Mailing Address (noted a		П	Yes 🛛 No
			eration and storage. Wast		compressors at the	
Statela	and Com	pressor Station site locate	ed at 374 Fellows Creek Roa	ad in Ward Township, Ti	oga County, PA. The	waste is
		red in tanks onsite.				
Munic	inality	Ward	County Tioga		State	PA
widine	ipanty	vvalu	¥	E DESCRIPTION		
Resi	dual	Residu	al Waste		Unit of	Time
Waste			escription	Amount	Measure	Frame
808		Servicing Fluid, Oil/wa		93	🗌 cu yd 🗌 gal	
				<u> </u>	🗌 lb 🛛 ton	One Time
	- U Da		1. GENERAL P to 7		(nouvlodgo)	
a,	pH Ra	nge 6 cal State	F-1	(based on analyses or l	knowledge)	<u> </u>
b.	Fliysic	al State	Liquid Waste (EPA Me			
			Gas (ambient tempera			
с.	Physic	al Appearance	Color translucent yel		or hydrocarbon	
•••			Number of Solid or Liquic			
			Describe each phase of s	•		
			•		·····	
, , See		n - an Champion Anna an	2. CHEMICAL ANALYS		ang na shin gang ayay ana a sa	·····
а.		sults of a detailed chem ctions, is attached.	ical characterization of the	e waste, as described i	n the	Yes 🛛 No
b.	A deta	iled description of the w	aste sampling method is a	attached.		Yes 🛛 No
с.		ality assurance/quality	control procedures employ		ies) is	Yes 🛛 No
d.			aste determination is atta	ched.	$\square$	Yes No
e.			ation supporting use of ge			No N/A
		actual chemical analysi		0		

·····		······································	······································				
3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS							
а.	A detailed description of the the waste, as specified in the			esses producing	X Yes	No No	
b.	A schematic of the manufacturing and/or pollution control processes producing the waste, X Yes No as specified in the instructions, is attached.						
C.	a confidentiality claim, as described in the instructions, is attached.						
	SECTI	ON C. MANAGEME					
	·	1. PROCESSING OR DI					
L	rea below (ad.) will accommo			_	if necessary		
а.	Solid waste permit number(s 8-0728-00004/00013	) for processing or dispos	al facility being util	ized.			
b.	Facility Name	Chemung County Land	Ifill				
	Address Line 1	1690 Lake Street					
	Address Line 1						
	Address City State ZIP	Elmira	NY	14903			
	Municipality	Elmira City	County	Chemung			
c.	Facility Contact Name	Carla Canjar					
	Title	Environmental Manage	r				
	Phone	(585) 797-5941	Email Address	carla.canjar@cas	sella.com		
d.	Volume of waste shipped to p	rocessing or disposal fac	ility in the previous				
a.	Solid waste permit number(s) PA301344	for processing or dispos	al facility being utili	ized.			
b.	Facility Name	Environmental Recover	v Corporation of P	ZA			
	Address Line 1	1076 Old Manheim Pike					
	Address Line 1				·····		
	Address City State ZIP	Lancaster	PA	17601			
	Municipality	City of Lancaster	County	Lancaster			
с.	Facility Contact Name	Terry Leatherman					
	Title	General Manager					
	Phone	(717) 393-2627	Email Address	info@ercofpa.com	m		
d.	Volume of waste shipped to p	rocessing or disposal fac	ility in the previous	year.			
	69	cu yd 🗌 gal [	lb 🛛 ton				
		2. BENEFI	CIAL USE				
а.	Has the waste been approved	for beneficial use?			Yes	No No	
	If "Yes", list the general perm						
b.	Volume of waste beneficially	used in the previous year.	] lb [] ton	(check one)			
	•••••••						

Report and all attached documents and that based upon my inquiry of those individuals immediately responsible for						
SECTION D. CERTIFICATION I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this Annual Report and all attached documents and that based upon my inquiry of those individuals immediately responsible for obtaining the information, I verify that the submitted information is true, accurate and complete to the best of my knowledge. I understand that the submission of false information herein is made subject to the penalties of 18 Pa. C.S. §4904, relating to unsworn falsification to authorities, which include fine and imprisonment.						
Check the following, if applicable:						
I certify the information required in Section B-1, General Properties was supplied to the Department for the year and has not changed.						
Form Submitted: Form 26R						
Other (specify)						
Date Submitted:						
I certify the information required in Section B-2, Chemical Analysis was supplied to the Department for the year and has not changed.						
Form Submitted:  Form 26R						
Other (specify)						
Date Submitted:						
I certify the information required in Section B-3, Process Description and Schematic, was supplied to the Department for the year and has not changed.						
Form Submitted:						
Other (specify)						
Date Submitted:						
Name of Responsible Official Title Environmental Specialist						
Dina Brown						
Signature A Star Date 2(25/11						



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed or each at	This form must be fully and accurately completed. All required information must b typed or legibly printed in the spaces provided. If additional space is necessary, identif each attached sheet as Form 26R, reference the item number and identify the dat prepared. The date on attached sheets needs to match the date noted below.					USE ONLY ed & General Notes
General	l Refer	rence 287.54				
Date Pre	epared	<b>J/Revised</b> Fe	bruary 11, 2011			
		SECTION A.	<b>CLIENT</b> (GENERATOF	R OF THE WASTE)	FORMATION	
Compar	ny Nan			· · · · · · · · · · · · · · · · · · ·	- realization and and address and	······································
		ergy USA Inc.				
		y, Name of Parent Com	pany			Generator ID#
		ergy Inc.	~		<u>N/A</u>	
50 Penr		ling Address Line 1	C	ompany Mailing Addre	ss Line 2	
		Iress Last Line – City	State	Zip+4	Phone	Ext
Warren		iless Last Line - Oity	PA	15086	(724) 814-530	
		ntact Last Name	First Name	MI	Suffix	
Brown			Dina			
Municip				County		·····
Warren				Allegheny		
Contact			Contact Email Address			
(724) 81			dybrown@talismanusa.c			V 57 N
			ny Mailing Address (noted a neration and storage. <u>Wast</u>			Yes 🛛 No
<u>II NO, U</u>	Comp	ressor Station located at	193 Buckwheat Road, Troy T	ownship Bradford Cour	nty, PA. The waste is	s temporarily stored
in tanks			Too Buokimbat Hoad, Hoy I	ennenp, Diadiora oca		s tomportainy otorou
		_	<b>e</b>		<b>e</b>	
Municip	ality	Troy	County Bradfo		State	PA
			SECTION B. WAST			
Residu	ual	Resid	SECTION B. WAST	E DESCRIPTION	Unit of	Time
Residu Waste C	ual	Resid Code I	SECTION B. WAST ual Waste Description	E DESCRIPTION Amount	Unit of Measure	
Residu	ual	Resid	SECTION B. WAST ual Waste Description	E DESCRIPTION	Unit of Measure cu yd gal	Time Frame
Residu Waste C	ual	Resid Code I	SECTION B. WAST ual Waste Description	E DESCRIPTION Amount 327	Unit of Measure □ cu yd □ gal	Time
Residu Waste C 808	ual	Resid Code I Servicing Fluid, Oil/wa	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P	E DESCRIPTION Amount 327	Unit of Measure Cuyd gal Ib X ton	Time Frame
Residu Waste C 808 a. p	ual Code pH Rai	Resid Code I Servicing Fluid, Oil/wa	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k	Unit of Measure Cuyd gal Ib X ton	Time Frame
Residu Waste C 808 a. p	ual Code pH Rai	Resid Code D Servicing Fluid, Oil/wa	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P to 7 to 7 Liquid Waste (EPA Me Solid (EPA Method 905	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k thod 9095) 95)	Unit of Measure Cuyd gal Ib X ton	Time Frame
Residu Waste C 808 a. p	ual Code pH Rai	Resid Code D Servicing Fluid, Oil/wa	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P to 7 X Liquid Waste (EPA Me	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k thod 9095) 95)	Unit of Measure Cuyd gal Ib X ton	Time Frame
Residu Waste C 808 a. p b. F	ual Code pH Rai Physic	Resid Code D Servicing Fluid, Oil/wa	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperal Color translucent yel	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) low/brown Odd	Unit of Measure U cu yd gal Ib d ton nowledge)	Time Frame
Residu Waste C 808 a. p b. F	ual Code pH Rai Physic	Resid Code D Servicing Fluid, Oil/wa nge 6 cal State	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 908 Gas (ambient temperat Color translucent yel Number of Solid or Liquid	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) low/brown Odc Phases of Separation	Unit of Measure Cuyd gal Ib X ton nowledge)	Time Frame
Residu Waste C 808 a. p b. F	ual Code pH Rai Physic	Resid Code D Servicing Fluid, Oil/wa nge 6 cal State	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperal Color translucent yel	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) low/brown Odc Phases of Separation	Unit of Measure Cuyd gal Ib X ton nowledge)	Time Frame
Residu Waste C 808 a. p b. F	ual Code pH Rai Physic	Resid Code D Servicing Fluid, Oil/wa nge 6 cal State	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat Color translucent yel Number of Solid or Liquid Describe each phase of so	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) low/brown Odc Phases of Separation eparation. Liquid and	Unit of Measure Cuyd gal Ib X ton nowledge)	Time Frame
Residu Waste C 808 a. p b. F c. F	ual Code PH Rai Physic Physic	Resid Code D Servicing Fluid, Oil/wa nge 6 cal State cal Appearance	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat Color translucent yel Number of Solid or Liquid Describe each phase of so	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) low/brown Odc Phases of Separation eparation. Liquid and GIS ATTACHMENTS	Unit of Measure Cu yd gal Ib X ton nowledge)	Time Frame
Residu Waste C 808 a. p b. F c. F	ual Code PH Rai Physic Physic	Resid Code D Servicing Fluid, Oil/wa nge 6 cal State cal Appearance sults of a detailed chem	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat Color translucent yel Number of Solid or Liquid Describe each phase of so	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) low/brown Odc Phases of Separation eparation. Liquid and GIS ATTACHMENTS	Unit of Measure Cu yd gal Ib X ton nowledge)	Time Frame
Residu Waste C 808 a. p b. F c. F	ual Code PH Rai Physic Physic	Resid Code D Servicing Fluid, Oil/wa nge 6 cal State cal Appearance sults of a detailed chem ctions, is attached.	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat Color translucent yel Number of Solid or Liquid Describe each phase of so	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) low/brown Odc Phases of Separation eparation. Liquid and SIS ATTACHMENTS waste, as described in	Unit of Measure Unit of Measure gal gal ton ton Hydrocarbon 2 Solid n the	Time Frame
Residu Waste C 808 a. p b. F c. F a. T ji b. A c. T	ual Code PH Ran Physic Physic The rea instruc A deta	Resid Code D Servicing Fluid, Oil/wa nge 6 al State al Appearance sults of a detailed cheme tions, is attached. iled description of the v vality assurance/quality	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat Color translucent yel Number of Solid or Liquid Describe each phase of so 2. CHEMICAL ANALYS hical characterization of the	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) low/brown Odd Phases of Separation eparation. Liquid and GIS ATTACHMENTS waste, as described in ttached.	Unit of Measure Unit of Measure gal gal ton nowledge) or Hydrocarbon 2 Solid n the	Time         Frame         One Time         One Time         Yes         No
Residu Waste C 808 a. p b. F c. F a. T i b. A c. T a	ual Code pH Ran Physic Physic The rea instruct A deta The quattache	Resid Code I Servicing Fluid, Oil/wa nge 6 al State al Appearance sults of a detailed cheme tions, is attached. iled description of the v vality assurance/quality ed.	SECTION B. WAST ual Waste Description ater emulsion 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color translucent yel Number of Solid or Liquid Describe each phase of se 2. CHEMICAL ANALYS hical characterization of the waste sampling method is a	E DESCRIPTION Amount 327 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) low/brown Odd Phases of Separation eparation. Liquid and GIS ATTACHMENTS waste, as described in ttached. yed by the laboratory(i	Unit of Measure Uure gal Uure gal Uure gal Model ton Model t	Time         Frame         Image: One Time         Image: One Time         Yes         Yes         No         Yes         Yes

			·····			
		3. PROCESS DESCRIPTIO				
a.	A detailed description of th			esses producing	X Yes	No No
	the waste, as specified in the	ne instructions, is attach	ed.			
b.	A schematic of the manufa	cturing and/or pollution	control processes pro	ducing the waste.	X Yes	□ No
	as specified in the instructi					
	If portions of the information		utial the automatematicalia			
c.	a confidentiality claim, as d			n for 🔲 Yes	No No	N/A
L	-					
	SECT	ION C. MANAGEN				
1			R DISPOSAL FACILITY			
The a	rea below (ad.) will accomm	odate the identification of	of two facilities. Attach	n additional sheets	if necessary	•
a.	Solid waste permit number	s) for processing or disp	oosal facility being util	ized.		
	08-0728-00004/00013					
b.	Facility Name	Chemung County La	andfill			
	Address Line 1	1690 Lake Street				
	Address Line 1					
	Address City State ZIP	Elmira	NY	14903		
	Municipality	Elmira	County	Chemung		
	Facility Contact Name	·····			·····	
с.	Title	Carla Canjar				
		Environmental Mana 585-797-5941	Email Address			
	Phone			carla.canjar@ca	sella.com	
d.	Volume of waste shipped to			s year.		
	165 l	cuydgal	🔄 lb 🛛 tor	ı (check one)		
a.	Solid waste permit number(	s) for processing or disp	oosal facility being util	ized.		
	PA301344					
b.	Facility Name	Environmental Reco	overy Corporation of F	ΡΔ		
	Address Line 1	10760 Old Manheim		<u> </u>		
	Address Line 1					
	Address City State ZIP	Lancaster	PA	17601		
	Municipality	City of Lancaster	County	Lancaster		
с.	Facility Contact Name	Terry Leatherman				
Ç.	Title	General Manager	······································			
	Phone	717-393-2627	Email Address	info@ercofpa.co		
				•		
d.	Volume of waste shipped to					
	162 L	🗋 cu yd 🔲 gal	🗌 lb 🛛 tor	(check one)		
		2. BEN	IEFICIAL USE			
a.	Has the waste been approve	d for beneficial use?			Yes	🛛 No
	If "Yes", list the general per	mit number or approval	number.			
b.	Volume of waste beneficial					
	]	] cuyd 📋 gal	🗌 lb 🗌 tor	(check one)		

SECTION D. CERTIFICATION							
I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this Annual Report and all attached documents and that based upon my inquiry of those individuals immediately responsible for obtaining the information, I verify that the submitted information is true, accurate and complete to the best of my knowledge. I understand that the submission of false information herein is made subject to the penalties of 18 Pa. C.S. §4904, relating to unsworn falsification to authorities, which include fine and imprisonment.							
Check the following, if appli	cable:						
I certify the informat		ired in Section B-1, General Properties was supplied to the Department for the year					
Form Submitted:		Form 26R					
		Other (specify)					
Date Submitted:							
I certify the informat	-	ired in Section B-2, Chemical Analysis was supplied to the Department for the year					
Form Submitted:		Form 26R					
		Other (specify)					
Date Submitted:	<u></u>						
I certify the information for the year and	•	ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.					
Form Submitted:		Form 26R					
		Other (specify)					
Date Submitted:							
Name of Responsible Officia	I	Title Environmental Specialist					
Dina Brown							
Signature	- M	Date 2/25/1/					



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed each	This form must be fully and accurately completed. All required information must be typed or legibly printed in the spaces provided. If additional space is necessary, identifieach attached sheet as Form 26R, reference the item number and identify the date prepared. The date on attached sheets needs to match the date noted below.					USE ONLY ed & General Notes	
Gener	al Refe	rence 287.54	······				
Date P	repare	<b>d/Revised</b> Feb	oruary 11, 2011				
	SECTION A. CLIENT (GENERATOR OF THE WASTE) INFORMATION						
	any Nai					·····	
		ergy USA Inc.				-	
		y, Name of Parent Comp	any			Generator ID#	
		ergy Inc.	<u> </u>		N/A		
		ling Address Line 1 d Place	C	ompany Mailing Addre	ess Line 2		
		dress Last Line - City	State	Zip+4	Phone	Ext	
Warre		arooo Luot Line only	PA	15086	(724) 814-530		
		ntact Last Name	First Name	MI	Suffi		
Brown	-		Dina				
Munici				County			
Warre				Allegheny			
1	t Phon		Contact Email Address				
	314-53		dybrown@talismanusa.c y Mailing Address (noted a		······		
			eration and storage. Wast			Yes 🛛 No	
ii NO,	Comp	ressor Station located at 1	614 Watkins Hill Road, Colu	umbia Township, Bradfo	rd County, PA, The	waste is temporarily	
stored	in tanks				<u></u>	Table to temperativy	
Munici	pality	<ul> <li>Columbia</li> </ul>	County Bradfo	ord	State	РА	
			SECTION B. WAST	<b>E DESCRIPTION</b>		······································	
Resid	dual	Residu	al Waste	T	Unit of	Time	
Waste	Code	Code D	escription	Amount	Measure	Frame	
808		Servicing Fluid, Oil/wa	ter emulsion	31	□ cu yd □ gal		
		· · ·	1. GENERAL P		🗌 lb 🛛 ton	One Time	
a.	pH Ra	nge 6		(based on analyses or l	(nowledge)		
а. b.	-	al State	Liquid Waste (EPA Me		(nowledge)		
<b>D</b> .	Thysic		Solid (EPA Method 90				
			Gas (ambient tempera	•			
с.	Physic	al Appearance	Color translucent ye		or hydrocarbon		
			Number of Solid or Liquid				
			Describe each phase of s	eparation. Liquid and	Solid		
						······	
			2. CHEMICAL ANALYS				
а.	instruc	tions, is attached.	cal characterization of the		n the	Yes 🛛 No	
b.			aste sampling method is a			Yes 🛛 No	
с.	The quattach		control procedures employ	yed by the laboratory(	ies) is	Yes 🛛 No	
d.	The re	sults of the hazardous w	aste determination is atta	ched.	$\boxtimes$	Yes 🗌 No	
е.		cable, a detailed explant actual chemical analysis	ation supporting use of ge	enerator knowledge in	Yes	No 🗌 N/A	

		3. PROCESS DESCRIPTION				
a.	A detailed description of th the waste, as specified in the			esses producing	🗙 Yes	No No
b.	A schematic of the manufac as specified in the instructi	cturing and/or pollution co ons, is attached.	ontrol processes pro	ducing the waste,	🛛 Yes	🗌 No
C.	If portions of the informatio a confidentiality claim, as d			n for 🔲 Yes	No No	N/A
	SECT	ION C. MANAGEM	ENT OF RESIDU	JAL WASTE		······
		1. PROCESSING OR	DISPOSAL FACILITY(IE	ES)		<u> </u>
The a	area below (ad.) will accomm	odate the identification of	two facilities. Attach	n additional sheets i	f necessary	
a.	Solid waste permit number( 8-0728-00004/00013	s) for processing or disp	osal facility being util	ized.		
b.	Facility Name	Chemung County La	ndfill			
	Address Line 1	1690 Lake Street				
	Address Line 1					
	Address City State ZIP	Elmira	NY	14903		
	Municipality	Elmira City	County	Chemung	<u></u>	
с.	Facility Contact Name	Carla Canjar				······································
	Title	Environmental Mana	der			······
	Phone	585-797-5941	Email Address	carla.canjar@cas	ella.com	
d.	Volume of waste shipped to 9	cuyd gal	🗌 lb 🛛 tor	n (check one)		
a.	Solid waste permit number( PA301344	s) for processing or dispo	osal facility being util	ized.		
b.	Facility Name	Environmental Recov	very Corporation of F	PA		
	Address Line 1	1076 Old Manheim P				
	Address Line 1					
	Address City State ZIP	Lancaster	PA	17601		· · · · · · · · · · · · · · · · · · ·
	Municipality	City of Lancaster	County	Lancaster		
C.	Facility Contact Name	Terry Leatherman				· · · · · · · · · · · · · · · · · · ·
	Title	General Manager				
	Phone	717-393-2627	Email Address	info@ercofpa.con	n	
d.	Volume of waste shipped to	processing or disposal f	acility in the previous	year.		
	22	cuyd gal	🗌 İb 🛛 ton			
	······································		FICIAL USE			······································
a.	Has the waste been approve	d for beneficial use?			Yes	No No
	If "Yes", list the general per					
b.	Volume of waste beneficiall	<b>/ used in the previous ye</b> a cu yd gal	a <b>r.</b>	(check one)		

SECTION D. CERTIFICATION						
I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this Annu Report and all attached documents and that based upon my inquiry of those individuals immediately responsible f obtaining the information, I verify that the submitted information is true, accurate and complete to the best of n knowledge. I understand that the submission of false information herein is made subject to the penalties of 18 Pa. C. §4904, relating to unsworn falsification to authorities, which include fine and imprisonment.						
Check the following, if applicable:						
I certify the information required in Section B-1, General Properties was supplied to the Department for the ye and has not changed.						
Form Submitted: Gram 26R						
Other (specify)						
Date Submitted:						
I certify the information required in Section B-2, Chemical Analysis was supplied to the Department for the ye and has not changed.						
Form Submitted:  Form 26R						
Other (specify)						
Date Submitted:						
I certify the information required in Section B-3, Process Description and Schematic, was supplied to the Departme for the year and has not changed.						
Form Submitted: Gran Form 26R						
Other (specify)						
Date Submitted:						
Name of Responsible Official Title Environmental Specialist						
Dina Brown						
Signature Date 2/2.5/11						



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#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed each	or legit attache	ust be fully and accurat bly printed in the spaces d sheet as Form 26R, r e date on attached sheet	t <b>ify</b> Date R	DEP USE C eceived & Ge			
Gener	al Refe	rence 287.54					
Date P	repare	d/Revised Feb	ruary 11, 2011				
		SECTION A.	CLIENT (GENERATOR	R OF THE WASTE)	IFORMATIC	ON	
	any Nar						
		ergy USA Inc. y, Name of Parent Compa	anv			EPA Gener	ator ID#
Talism	nan Ene	ergy Inc.				N/A	
		ling Address Line 1	Co	ompany Mailing Addre	ss Line 2		-
		d Place dress Last Line – City	State	Zip+4	Phone		Ext
Warre			PA	15086	(724) 814	4-5300	
		ntact Last Name	First Name	MI		Suffix	······································
Brown Munici			Dina	County			
Warre				Allegheny			
Contac	ct Phon		Contact Email Address				
(724) 8	814-53	21	dybrown@talismanusa.c				<u> </u>
			y Mailing Address (noted a eration and storage. Waste		drilling compl	Yes Yes	No No
	gas at t	the 01-01	6 well pad site located at 12	42 Swamp Road, Armer	nia Township, B	radford Cou	inty, PA.
The		<u>'' ' '' '' '</u>					
		emporarily stored in tanks of		. 1	<b>C</b> 4-4-		
I ne wa Munici		Armenia	County Bradfo		State	PA	
Munici	pality	Armenia	County Bradfo			PA	Time
	pality dual	Armenia Residu	County Bradfo		State Unit of Measure	PA	Time Frame
Munici Resid	pality dual	Armenia Residu	County Bradfo SECTION B. WAST al Waste	E DESCRIPTION	Unit of Measure cu yd	gal	Frame
Munici Resid Waste	pality dual	Armenia Residu Code De	County Bradfo SECTION B. WAST al Waste scription	E DESCRIPTION Amount 64	Unit of Measure cu yd		
Munici Resid Waste	pality dual	Armenia Residu Code De Brine and Wastewater	County Bradfc SECTION B. WAST al Waste scription 1. GENERAL P	E DESCRIPTION Amount 64	Unit of Measure Cu yd	gal	Frame
Munici Resid Waste 802	pality dual Code pH Ra	Armenia Residu Code De Brine and Wastewater	County Bradfc SECTION B. WAST al Waste escription 1. GENERAL P to 7 X Liquid Waste (EPA Me	E DESCRIPTION Amount 64 ROPERTIES (based on analyses or k thod 9095)	Unit of Measure Cu yd	gal	Frame
Munici Resid Waste 802 a.	pality dual Code pH Ra	Armenia Residu Code De Brine and Wastewater nge 6	County Bradfo SECTION B. WAST al Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 905	E DESCRIPTION Amount 64 ROPERTIES (based on analyses or k thod 9095) 95)	Unit of Measure Cu yd	gal	Frame
Munici Resid Waste 802 a. b.	pality dual Code pH Ra Physic	Armenia Residu Code De Brine and Wastewater nge 6 cal State	County Bradfc SECTION B. WAST al Waste sscription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat	E DESCRIPTION Amount 64 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure)	Unit of Measure	gal ton	Frame
Munici Resid Waste 802 a.	pality dual Code pH Ra Physic	Armenia Residu Code De Brine and Wastewater nge 6 cal State	County Bradfo SECTION B. WAST al Waste sscription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent ye	E DESCRIPTION Amount 64 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) ellow/brown Odo	Unit of Measure	gal ton	Frame
Munici Resid Waste 802 a. b.	pality dual Code pH Ra Physic	Armenia Residu Code De Brine and Wastewater nge 6 cal State	County Bradfc SECTION B. WAST al Waste sscription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat	E DESCRIPTION Amount 64 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) Ellow/brown Odo Phases of Separation	Unit of Measure	gal ton	Frame
Munici Resid Waste 802 a. b.	pality dual Code pH Ra Physic	Armenia Residu Code De Brine and Wastewater nge 6 cal State	County       Bradfc         SECTION B. WAST         al Waste         escription         1. GENERAL P         to         To         X         Liquid Waste (EPA Me         Solid (EPA Method 909         Gas (ambient temperat         Color       Translucent yee         Number of Solid or Liquid         Describe each phase of so	E DESCRIPTION Amount 64 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) ellow/brown Odo Phases of Separation eparation. Liquid	Unit of Measure	gal ton	Frame
Munici Resid Waste 802 a. b. c.	pality dual Code pH Ra Physic	Armenia Residu Code De Brine and Wastewater nge 6 cal State	County Bradfc SECTION B. WAST al Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent yee Number of Solid or Liquid Describe each phase of so 2. CHEMICAL ANALYS	E DESCRIPTION Amount 64 COPERTIES (based on analyses or k thod 9095) 05) ture & pressure) ellow/brown Odo Phases of Separation eparation. Liquid GIS ATTACHMENTS	Unit of Measure cu yd lb nowledge) r <u>Hydrocar</u> One	gal ton	Frame One Time
Munici Resid Waste 802 a. b.	pality dual Code pH Ra Physic Physic	Armenia Residu Code De Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chemic ctions, is attached.	County       Bradfc         SECTION B. WAST         al Waste         ascription         1. GENERAL P         to         To         X         Liquid Waste (EPA Me         Solid (EPA Method 909         Gas (ambient temperat         Color       Translucent yet         Number of Solid or Liquid         Describe each phase of solid         2. CHEMICAL ANALYS         cal characterization of the	E DESCRIPTION Amount 64 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) ellow/brown Odo Phases of Separation eparation. Liquid SIS ATTACHMENTS waste, as described in	Unit of Measure cu yd lb nowledge) r <u>Hydrocar</u> One	gal ton	Frame One Time
Munici Resid Waste 802 a. b. c. a. b.	pality dual Code pH Ra Physic Physic The re instruc A deta	Armenia Residu Code De Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chemic ctions, is attached. iled description of the wa	County       Bradfo         SECTION B. WAST         al Waste         ascription         1. GENERAL P         to         To         X         Liquid Waste (EPA Me         Solid (EPA Method 909         Gas (ambient temperat         Color       Translucent yet         Number of Solid or Liquid         Describe each phase of solid         2. CHEMICAL ANALYS         cal characterization of the         aste sampling method is a	E DESCRIPTION Amount 64 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) ellow/brown Odo Phases of Separation eparation. Liquid BIS ATTACHMENTS waste, as described in ttached.	Unit of Measure	gal ton	Frame One Time One Time No No
Munici Resid Waste 802 a. b. c. c.	pality dual Code pH Ra Physic Physic The re instruc A deta The qu	Armenia Residua Code De Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chemic ctions, is attached. iled description of the wa nality assurance/quality c	County       Bradfc         SECTION B. WAST         al Waste         ascription         1. GENERAL P         to         To         X         Liquid Waste (EPA Me         Solid (EPA Method 909         Gas (ambient temperat         Color       Translucent yet         Number of Solid or Liquid         Describe each phase of solid         2. CHEMICAL ANALYS         cal characterization of the	E DESCRIPTION Amount 64 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) ellow/brown Odo Phases of Separation eparation. Liquid BIS ATTACHMENTS waste, as described in ttached.	Unit of Measure	gal ton	Frame One Time
Munici Resid Waste 802 a. b. c. a. b.	pality dual Code pH Ra Physic Physic The re instruc A deta The qu attache	Armenia Residu Code De Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chemic ctions, is attached. iled description of the wa nality assurance/quality c	County       Bradfo         SECTION B. WAST         al Waste         ascription         1. GENERAL P         to         To         X         Liquid Waste (EPA Me         Solid (EPA Method 909         Gas (ambient temperat         Color       Translucent yet         Number of Solid or Liquid         Describe each phase of solid         2. CHEMICAL ANALYS         cal characterization of the         aste sampling method is a	E DESCRIPTION Amount 64 64 ROPERTIES (based on analyses or k thod 9095) 65) ture & pressure) ellow/brown Odo Phases of Separation eparation. Liquid GIS ATTACHMENTS waste, as described in ttached. red by the laboratory(ie	Unit of Measure	gal ton	Frame One Time One Time No No

·····		
		3. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS
a.	A detailed description of the the waste, as specified in the	e manufacturing and/or pollution control processes producing X Yes No ne instructions, is attached.
b.	A schematic of the manufac as specified in the instruction	cturing and/or pollution control processes producing the waste, X Yes No ons, is attached.
C.		n submitted are confidential, the substantiation for Yes No N/A escribed in the instructions, is attached.
	SECT	ION C. MANAGEMENT OF RESIDUAL WASTE
The	area below (ad.) will accomm	1. PROCESSING OR DISPOSAL FACILITY(IES) odate the identification of two facilities. Attach additional sheets if necessary.
a.	Solid waste permit number( 101508	s) for processing or disposal facility being utilized.
b.	Facility Name	PA Brine
	Address Line 1	5148 US 322
	Address Line 1	0170 00 022
	Address City State ZIP	Franklin PA 16323
	Municipality	Franklin County Venango
	· · ·	
с.	Facility Contact Name	Elton DeLong
	Title	
	Phone	(814) 437-3593 Email Address info@pabrine.com
d.	Volume of waste shipped to	processing or disposal facility in the previous year.
	64	cuyd 🗌 gal 🗍 lb 🛛 ton (check one)
	Calid waste nermit number	s) for processing or disposal facility being utilized.
a.	Sond waste permit number(	s) for processing of disposal facility being dunzed.
b.	Facility Name	
	Address Line 1	
	Address Line 1	
	Address City State ZIP	
	Municipality	County
c.	Facility Contact Name	
	Title	
	Phone	Email Address
d.	Volume of waste shipped to	processing or disposal facility in the previous year.
<b>u</b> .	[	cuyd gal b ton (check one)
		2. BENEFICIAL USE
а.	Has the waste been approve	
		mit number or approval number.
b.	Volume of waste beneficially	
υ.		cuyd gal b ton (check one)
	L	

SECTION D. CERTIFICATION						
I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this Annual Report and all attached documents and that based upon my inquiry of those individuals immediately responsible for obtaining the information, I verify that the submitted information is true, accurate and complete to the best of my knowledge. I understand that the submission of false information herein is made subject to the penalties of 18 Pa. C.S. §4904, relating to unsworn falsification to authorities, which include fine and imprisonment.						
Check the following, if applicable						
I certify the information re and has not change	equired in Section B-1, General Properties was supplied to the Department for the year d.					
Form Submitted:	Form 26R					
	Other (specify)					
Date Submitted:						
I certify the information re and has not change	equired in Section B-2, Chemical Analysis was supplied to the Department for the year d.					
Form Submitted:	Form 26R					
[	Other (specify)					
Date Submitted:						
I certify the information rec for the year and has	uired in Section B-3, Process Description and Schematic, was supplied to the Department not changed.					
Form Submitted:	_ Form 26R					
[	Other (specify)					
Date Submitted:						
Name of Responsible Official	Title Environmental Specialist					
Dina Brown						
Signature	Date 2/25/11					



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

This form must be fully and accurately completed. All required information must be typed or legibly printed in the spaces provided. If additional space is necessary, identify each attached sheet as Form 26R, reference the item number and identify the date prepared. The date on attached sheets needs to match the date noted below.					tify Date Receive	USE ONLY ed & General Notes
Genei	ral Refe	rence 287.54				
Date I	Prepare	d/Revised Feb	oruary 11, 2011			
		SECTION A.	<b>CLIENT</b> (GENERATOR	R OF THE WASTE)	FORMATION	
	any Na					
		ergy USA Inc. y, Name of Parent Comp	anv		EPA	Generator ID#
Talisr	nan En	ergy Inc.	-		N/A	
		ling Address Line 1	C	ompany Mailing Addre	ess Line 2	
		d Place dress Last Line – City	State	Zip+4	Phone	Ext
	endale	aress Last Line – Oity	PA	15086	(724) 814-530	
		ntact Last Name	First Name	MI	Suffi	
Brown			Dina	County		
	ipality endale			Allegheny		
	ct Phon	e Ext	Contact Email Address	wegneny		
	814-53		dybrown@talismanusa.c			
			y Mailing Address (noted a eration and storage. <u>Wast</u>			Yes No
	l gas at t		R well pad site located at 12			
The wa	aste is te	emporarily stored in tanks	onsite.			
Munic	ipality	Columbia	County Bradfo		State	PA
Beel	dual	Pacida	SECTION B. WAST	E DESCRIPTION	Unit of	Time
Waste			escription	Amount	Measure	Frame
802		Brine and Wastewater		23	🗌 cu yd 🗌 gal	
			1. GENERAL P	l [	☐ lb 🛛 ton	One Time
a.	pH Ra	nge 6		(based on analyses or k	(nowledge)	
b.		cal State	Liquid Waste (EPA Me			
			Solid (EPA Method 909			
			Gas (ambient tempera	and the second		······
С.	Physic	al Appearance	Color Translucent ye Number of Solid or Liquid		119 41 0 0 41 0 0 11	
			•	•		
Describe each phase of separation. Liquid						
-			2. CHEMICAL ANALYS			
а.	instruc	ctions, is attached.	cal characterization of the		······	Yes 🗌 No
b.			aste sampling method is a			Yes 🗌 No
c.	The quattach		control procedures employ	yed by the laboratory(i	es) is 🛛 🖂	Yes 🗌 No
d.			aste determination is atta	ched.	$\boxtimes$	Yes 🗌 No
e.		icable, a detailed explant actual chemical analysi	ation supporting use of ge s is attached.	nerator knowledge in	Yes	No 🛛 N/A

	······································					
		. PROCESS DESCRIPTIO				
a.	A detailed description of the			esses producing	🛛 Yes	No
b.	A schematic of the manufac as specified in the instruction		ontrol processes pro	oducing the waste,	X Yes	No No
C.	If portions of the information a confidentiality claim, as de			on for 🗌 Yes	No No	N/A
	SECT	ION C. MANAGEN	a na ser series and a faite d'an air séan tha féan an an ann an an an an an an an an an	an a sur contra la sur		
			DISPOSAL FACILITY			NA ANA ANA ANA ANA ANA ANA ANA ANA ANA
The	area below (ad.) will accommo	date the identification o	f two facilities. Attac	h additional sheets	if necessary	1.
a.	Solid waste permit number( 101508	s) for processing or disp	osal facility being ut	ilized.		
b.	Facility Name	PA Brine				
	Address Line 1	5148 US 322				
	Address Line 1					
	Address City State ZIP	Franklin	PA	16323		
	Municipality	Franklin	County	Venango		
с.	Facility Contact Name	Elton DeLong			<u> </u>	·
0.	Title					
	Phone	(814) 437-3593	Email Address	info@pabrine.co		
d.	Volume of waste shipped to	processing or disposal	facility in the previou	•	<u> </u>	
	23				/	
a.	Solid waste permit number(s	s) for processing or disp	osal facility being uti	llized.		
b.	Facility Name		· · · · · · · · · · · · · · · · · · ·			
	Address Line 1					
	Address Line 1					
	Address City State ZIP					
	Municipality	<u></u>	County	· · · · · · · · · · · · · · · · · · ·		
с.	Facility Contact Name					
	Title					
	Phone	<u></u>	Email Address	<u></u>		
d.	Volume of waste shipped to	processing or disposal	facility in the proving			
a.		cu yd gal	b to	-	)	
		The second se	EFICIAL USE			
a.	Has the waste been approve	d for beneficial use?			Yes	No No
	If "Yes", list the general pern	nit number or approval r	number.			
b.	Volume of waste beneficially			n (check one	)	
	L_				/	

			SECTIO	N.D. CERTIFICAT	<b>FION</b>
Repo obtai knov	ort and all attached docuining the information, I	iments verify t the s	s and that based that the submit submission of fal	d upon my inquiry of tted information is tru lse information herein	iar with the information submitted in this Annual those individuals immediately responsible for ue, accurate and complete to the best of my is made subject to the penalties of 18 Pa. C.S. d imprisonment.
Chec	k the following, if applica	ble:			
	I certify the information	-	ired in Section E	3-1, General Properties	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
	I certify the information and has not chan	•	ired in Section E	3-2, Chemical Analysis	s was supplied to the Department for the year
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:				
	I certify the information for the year and h	•		8, Process Description	and Schematic, was supplied to the Department
	Form Submitted:		Form 26R		
			Other (specify)		
	Date Submitted:			· · · · · · · · · · · · · · · · · · ·	
Name	e of Responsible Official			Title	Environmental Specialist
Dina	Brown		10		
Signa	ature	$\frac{1}{2}$	15-	Date	2/2S/4
		0			



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typed each	l or legil attache	bly printed in the spaces of sheet as Form 26R,	tely completed. All requi provided. If additional sp reference the item numb ts needs to match the date	ace is necessary, iden er and identify the c	tify Date R	DEP USE ONLY eccived & General Notes
Gene	ral Refe	rence 287.54				
Date I	Prepare	d/Revised Feb	oruary 11, 2011			
		SECTION A.	<b>CLIENT</b> (GENERATOR	R OF THE WASTE)	NFORMATI	ON
	any Nai					
		ergy USA Inc. y, Name of Parent Comp	00V		· · · · · · · · · · · · · · · · · · ·	EPA Generator ID#
		ergy Inc.	any			N/A
		iling Address Line 1	C	ompany Mailing Addre		
50 Pe	ennwood	d Place				
		dress Last Line – City	State	Zip+4	Phone	Ext
	endale		PA	15086	(724) 814	
Browr		ntact Last Name	<b>First Name</b> Dina	MI		Suffix
	ipality			County		
	endale			Allegheny		
Conta	ct Phon	e Ext	Contact Email Address			
	814-53		dybrown@talismanusa.c			·
			y Mailing Address (noted a			🗌 Yes 🛛 No
	, descril I gas at t		eration and storage. <u>Wast</u> I well pad site located at 847			
		emporarily stored in tanks		Talibaliks Road, Colur	nbia rownsnip,	Bradiora County, PA.
	ipality	Columbia	County Bradfo	ord	State	PA
•			SECTION B. WAST	<b>E DESCRIPTION</b>		
Resi	idual	Residu	al Waste		Unit of	Time
Waste	e Code	Code D		Amount	Measure	-
802		Coue De	escription	Amount	and the second s	Frame
		Brine and Wastewater		1,884	🗌 cu yd 🔲	gal
				1,884	🗌 cu yd 🔲	
а.	pH Ra	Brine and Wastewater	1. GENERAL P	1,884	☐ cu yd ☐ ☐ lb   ⊠	gal
		Brine and Wastewater	1. GENERAL P	1,884 ROPERTIES (based on analyses or k	☐ cu yd ☐ ☐ lb   ⊠	gal
a.		Brine and Wastewater	1. GENERAL P         to       7         ⊠       Liquid Waste (EPA Me         ⊡       Solid (EPA Method 905)	1,884 ROPERTIES (based on analyses or k thod 9095) 95)	☐ cu yd ☐ ☐ lb   ⊠	gal
a.	Physic	Brine and Wastewater nge 6 cal State	1. GENERAL P         to       7         ☑       Liquid Waste (EPA Me         ☑       Solid (EPA Method 900)         ☑       Gas (ambient temperation)	<b>1,884</b> <b>ROPERTIES</b> (based on analyses or k thod 9095) 95) ture & pressure)	☐ cu yd ☐ ☐ lb   ⊠ :nowledge)	gal ton   Cone Time
a.	Physic	Brine and Wastewater	1. GENERAL P         to       7         Liquid Waste (EPA Me         Solid (EPA Method 900)         Gas (ambient temperation         Color       Translucent yet	1,884 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) Ellow/brown Odd	cu yd  lb  snowledge)  r Hydrocar	gal ton   Cone Time
a. b.	Physic	Brine and Wastewater nge 6 cal State	1. GENERAL P         to       7         Liquid Waste (EPA Me         Solid (EPA Method 909         Gas (ambient temperation         Color       Translucent yee         Number of Solid or Liquid	1,884 ROPERTIES (based on analyses or left thod 9095) 95) ture & pressure) ellow/brown Odd I Phases of Separation	cu yd  lb  snowledge)  r Hydrocar	gal ton   Cone Time
a. b.	Physic	Brine and Wastewater nge 6 cal State	1. GENERAL P         to       7         Liquid Waste (EPA Me         Solid (EPA Method 900)         Gas (ambient temperation         Color       Translucent yet	1,884 ROPERTIES (based on analyses or left thod 9095) 95) ture & pressure) ellow/brown Odd I Phases of Separation	cu yd  lb  snowledge)  r Hydrocar	gal ton   Cone Time
a. b.	Physic	Brine and Wastewater nge 6 cal State	1. GENERAL P         to       7         Liquid Waste (EPA Me         Solid (EPA Method 909         Gas (ambient temperation         Color       Translucent yet         Number of Solid or Liquid         Describe each phase of solid	1,884  ROPERTIES (based on analyses or left thod 9095) 95) ture & pressure) ellow/brown Odd I Phases of Separation eparation. Liquid	cu yd  lb  snowledge)  r Hydrocar	gal ton   Cone Time
a. b.	Physic Physic	Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chemi	1. GENERAL P         to       7         Liquid Waste (EPA Me         Solid (EPA Method 909         Gas (ambient temperation         Color       Translucent yee         Number of Solid or Liquid	1,884 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) Blow/brown Odd Phases of Separation eparation. Liquid SIS ATTACHMENTS	□ cu yd □ □ lb ⊠ nowledge) or One	gal ton   Cone Time
a. b. c.	Physic Physic The re instruc	Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chemi ctions, is attached.	1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent yet Number of Solid or Liquid Describe each phase of so 2. CHEMICAL ANALYS	1,884 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) How/brown Odd Phases of Separation eparation. Liquid SIS ATTACHMENTS waste, as described i	□ cu yd □ □ lb ⊠ nowledge) or One	gal ton [] One Time bon
a. b. c. a.	Physic Physic The re instruc A deta	Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chemi ctions, is attached. iled description of the w rality assurance/quality of	1. GENERAL P         to       7         Liquid Waste (EPA Me         Solid (EPA Method 90%         Gas (ambient temperation         Color       Translucent yet         Number of Solid or Liquid         Describe each phase of solid         2. CHEMICAL ANALYS         Ical characterization of the	1,884 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) Ellow/brown Odd Phases of Separation eparation. Liquid SIS ATTACHMENTS waste, as described i ttached.	□ cu yd □ □ lb ⊠ nowledge) or One  n the	gal ton  One Time bon Yes No
a. b. c. a. b.	Physic Physic The re instruc A deta The qu attach	Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chemi ctions, is attached. iled description of the w rality assurance/quality of ed.	1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent ye Number of Solid or Liquid Describe each phase of s 2. CHEMICAL ANALYS cal characterization of the aste sampling method is a	1,884 ROPERTIES (based on analyses or k thod 9095) 95) ture & pressure) Ellow/brown Odd Phases of Separation eparation. Liquid SIS ATTACHMENTS waste, as described i ittached. yed by the laboratory(i	□ cu yd □ □ lb ⊠ nowledge) or One  n the	gal ton  One Time bon Yes No Yes No

			8 Course Arres			
	A data la data a distriction of Al	3. PROCESS DESCRIPTION				
a.	A detailed description of the the waste, as specified in t			sses producing	🛛 Yes	🗌 No
b.	A schematic of the manufa as specified in the instruct		ontrol processes prod	ucing the waste,	Yes Yes	No No
c.	If portions of the information a confidentiality claim, as a	on submitted are confident lescribed in the instruction	tial, the substantiation ns, is attached.	for 🗌 Yes	🗌 No	N/A
	SEC	TION C. MANAGEM				
1a 		1. PROCESSING OR	DISPOSAL FACILITY(IES	S)		
The a	area below (ad.) will accomm	odate the identification of	two facilities. Attach	additional sheets	if necessary	-
a.	Solid waste permit number MDD980555189	(s) for processing or dispo	osal facility being utiliz	zed.		
b.	Facility Name	Clean Harbors of Bal	timore			
	Address Line 1	1910 Russell St			······································	
	Address Line 1			······································		
	Address City State ZIP	Baltimore	MD	21230		
	Municipality	Baltimore	County			
с.	Facility Contact Name					
0.	Title					
	Phone	410-244-8200	Email Address			
d.	Volume of waste shipped to	processing or disposal f	acility in the previous	year.		
	1884	cu yd gal	🗌 lb 🛛 ton	(check one)		
a.	Solid waste permit number	(s) for processing or dispo	osal facility being utiliz	zed.		
b.	Facility Name					
	Address Line 1	······································				······
	Address Line 1		······································			
	Address City State ZIP					
	Municipality	<u>-</u>	County			
с.	Facility Contact Name	· · · · · · · · · · · · · · · · · · ·				
0.	Title				<u></u>	
	Phone		Email Address			
d.	Volume of waste shipped to	<b>processing or disposal f</b> a	Ib   Item	year. (check one)		
		2. Bene	FICIAL USE			
a.	Has the waste been approv	ed for beneficial use?			Yes	No No
	If "Yes", list the general per	mit number or approval n	umber.			_
b.	Volume of waste beneficial					
		] cuyd [] gal	☐ lb ☐ ton	(check one)		
				, /		

			SECTION D. CERTIFICATION
Repo obtai know	rt and all attached docu ning the information, I ledge. I understand that	ument verify t the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Chec	k the following, if applical	ble:	
	I certify the information and has not chan	-	ired in Section B-1, General Properties was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information and has not chan	-	ired in Section B-2, Chemical Analysis was supplied to the Department for the year
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
	I certify the information for the year and h	•	red in Section B-3, Process Description and Schematic, was supplied to the Department of changed.
	Form Submitted:		Form 26R
			Other (specify)
	Date Submitted:		
Name	of Responsible Official		Title Environmental Specialist
Dina Signa	Brown ture	Ć.	Date 2/25/4

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#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

typec each	l or legil attache	bly printed in the space of sheet as Form 26R,	ately completed. All request provided. If additional sports reference the item numbers ats needs to match the date	bace is necessary, ider ber and identify the o	ntify Date Receiv	USE ONLY red & General Notes
Gene	ral Refe	rence 287.54				
Date	Prepare	d/Revised Fe	bruary 11, 2011			
r ₄ 24	· `. ·	SECTION A.	<b>CLIENT</b> (GENERATO	R OF THE WASTE) II	NFORMATION	
	oany Na					
		ergy USA Inc.				Compared to 10/1
		y, Name of Parent Comp ergy Inc.	Jany		N/A	Generator ID#
		iling Address Line 1	C	Company Mailing Addre		·····
	ennwoo					
		dress Last Line – City	State	Zip+4	Phone	Ext
	endale		PA	15086	(724) 814-53	
Brow	-	ntact Last Name	<b>First Name</b> Dina	MI	Suff	x
	ipality			County	ut	
	endale			Allegheny		
	ict Phon		Contact Email Address			
	814-53		dybrown@talismanusa.c			
			ny Mailing Address (noted			Yes 🛛 No
IT NO	, descri I das atr	the location of waste ger	eration and storage. <u>Wast</u> te located at 831 Burrows Ho	te is generated during the	e drilling, completion	, and production of
		ored in tanks onsite.	lo localea al cor Barlows ric		manp, noga count	, TA. The waste is
Munic	ipality	Jackson	County Tioga		State	PA
· · · · · · · · · · · · · · · · · · ·			SECTION B. WAST	<b>E DESCRIPTION</b>		
	idual		ual Waste		Unit of	Time
Waste	e Code	Code L	escription	Amount	Measure	Frame
802		Brine and Wastewate	r	25	<u> </u>	One Time
-7.	19. 19	- 6785, 58 m.	1. GENERAL P	ROPERTIES		
a.	pH Ra		to 7	(based on analyses or k	nowledge)	
b.	Physic	cal State	Liquid Waste (EPA Me			
			Solid (EPA Method 90			
	Dhuaid	al Annooronoo	Gas (ambient tempera			
C.	Filysic	al Appearance	Color <u>Translucent ye</u> Number of Solid or Liquid		11) 41 0 0 41 0 011	
			Describe each phase of s	•		
			Describe each phase of s			
	s. 4	š.,	2. CHEMICAL ANALYS	SIS ATTACHMENTS	:4	
a.	instruc	ctions, is attached.	ical characterization of the		n the	Yes 🗌 No
b.			aste sampling method is a		$\boxtimes$	Yes No
С.	The qu	ality assurance/quality	control procedures employ	and by the laboratory/i	es) is 🛛 🕅	Yes No
	attach		control procedures employ	yed by the laboratory(i		
d.	The re	ed. sults of the hazardous v	vaste determination is atta	ched.		Yes No

		<b>PROCESS DESCRIPTION &amp; S</b>				
a.	A detailed description of the the waste, as specified in the		ion control proce	esses producing	🛛 Yes	🗌 No
b.	A schematic of the manufacture as specified in the instruction		ol processes proc	ducing the waste,	🛛 Yes	🗌 No
C.	If portions of the information a confidentiality claim, as des			n for 📋 Yes	🗌 No	N/A
	SECTIO	DN C. MANAGEMEN 1. Processing or Disp	na ha shi ka sa sa kuta ying shekara shekara shekara shekara s	Contribution of the State of State of the		
The a	rea below (ad.) will accommod	ate the identification of two	facilities. Attach	n additional sheets	if necessary	•
a.	Solid waste permit number(s) 0102784	for processing or disposal	facility being util	ized.		
b.	Facility Name	Waste Treatment Corp. V	Warren County			·
	Address Line 1	341 West Harmar Street				
	Address Line 1					
	Address City State ZIP	Warren	PA	16365		
	Municipality	Warren	County	Warren		
C.	Facility Contact Name	Rich Gorton				
	Title					
	Phone	(814) 726-1500	Email Address	info@waste-trea	tment.net	
d.	Volume of waste shipped to p	rocessing or disposal facili cu yd gal	ty in the previous lb 🛛 ton	-	)	
a.	Solid waste permit number(s)	for processing or disposal	facility being util	ized.		
b.	Facility Name					
	Address Line 1					
	Address Line 1					·
	Address City State ZIP					· · · · · · · · · · · · · · · · · · ·
	Municipality		County			
с.	Facility Contact Name					
	Title					
	Phone	t	Email Address			
d.	Volume of waste shipped to p	rocessing or disposal facili cu yd gal	ty in the previous	-		
		2. BENEFICI	AL USE			
а.	Has the waste been approved	for beneficial use?			Yes	No No
	If "Yes", list the general permi	t number or approval numb	er.			_
b.	Volume of waste beneficially u	sed in the previous year.	······································	······································	·····	
		cuyd 🗌 gal 🗌	lb 🗌 ton	(check one)		

,

			SECTION D. CERTIFICATION
Report and obtaining t knowledge	l all attached docu he information, I v I understand that	ment verify the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Check the f	ollowing, if applicab	le:	
I cer	tify the information and has not chang		ired in Section B-1, General Properties was supplied to the Department for the year
For	n Submitted:		Form 26R
			Other (specify)
Date	e Submitted:		
I cer	tify the information _ and has not chan		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
Forr	n Submitted:		Form 26R
			Other (specify)
Date	Submitted:		
	ify the information r le year and h	-	ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
Forr	n Submitted:		Form 26R
			Other (specify)
Date	Submitted:		
Name of Re	sponsible Official		Title Environmental Specialist
Dina Browr		$\sim$	$A \circ$
Signature	the	Y	Date 2/25/11

2540-PM-BWM0347 Rev. 1/2011
Pennsylvania
Department of Environmental Protection

#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

			tely completed. All requi				USE C	the second s
			provided. If additional sp			Date Receiv	ed & G	eneral Notes
			reference the item numb ts needs to match the date		late			
prepa	rea. In	le date on attached shee	is needs to match the date	noted below.				
Gener	ral Refe	rence 287.54						
Date I	Prepare	d/Revised Fel	oruary 11, 2011					
		SECTION A.	<b>CLIENT</b> (GENERATOR	R OF THE WASTE)	NFOR	MATION		
	any Na							
		ergy USA Inc.						
		y, Name of Parent Comp	bany				Genei	rator ID#
		ergy Inc. iling Address Line 1		ompany Mailing Addre	se Line	N/A		
		d Place		ompany maning Addre	55 LIIIC	: 2		
		dress Last Line – City	State	Zip+4	Р	hone		Ext
	endale	,	PA	15086		24) 814-53	00	
Comp	any Co	ntact Last Name	First Name	MI	·····	Suffi		
Browr			Dina					
•	ipality			County				
	endale			Allegheny				
	ct Phon		Contact Email Address					
	814-53		dybrown@talismanusa.c y Mailing Address (noted a				Yes	
			eration and storage. Wast		e drilling			No No
			pad site located at 1042 Anti					
	gao at							
is tem	porarily s	stored in tanks onsite.						
	porarily s i <b>pality</b>		County Bradfo		·····	State	PA	
		stored in tanks onsite.		ord			PA	i
Munic Resi	ipality idual	stored in tanks onsite. Columbia <b>Resid</b> u	County Bradfo SECTION B. WAST Jal Waste	ord		State Jnit of	PA	Time
Munic Resi	ipality	stored in tanks onsite. Columbia <b>Resid</b> u	County Bradfo	ord	L M	State Jnit of easure	PA	
Munic Resi	ipality idual	stored in tanks onsite. Columbia <b>Resid</b> u	County Bradfo SECTION B. WAST Jal Waste escription	e DESCRIPTION	L M cu y	State Jnit of easure /dgal	PA	Time Frame
Munic Resi Waste	ipality idual	stored in tanks onsite. Columbia Residu Code D	County Bradfo SECTION B. WAST Jal Waste escription	erd E DESCRIPTION Amount 263	L M	State Jnit of easure	PA	Time
Munic Resi Waste	ipality idual	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater	County Bradfo SECTION B. WAST ual Waste escription 1. GENERAL P	erd E DESCRIPTION Amount 263	L M □ cu y □ lb	State Jnit of easure rd ☐ gal ⊠ ton	PA	Time Frame
Munic Resi Waste 802	ipality idual code pH Ra	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater	County Bradfo SECTION B. WAST ual Waste escription 1. GENERAL P	E DESCRIPTION Amount 263 ROPERTIES (based on analyses or b	L M □ cu y □ lb	State Jnit of easure rd ☐ gal ⊠ ton	PA	Time Frame
Munic Resi Waste 802 a.	ipality idual code pH Ra	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6	County Bradfo SECTION B. WAST Jal Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 905	erd E DESCRIPTION Amount 263 ROPERTIES (based on analyses or l thod 9095) 95)	L M □ cu y □ lb	State Jnit of easure rd ☐ gal ⊠ ton	PA	Time Frame
Munic Resi Waste 802 a.	ipality idual Code pH Ra Physic	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6 cal State	County Bradfo SECTION B. WAST Jal Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat	erd E DESCRIPTION Amount 263 ROPERTIES (based on analyses or b thod 9095) 95) ture & pressure)	L M Cuy Ib	State Jnit of easure rd ☐ gal ⊠ ton	PA	Time Frame
Munic Resi Waste 802 a.	ipality idual Code pH Ra Physic	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6	County Bradfo SECTION B. WAST Jal Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent yet	erd E DESCRIPTION Amount 263 ROPERTIES (based on analyses or left) thod 9095) 95) ture & pressure) ellow/brown Odd	L M L cu y Ib knowled	State Jnit of easure rd ☐ gal ⊠ ton	PA	Time Frame
Munic Resi Waste 802 a. b.	ipality idual Code pH Ra Physic	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6 cal State	County Bradfor SECTION B. WAST ual Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 900 Gas (ambient temperat Color Translucent ye Number of Solid or Liquid	E DESCRIPTION Amount 263 ROPERTIES (based on analyses or l thod 9095) 95) ture & pressure) ellow/brown Odd I Phases of Separation	L M L cu y Ib knowled	State Jnit of easure ′d ☐ gal ⊠ ton ge)	PA	Time Frame
Munic Resi Waste 802 a. b.	ipality idual Code pH Ra Physic	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6 cal State	County Bradfo SECTION B. WAST Jal Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent yet	E DESCRIPTION Amount 263 ROPERTIES (based on analyses or l thod 9095) 95) ture & pressure) ellow/brown Odd Phases of Separation	L M L cu y Ib knowled	State Jnit of easure rd ☐ gal ⊠ ton ge) ydrocarbon		Time Frame
Munic Resi Waste 802 a. b.	ipality idual Code pH Ra Physic	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6 cal State	County       Bradfor         SECTION B. WAST         ual Waste         esscription         1. GENERAL P         to         To         X         Liquid Waste (EPA Me         Solid (EPA Method 90S         Gas (ambient temperation         Color       Translucent yee         Number of Solid or Liquid         Describe each phase of solid	E DESCRIPTION Amount 263 ROPERTIES (based on analyses or l thod 9095) 95) ture & pressure) ellow/brown Odd I Phases of Separation eparation. Liquid	L M L cu y Ib knowled	State Jnit of easure rd ☐ gal ⊠ ton ge) ydrocarbon	PA	Time Frame
Munic Resi Waste 802 a. b.	ipality idual code pH Ra Physic	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6 cal State cal Appearance	County Bradfor SECTION B. WAST ual Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat Color Translucent yet Number of Solid or Liquid Describe each phase of so 2. CHEMICAL ANALYS	E DESCRIPTION Amount 263 ROPERTIES (based on analyses or left) (based on analyses or l	L M Cuy Ib (nowled	State		Time Frame One Time
Munic Resi Waste 802 a. b.	pH Ra pH Ra Physic Physic	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chem ctions, is attached.	County       Bradfor         SECTION B. WAST         ual Waste         escription         1. GENERAL P         to         To         X         Liquid Waste (EPA Me         Solid (EPA Method 90S         Gas (ambient temperat         Color       Translucent yet         Number of Solid or Liquid         Describe each phase of so         2. CHEMICAL ANALYS         ical characterization of the	E DESCRIPTION Amount 263 ROPERTIES (based on analyses or left) (based on analyses or l	L M Cuy Ib (nowled	State Jnit of easure rd ☐ gal ⊠ ton ge) ydrocarbon	PA	Time Frame
Munic Resi Waste 802 a. b.	ipality idual code pH Ra Physic Physic The re instrue A deta	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chem ctions, is attached. iled description of the w	County Bradfor SECTION B. WAST ual Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent yet Number of Solid or Liquid Describe each phase of se 2. CHEMICAL ANALYS ical characterization of the vaste sampling method is a	E DESCRIPTION Amount 263 ROPERTIES (based on analyses or left) (based on analyses or l	L M Cuy Ib cnowled	State Jnit of easure rdgal ton ge) ydrocarbon ne , 	Yes	Time Frame One Time
Munic Resi Waste 802 a. b. c. a.	pH Ra pH Ra Physic Physic The re instruct A deta The qu	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chem ctions, is attached. iled description of the w uality assurance/quality	County       Bradfor         SECTION B. WAST         ual Waste         escription         1. GENERAL P         to         To         X         Liquid Waste (EPA Me         Solid (EPA Method 90S         Gas (ambient temperat         Color       Translucent yet         Number of Solid or Liquid         Describe each phase of so         2. CHEMICAL ANALYS         ical characterization of the	E DESCRIPTION Amount 263 ROPERTIES (based on analyses or left) (based on analyses or l	L M Cuy Ib cnowled	State	Yes	Time Frame One Time
Munic Resi Waste 802 a. b. c. a. b. c.	pH Ra pH Ra Physic Physic The re instruc A deta The qu attach	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chem ctions, is attached. iled description of the w uality assurance/quality ed.	County Bradfor SECTION B. WAST ual Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent yet Number of Solid or Liquid Describe each phase of se 2. CHEMICAL ANALYS ical characterization of the vaste sampling method is a control procedures employ	E DESCRIPTION Amount 263 ROPERTIES (based on analyses or left) (based on analyses or l	L M Cuy Ib cnowled	State Jnit of easure rdgal ton ge) ydrocarbon ne 	Yes Yes Yes	Time Frame One Time
Munic Resi Waste 802 a. b. c. a. b.	pH Ra pH Ra Physic Physic The re instruct A deta The qu attach The re	stored in tanks onsite. Columbia Residu Code D Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chem ctions, is attached. iled description of the w uality assurance/quality ed. sults of the hazardous w	County Bradfor SECTION B. WAST ual Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent yet Number of Solid or Liquid Describe each phase of se 2. CHEMICAL ANALYS ical characterization of the vaste sampling method is a	E DESCRIPTION Amount 263 ROPERTIES (based on analyses or left) (based on analyses or l	L M D cu y Ib knowled	State Jnit of easure rdgal ton ge) ydrocarbon ne , 	Yes	Time Frame One Time

[	2	. PROCESS DESCRIPTION & SCHEMATIC ATTACHMENTS	
a.			es 🗌 No
а.	the waste, as specified in the		
b.	A schematic of the manufact as specified in the instructio	turing and/or pollution control processes producing the waste, 🛛 🗙 Y ns, is attached.	es 🗌 No
C.		submitted are confidential, the substantiation for Yes N scribed in the instructions, is attached.	o 🛛 N/A
	SECTI	ON C. MANAGEMENT OF RESIDUAL WASTE	
		1. PROCESSING OR DISPOSAL FACILITY(IES)	
The a	rea below (ad.) will accommo	date the identification of two facilities. Attach additional sheets if neces	sary.
а.	Solid waste permit number(s 0008451	) for processing or disposal facility being utilized.	
b.	Facility Name	Sunbury Generation Wastewater Treatment Facility	
	Address Line 1	Old Trail Road (P.O. Box 517)	
	Address Line 1		
	Address City State ZIP	Shamokin Dam PA 17876	
	Municipality	Shamokin Dam County Snyder	
с.	Facility Contact Name	Sheldon Kowaleski	
	Title		
	Phone	(570) 884-1235 Email Address	
d.	Volume of waste shipped to	processing or disposal facility in the previous year.	<u></u>
	200	] cu yd 🗌 gal 📋 lb 🛛 ton (check one)	
a.	Solid waste permit number(s	) for processing or disposal facility being utilized.	
ч.	101508	,	
b.	Facility Name	PA Brine	
	Address Line 1	5148 US 322	
	Address Line 1		
	Address City State ZIP	Franklin PA 16323	
	Municipality	Franklin County Venango	
с.	Facility Contact Name	Elton DeLong	
	Title		
	Phone	(814) 437-3593 Email Address info@pabrine.com	
d.	Volume of waste shipped to p	processing or disposal facility in the previous year.	
		2. BENEFICIAL USE	
a.	Has the waste been approved		es 🖂 No
		nit number or approval number.	
<b>b.</b>	Volume of waste beneficially		
	Ĺ	] cu yd 🔄 gal 🔄 lb 🔄 ton (check one)	

	SECTION D. CERTIFICATION
Report and all attached docur obtaining the information, I v knowledge. I understand that	hat I have personally examined and am familiar with the information submitted in this Annual ments and that based upon my inquiry of those individuals immediately responsible for erify that the submitted information is true, accurate and complete to the best of my the submission of false information herein is made subject to the penalties of 18 Pa. C.S. fication to authorities, which include fine and imprisonment.
Check the following, if applicab	le:
I certify the information	required in Section B-1, General Properties was supplied to the Department for the year ged.
Form Submitted:	Form 26R
	Other (specify)
Date Submitted:	
I certify the information	required in Section B-2, Chemical Analysis was supplied to the Department for the year ged.
Form Submitted:	Form 26R
	Other (specify)
Date Submitted:	
I certify the information reference of the year and ha	equired in Section B-3, Process Description and Schematic, was supplied to the Department as not changed.
Form Submitted:	Form 26R
	Other (specify)
Date Submitted:	
Name of Responsible Official	Title Environmental Specialist
Dina Brown	
Signature	Man Date 2/25/11

7



#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

	orm m	ust be fully and accura	tely completed. All requi	ired information must	be DEF	PUSE ONLY
			provided. If additional sp			ived & General Notes
			reference the item numb		late	
prepar	ed. Th	e date on attached shee	ts needs to match the date	noted below.		
Genera	al Refe	rence 287.54				
Date P	repare	d/ <b>Revised</b> Fel	bruary 11, 2011			
		SECTION A.	CLIENT (GENERATOR	R OF THE WASTE) I	NFORMATION	
Compa						
		ergy USA Inc.				
		y, Name of Parent Comp	bany			A Generator ID#
		ergy Inc.			N/A	
		ling Address Line 1	Co	ompany Mailing Addre	ess Line 2	
		d Place				
		dress Last Line – City	State	Zip+4	Phone	Ext
Warrer			PA	15086	(724) 814-5	
1 -	-	ntact Last Name	First Name	MI	Suf	fix
Brown			Dina	<b>N</b>		
Munici				County		
Warrer		e Ext	Contact Email Address	Allegheny		
Contac			dybrown@talismanusa.c	om		
(724) 8			y Mailing Address (noted a			Yes 🕅 No
			eration and storage. <u>Wast</u>		 o drilling completio	
natural			well pad site in Troy Townsh			
tanks of			Weil pad site in Hoy Townsh	ip, Diadioid Obdinty, 17	A. The waste is ten	ipolarity stored in
Munici	pality	Troy	County Bradfo	ord	State	PA
Munici	pality	Troy	County Bradfo			PA
Municij Resic						PA Time
	dual	Residu	SECTION B. WAST		Unit of Measure	Time Frame
Resid	dual	Residu	SECTION B. WAST ual Waste escription	E DESCRIPTION	Unit of Measure	Time Frame
Resic Waste	dual	Residu Code D	SECTION B. WAST ual Waste escription	E DESCRIPTION Amount 425	Unit of Measure	Time Frame
Resic Waste 802	dual Code	Residu Code D Brine and Wastewater	SECTION B. WAST ual Waste escription 1. GENERAL P	E DESCRIPTION Amount 425 ROPERTIES	Unit of Measure cu yd gal	Time Frame
Resic Waste 802 a.	dual Code pH Ra	Residu Code D Brine and Wastewater nge 6	SECTION B. WAST ual Waste rescription 1. GENERAL P to 7	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or l	Unit of Measure cu yd gal	Time Frame
Resic Waste 802	dual Code pH Ra	Residu Code D Brine and Wastewater	SECTION B. WAST ual Waste rescription 1. GENERAL P to 7 Liquid Waste (EPA Me	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or l thod 9095)	Unit of Measure cu yd gal	Time Frame
Resic Waste 802 a.	dual Code pH Ra	Residu Code D Brine and Wastewater nge 6	SECTION B. WAST Jal Waste Jescription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 900	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or l thod 9095) 95)	Unit of Measure cu yd gal	Time Frame
Resic Waste 802 a. b.	dual Code pH Ra Physic	Residu Code D Brine and Wastewater nge 6 cal State	SECTION B. WAST ual Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or I thod 9095) 95) ture & pressure)	Unit of Measure Cu yd Cgal Ib X ton	Time Frame
Resic Waste 802 a.	dual Code pH Ra Physic	Residu Code D Brine and Wastewater nge 6	SECTION B. WAST ual Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent ye	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or l thod 9095) 95) ture & pressure) ellow/brown Odd	Unit of Measure Cu yd Gal Ib X ton (nowledge)	Time Frame
Resic Waste 802 a. b.	dual Code pH Ra Physic	Residu Code D Brine and Wastewater nge 6 cal State	SECTION B. WAST ual Waste esscription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat Color Translucent ye Number of Solid or Liquid	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or I thod 9095) 95) ture & pressure) ellow/brown Odd Phases of Separation	Unit of Measure Cu yd Gal Ib X ton (nowledge)	Time Frame
Resic Waste 802 a. b.	dual Code pH Ra Physic	Residu Code D Brine and Wastewater nge 6 cal State	SECTION B. WAST ual Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent ye	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or I thod 9095) 95) ture & pressure) ellow/brown Odd Phases of Separation	Unit of Measure Cu yd gal Ib X ton (nowledge)	Time Frame
Resic Waste 802 a. b.	dual Code pH Ra Physic	Residu Code D Brine and Wastewater nge 6 cal State cal Appearance	SECTION B. WAST ual Waste description 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat Color Translucent yet Number of Solid or Liquid Describe each phase of so 2. CHEMICAL ANALYS	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or I thod 9095) 95) ture & pressure) ellow/brown Odd I Phases of Separation eparation. Liquid SIS ATTACHMENTS	Unit of Measure Cu yd Gal Ib X ton (nowledge)	Time Frame
Resic Waste 802 a. b. c.	dual Code pH Ra Physic Physic	Residu Code D Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chem	SECTION B. WAST ual Waste description 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat Color Translucent ye Number of Solid or Liquid Describe each phase of so	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or I thod 9095) 95) ture & pressure) ellow/brown Odd I Phases of Separation eparation. Liquid SIS ATTACHMENTS	Unit of Measure Cu yd Gal Ib X ton (nowledge)	Time Frame
Resic Waste 802 a. b. c.	dual Code pH Ra Physic Physic	Residu Code D Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chem ctions, is attached.	SECTION B. WAST ual Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat Color Translucent ye Number of Solid or Liquid Describe each phase of se 2. CHEMICAL ANALYS ical characterization of the	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or I thod 9095) 95) ture & pressure) ellow/brown Odd I Phases of Separation eparation. Liquid SIS ATTACHMENTS waste, as described i	Unit of Measure Cu yd Gal Ib X ton (nowledge)	Time         Frame         One Time         One Time         Yes         No
Resic Waste 802 a. b. c. a. b. c.	Jual Code pH Ra Physic Physic The re instruc A deta The qu	Residu Code D Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chem ctions, is attached. iled description of the w rality assurance/quality	SECTION B. WAST ual Waste description 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 90S Gas (ambient temperat Color Translucent yet Number of Solid or Liquid Describe each phase of so 2. CHEMICAL ANALYS	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or I thod 9095) 95) ture & pressure) ellow/brown Odd I Phases of Separation eparation. Liquid GIS ATTACHMENTS waste, as described i ittached.	Unit of Measure Cu yd Gal Ib X ton (nowledge)	Time         Frame         One Time         One Time         Yes         No         Yes       No
Resic Waste 802 a. b. c. a. b. c.	Jual Code pH Ra Physic Physic The re instruc A deta The qu attache	Residu Code D Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chem ctions, is attached. iled description of the w rality assurance/quality ed.	SECTION B. WAST Jal Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent yet Number of Solid or Liquid Describe each phase of se 2. CHEMICAL ANALYS ical characterization of the vaste sampling method is a control procedures employ	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or I thod 9095) 95) ture & pressure) ellow/brown Odd I Phases of Separation eparation. Liquid SIS ATTACHMENTS waste, as described i ittached. yed by the laboratory(i	Unit of Measure Cu yd gal Ib X ton (nowledge) Dr Hydrocarbor One n the	Time         Frame         One Time         One Time         Yes         No         Yes       No         Yes       No         Yes       No         Yes       No
Resic Waste 802 a. b. c. a. b. c. d.	Jual Code pH Ra Physic Physic The re instruc A deta The qu attach The re	Residu Code D Brine and Wastewater nge 6 cal State cal Appearance sults of a detailed chem ctions, is attached. iled description of the w rality assurance/quality ed. sults of the hazardous w	SECTION B. WAST Jal Waste escription 1. GENERAL P to 7 Liquid Waste (EPA Me Solid (EPA Method 909 Gas (ambient temperat Color Translucent yee Number of Solid or Liquid Describe each phase of se 2. CHEMICAL ANALYS ical characterization of the vaste sampling method is a	E DESCRIPTION Amount 425 ROPERTIES (based on analyses or I thod 9095) 95) ture & pressure) ellow/brown Ode I Phases of Separation eparation. Liquid SIS ATTACHMENTS waste, as described i ittached. yed by the laboratory(i ched.	Unit of Measure Cu yd Gal Ib X ton (nowledge)	Time         Frame         One Time         One Time         Yes         No         Yes       No         Yes       No         Yes       No         Yes       No

·	100	· · · · · · · · · · · · · · · · · · ·	and the second se	No. 1		
		PROCESS DESCRIPTIC				~3
а.	A detailed description of the the waste, as specified in th			esses producing	🛛 Yes	🗌 No
b.	A schematic of the manufac as specified in the instruction		control processes pro	ducing the waste,	🛛 Yes	🗌 No
C.	If portions of the information a confidentiality claim, as de			n for 🗌 Yes	No No	🛛 N/A
n Pegl	SECT	ON C. MANAGEI	MENT OF RESIDU	JAL WASTE		
		1. PROCESSING O	R DISPOSAL FACILITY(I	ES)		
The a	rea below (ad.) will accommo	date the identification	of two facilities. Attach	n additional sheets i	f necessary	•
а.	Solid waste permit number(s 0008451	) for processing or dis	posal facility being util	ized.		
b.	Facility Name	Sunbury Generation	n Wastewater Treatme	ent Facility		
	Address Line 1	Old Trail Road, P.C				
	Address Line 1	*	·			
	Address City State ZIP	Shamokin Dam	PA	17876		
	Municipality	Shamokin Dam	County	Snyder		
с.	Facility Contact Name	Sheldon Kowaleski				
	Title				•	
	Phone	(570) 884-1235	Email Address			
d.	Volume of waste shipped to 375	processing or disposal ] cu yd 🛛 gal	facility in the previous			- <u> </u>
а.	Solid waste permit number(s 101508	) for processing or dis	oosal facility being util	ized.		
b.	Facility Name	PA Brine	·			
	Address Line 1	5148 US 322				
	Address Line 1					
	Address City State ZIP	Franklin	PA	16323		
	Municipality	Franklin	County	Venango		
с.	Facility Contact Name	Elton DeLong		······································		
	Title	Q				
	Phone	(814) 437-3593	Email Address	info@pabrine.con	n	
d.	Volume of waste shipped to	processing or disposal	facility in the previous	vear.		
ч.	25	] cu yd 🗌 gal	☐ lb ⊠ ton	-		
	623	2. BEI	NEFICIAL USE			
а.	Has the waste been approved				Yes	No No
	If "Yes", list the general perm		number.			
b.	Volume of waste beneficially			(check one)		

a.	A detailed description of th	3. PROCESS DESCRIPTION	IN & SCHEMATIC ATTA	ACHIVIEN IS		
a.			pollution control proc	accos producing	X Yes	No
	the waste, as specified in t			esses producing	∐ Tes	
b.	A schematic of the manufa as specified in the instructi		control processes pro	oducing the waste,	Yes	🗌 No
c.	If portions of the information a confidentiality claim, as o			on for 🗌 Yes	No No	🛛 N/A
	SEC1	ION C. MANAGEI	MENT OF RESID	UAL WASTE		
		مىمىرى بىرىغا مەركەر بىڭلاپ بىر ۋەرى ئەترى مەرمە مەر بىلەر بىرى بىرى بىرىكى بىرى بىلەر بىلەر بىلەر بىلەر بىلەر مېرىپ	R DISPOSAL FACILITY		<u></u>	energen (n. 1999) Anteres (n. 1999)
The a	area below (ad.) will accomm				if necessary	/.
a.	Solid waste permit number 0102784	(s) for processing or dis	posal facility being ut	ilized.		
b.	Facility Name	Waste Treatment C	orp. Warren County			
	Address Line 1	341 West Harmar S				
	Address Line 1	······································	·······			
	Address City State ZIP	Warren	PA	16365		
	Municipality	Warren	County	Warren		
с.	Facility Contact Name	Rich Gorton				
	Title	·····		· · · · · · · · · · · · · · · · · · ·		
	Phone	814-726-1500	Email Address	info@waste-trea	tment.com	
d.	Volume of waste shipped to 25	processing or disposa	facility in the previou			
a.	Solid waste permit number	(s) for processing or dis	posal facility being ut	ilized.		
b.	Facility Name		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>			
	Address Line 1		······			
	Address Line 1					
	Address City State ZIP					
	Municipality		County			
с.	Facility Contact Name		- ////		·····	
	Title					
	Phone		Email Address			
d.	Volume of waste shipped to	processing or disposal	facility in the previou			
n (see al		2 BFI	NEFICIAL USE		an an e de la company	
а.	Has the waste been approve			<u> </u>	☐ Yes	No No
	If "Yes", list the general per		number		· · · · ·	K
		y used in the previous y				······································
b.	VOLUME AT WRETE REPATION					

			SECTION D. CERTIFICATION
Report and all obtaining the i knowledge. I u	attached docur nformation, I v nderstand that	ments erify the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Check the follow	wing, if applicab	le:	
	the information d has not chang	-	ired in Section B-1, General Properties was supplied to the Department for the year
Form Su	bmitted:		Form 26R
			Other (specify)
Date Sul	omitted:		
	he information d has not chang	-	ired in Section B-2, Chemical Analysis was supplied to the Department for the year
Form Su	bmitted:		Form 26R
			Other (specify)
Date Sul	omitted:		
hanned a	ne information read	•	ed in Section B-3, Process Description and Schematic, was supplied to the Department t changed.
Form Su	bmitted:		Form 26R
			Other (specify)
Date Sub	mitted:		
Name of Respor	sible Official		Title Environmental Specialist
Dina Brown			
Signature	<u>/h</u>	Ş	Date <u>2/25/11</u>

2540-PM-BWM0347 Rev. 1/2011
Pepensylvania
Department of environmental protection

#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

# FORM 26R CHEMICAL ANALYSIS OF RESIDUAL WASTE ANNUAL REPORT BY THE GENERATOR

each attached	ly printed in the space d sheet as Form 26R,	ately completed. All requ s provided. If additional sp reference the item numb ets needs to match the date	bace is necessary, iden ber and identify the d	tify Date Receiv	USE ONLY red & General Notes
General Refer	ence 287.54				
Date Prepared	<b>J/Revised</b> Fe	bruary 11, 2011			
	SECTION A.	<b>CLIENT</b> (GENERATO	R OF THE WASTE)	FORMATION	
Company Nan	ne				
Talisman Ene					
	, Name of Parent Com	pany			Generator ID#
Talisman Ene				N/A	
50 Pennwood	ling Address Line 1	C C	Company Mailing Addre	ss Line 2	
	Iress Last Line – City	State	Zip+4	Phone	Ext
Warrendale	ness Last Line - Oity	PA	15086	(724) 814-53	
	tact Last Name	First Name	MI	Suffi	
Brown		Dina			
Municipality		1	County		
Warrendale			Allegheny		
Contact Phone		Contact Email Address			
(724) 814-532		dybrown@talismanusa.c			N/ N/
		ny Mailing Address (noted		ل ۲ا منه معروف المراجع	Yes 🛛 No
	De location of waste gel	neration and storage. <u>Wast</u> at 1528 Sanitarium Hill Road	te is generated during na	tural gas completion	The waste is
temporarily stor			u, columbia rownship, b	radioid County, FA.	
Municipality	Columbia	County Bradfo	ord	State	PA
Municipality	Columbia	County Bradfo		State	PA
Residual	Resid	SECTION B. WAST		State Unit of	PA
	Resid	SECTION B. WAST		Unit of Measure	
Residual	Resid	SECTION B. WAST ual Waste Description	TE DESCRIPTION	Unit of Measure	Time Frame
Residual Waste Code	Resid Code I	SECTION B. WAST ual Waste Description (Flow Back Sand)	Amount       280	Unit of Measure	Time
Residual Waste Code 804	Resid Code I Fracing Fluid Waste (	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL F	Amount       280       PROPERTIES	Unit of Measure Cuyd gal Ib X ton	Time Frame
Residual Waste Code 804 a. pH Rar	Resid Code I Fracing Fluid Waste ( nge 7.7	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL F 71 to	Amount         280         PROPERTIES         (based on analyses or k	Unit of Measure Cuyd gal Ib X ton	Time Frame
Residual Waste Code 804 a. pH Rar	Resid Code I Fracing Fluid Waste (	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL P 71 to Liquid Waste (EPA Me	Amount         280         PROPERTIES         (based on analyses or kethod 9095)	Unit of Measure Cuyd gal Ib X ton	Time Frame
Residual Waste Code 804 a. pH Rar	Resid Code I Fracing Fluid Waste ( nge 7.7	SECTION B. WAST ual Waste Description (Flow Back Sand) (Flow Back Sand) 1. GENERAL F 71 to Liquid Waste (EPA Me Solid (EPA Method 90	Amount         280         PROPERTIES         (based on analyses or k         ethod 9095)         95)	Unit of Measure Cuyd gal Ib X ton	Time Frame
Residual Waste Code 804 a. pH Rar b. Physic	Resid Code I Fracing Fluid Waste ( nge 7.7	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL P 71 to Liquid Waste (EPA Me Solid (EPA Method 90 Gas (ambient tempera	Amount         280         PROPERTIES         (based on analyses or kethod 9095)         95)         ature & pressure)	Unit of Measure	Time Frame
Residual Waste Code 804 a. pH Rar b. Physic	Resid Code I Fracing Fluid Waste ( nge 7.7 al State	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL P 71 to Liquid Waste (EPA Me Solid (EPA Method 90 Gas (ambient tempera	Amount         280         PROPERTIES         (based on analyses or k         ethod 9095)         95)         ature & pressure)         Odo	Unit of Measure Cuyd gal Ib ton nowledge)	Time Frame
Residual Waste Code 804 a. pH Rar b. Physic	Resid Code I Fracing Fluid Waste ( nge 7.7 al State	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL F 71 to Liquid Waste (EPA Me Solid (EPA Method 90 Gas (ambient tempera Color Greyish Black	Amount         280         PROPERTIES         (based on analyses or k         ethod 9095)         95)         ature & pressure)         Odo         d Phases of Separation	Unit of Measure uyd gal b ton nowledge) r Hydrocarbon	Time Frame
Residual Waste Code 804 a. pH Rar b. Physic	Resid Code I Fracing Fluid Waste ( nge 7.7 al State	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL P 71 to Liquid Waste (EPA Met Solid (EPA Method 90 Gas (ambient tempera Color Greyish Black Number of Solid or Liquid Describe each phase of s	Amount         280         PROPERTIES         (based on analyses or k         ethod 9095)         95)         ature & pressure)         Odo         d Phases of Separation         separation.	Unit of Measure Cuyd gal Ib ton nowledge)	Time Frame
Residual Waste Code 804 a. pH Rar b. Physic c. Physic	Resid Code I Fracing Fluid Waste ( nge 7.7 al State al Appearance	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL P 71 to Liquid Waste (EPA Met Solid (EPA Method 90 Gas (ambient temperation Color Greyish Black Number of Solid or Liquid Describe each phase of s 2. CHEMICAL ANALYS	Amount         280         PROPERTIES         (based on analyses or k         ethod 9095)         95)         ature & pressure)         Odo         d Phases of Separation         separation.         Sis ATTACHMENTS	Unit of Measure □ cu yd □ gal □ lb ⊠ ton nowledge) rHydrocarbon 	Time       Frame       One Time
Residual Waste Code 804 a. pH Rar b. Physic c. Physic c. Physic	Resid Code I Fracing Fluid Waste ( nge 7.7 al State al Appearance	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL P 71 to Liquid Waste (EPA Met Solid (EPA Method 90 Gas (ambient tempera Color Greyish Black Number of Solid or Liquid Describe each phase of s	Amount         280         PROPERTIES         (based on analyses or k         ethod 9095)         95)         ature & pressure)         Odo         d Phases of Separation         separation.         Sis ATTACHMENTS	Unit of Measure cu yd gal lb X ton nowledge) r Hydrocarbon One	Time Frame
Residual Waste Code 804 a. pH Rar b. Physic c. Physic c. Physic	Resid Code I Fracing Fluid Waste ( nge 7.7 al State al Appearance sults of a detailed chem tions, is attached.	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL P 71 to Liquid Waste (EPA Met Solid (EPA Method 90 Gas (ambient temperation Color Greyish Black Number of Solid or Liquid Describe each phase of s 2. CHEMICAL ANALYS	Amount         280         PROPERTIES         (based on analyses or k         ethod 9095)         95)         ature & pressure)        Odo         d Phases of Separation         separation.         SIS ATTACHMENTS         e waste, as described in	Unit of Measure □ cu yd □ gal □ lb ⊠ ton nowledge) rHydrocarbon 	Time       Frame       One Time
Residual Waste Code 804 a. pH Rar b. Physic c. Physic c. Physic a. The res instruc b. A detai	Resid Code I Fracing Fluid Waste ( nge 7.7 al State al Appearance sults of a detailed chem tions, is attached. led description of the v ality assurance/quality	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL P 71 to Liquid Waste (EPA Met Solid (EPA Method 90 Gas (ambient temperation Color Greyish Black Number of Solid or Liquid Describe each phase of s 2. CHEMICAL ANALYS hical characterization of the	Amount         280         PROPERTIES         (based on analyses or k         ethod 9095)         95)         ature & pressure)        Odo         d Phases of Separation         separation.         SIS ATTACHMENTS         e waste, as described in         attached.	Unit of Measure	Time Frame       One Time       One Time
Residual Waste Code 804 a. pH Rar b. Physic c. Physic c. Physic a. The res instruc b. A detai c. The qu attache	Resid Code I Fracing Fluid Waste ( nge 7.7 al State al Appearance sults of a detailed chem tions, is attached. led description of the v ality assurance/quality ed.	SECTION B. WAST ual Waste Description (Flow Back Sand) 1. GENERAL P 71 to Liquid Waste (EPA Met Solid (EPA Method 90 Gas (ambient tempera Color Greyish Black Number of Solid or Liquid Describe each phase of s 2. CHEMICAL ANALYS nical characterization of the waste sampling method is a	Amount         280         PROPERTIES         (based on analyses or keethod 9095)         95)         ature & pressure)         Odo         d Phases of Separation         separation.         SIS ATTACHMENTS         e waste, as described in         attached.         yed by the laboratory(ie)	Unit of Measure Cuyd Gal Ib X ton nowledge) r Hydrocarbon One n the X	Time Frame       One Time       One Time       Yes       No       Yes     No

		PROCESS DESCRIPTION &				
a.	A detailed description of the the waste, as specified in the			es producing	🛛 Yes	No No
b.	A schematic of the manufacture as specified in the instruction		ntrol processes produc	cing the waste,	Yes Yes	No No
c.	If portions of the information a confidentiality claim, as des			or 🗌 Yes	No No	N/A
	SECTIO	ON C. MANAGEME			44	2000 - 2000 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000 - 2000
			ISPOSAL FACILITY(IES)			
The a	rea below (ad.) will accommod	late the identification of the	wo facilities. Attach a	dditional sheets i	f necessary	•
a.	Solid waste permit number(s) 100361	for processing or dispos	al facility being utilize	ed.		
b.	Facility Name	McKean County Landf	·····			
	Address Line 1	19 Ness Lane				
	Address Line 1					
	Address City State ZIP	Kane	PA	16735	· · · · · · · · · · · · · · · · · · ·	
	Municipality	Kane	County	<b>I</b> cKean		
с.	Facility Contact Name	Mike Manderfeld				
	Title	General Manager	······································			
	Phone	814-778-9931	Email Address	nanderfeld@gm	ail.com	
d.	Volume of waste shipped to p	rocessing or disposal fac	cility in the previous v	ear.		
	280	cu yd 📃 gal	🗌 lb 🖾 ton	(check one)		
а.	Solid waste permit number(s)	for processing or dispos	al facility being utilize	d.		
b.	Facility Name					
	Address Line 1					
	Address Line 1	<u></u>				
	Address City State ZIP					
·	Municipality	an a	County	·····		
С.	Facility Contact Name	<u></u>				
	Title					
	Phone		Email Address			
d.	Volume of waste shipped to p	researing or disposal for		~~~		-
u.		cu yd gal	b ton	(check one)		
12 is		2Benef	ICIAL USE			
a.	Has the waste been approved	for beneficial use?			Yes	🛛 No
	If "Yes", list the general perm	it number or approval nu	mber.			
b.	Volume of waste beneficially					
	0	cuyd 🗌 gal	b ton	(check one)		

		SECTION D. CERTIFICATION
Report and all attached do obtaining the information, knowledge. I understand th	cuments I verify nat the s	have personally examined and am familiar with the information submitted in this Annual s and that based upon my inquiry of those individuals immediately responsible for that the submitted information is true, accurate and complete to the best of my submission of false information herein is made subject to the penalties of 18 Pa. C.S. on to authorities, which include fine and imprisonment.
Check the following, if applie	cable:	
I certify the informati		ired in Section B-1, General Properties was supplied to the Department for the year
Form Submitted:		Form 26R
		Other (specify)
Date Submitted:		
I certify the informati		ired in Section B-2, Chemical Analysis was supplied to the Department for the year
Form Submitted:		Form 26R
		Other (specify)
Date Submitted:		
I certify the information for the year and	•	red in Section B-3, Process Description and Schematic, was supplied to the Department of changed.
Form Submitted:		Form 26R
		Other (specify)
Date Submitted:		
Name of Responsible Officia	I	Title Environmental Specialist
Dina Brown		· (
Signature Am	31	Date 2/25/(1
-	be	i '

PA ID #: 08-0	216	East 2566 P Say Phone	ern enns <u>;</u> /re, P : (570)	<b>nalytics, In Division</b> ylvania Ave. A 18840 ) 888-0169 ) 888-0717	IC.	Work	Order: 101	0 <b>407</b> 7
SEND DATA								
NAME: COMPANY:	Steve Gridley Talisman Energy USA, I	20			w	O#: 1010	4077	
ADDRESS:	337 Daniel Zenker Dr	nc.			PA	AGE: 1 of	4	
	Horseheads, NY 14845				P	O#:		
PHONE: FAX:	(607) 731-0145 (607) 562-4001	TE	ST R	EPORT	P\	NS ID#		
RECEIVED	FOR LAB BY: CMS	DATI	E: 10/2	27/2010 14:15			P	age 1 of 4
	owback Sand			D: 10104077-001A	Compo	site		
SAMPLE	ED BY: SG	Sam	ple Tim	e: 10/26/2010 11:30	<u>SLOQ</u>			
Test		Result		Method	XFXX	Analysis Start	Analysis End	Analyst *
Methanol		13 mg/Kg	N	Alcohols by FID	10	11/01/10 9:59	11/01/10	KMG-CV
Ethanol		< 10 mg/Kg	N	Alcohols by FID	10	11/01/10 9:59	11/01/10	KMG-CV
Isopropar	nol	< 10 mg/Kg	N	Alcohols by FID	10	11/01/10 9:59	11/01/10	KMG-CV
t-Butanol		< 10 mg/Kg	N	Alcohols by FID	10	11/01/10 9:59	11/01/10	KMG-CV
n-Propan	ol	< 10 mg/Kg	N	Alcohols by FID	10	11/01/10 9:59	11/01/10	KMG-CV
Isobutanc		< 10 mg/Kg	N	Alcohols by FID	10	11/01/10 9:59	11/01/10	KMG-CV
n-Butanol	I	< 10 mg/Kg	N	Alcohols by FID	10	11/01/10 9:59	11/01/10	KMG-CV
Sodium		583 mg/Kg-dry		EPA 6010B	58.5	10/28/10 14:00	10/28/10	RMD-CV
Bromine		< 0.46 mg/Kg	N ⁺	HACH-8167	0.46	11/01/10 14:23	11/01/10	TLB-CV
1,1-Dichlo	proethene	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
Methylene	e chloride	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
2-Butanor	ne	< 0.209 mg/Kg-dry		EPA 8260B	0.209	10/28/10 9:55	10/28/10	DN-CV
trans-1,2-	Dichloroethene	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
1,1-Dichlo	proethane	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
cis-1,2-Di		< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
Chlorofori	m	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
1,1,1-Tric	hloroethane	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
Carbon te	trachloride	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
Benzene		< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
1,2-Dichlo	proethane	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
Trichloroe		< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
1,2-Dichlo		< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
Dibromorr		< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
Bromodic		< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
cis-1,3-Die	chloropropene	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV
REMARKS:								

Where the analytical method has been performed under NELAP certification, the analysis has met all of the requirements of the NELAC standard unless otherwise noted on the Analytical Report. * CV = Benchmark Analytics, Inc. Center Valley, PA; SA = Benchmark Analytics, Inc. Sayre, PA

Parameter is not NELAC certified Ν

U Ammonia sample not distilled

Carrie	M.	Davis	

DATE: 11/3/2010

PA ID #: 08- NY ID # 112		<b>Easte</b> 2566 Pe Sayn Phone: (	Benchmark Analytics, Inc Eastern Division 2566 Pennsylvania Ave. Sayre, PA 18840 Phone: (570) 888-0169 Fax: (570) 888-0717			<b>C.</b> Work Order: 10104077			
SEND DATA	A TO:								
NAME: Steve Gridley COMPANY: Talisman Energy USA					W	O#: 1010	)4077		
		-			P	AGE: 2 of	А		
ADDRESS:	337 Daniel Zenker Dr Horseheads, NY 148						7		
	nuiselleaus, NT 140	940			P	O#:			
		TES	TEST REPORT			NS ID#			
PHONE:	(607) 731-0145			UKI					
FAX:	(607) 562-4001								
RECEIVED I	FOR LAB BY: CMS	DATE:	10/27/2	2010 14:15			P	age 2 of 4	
Toluene		< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
4-Methyl-	-2-pentanone (MIBK)	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
trans-1,3	-Dichloropropene	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
1,1,2-Tric	chloroethane	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
Tetrachic	proethene	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
Dibromod	chloromethane	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
1,2-Dibro	omoethane	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
Chlorobe	nzene	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
1, <b>1,1,2-</b> T	etrachloroethane	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
Ethylben:	zene	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
m,p-Xylei	ne	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
o-Xylene	-	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
Xylenes,	Total	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
Bromofor	m	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
1,1,2,2-T	etrachloroethane	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
1,2, <b>3-</b> Tric	chloropropane	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
1,3-Dichle	orobenzene	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
1,4-Dichle	orobenzene	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
1,2-Dichle	orobenzene	< 0.042 mg/Kg-dry		EPA 8260B	0.042	10/28/10 9:55	10/28/10	DN-CV	
Chloride		1030 mg/Kg-dry		EPA 300.0	53.1	10/28/10 15:58	10/29/10	HDP-CV	
Formalde	•	< 1.0 mg/Kg-dry	N I	NIOSH 3500	1.0	11/01/10 8:15	11/01/10	LTW-CV	
Percent N	Moisture	4.4 %		SM2540G		10/29/10 10:30	11/01/10	NFM-SA	
	owback Sand			0104077-001B	Compo	site			
SAMPLE	ED BY: SG	Sample	e Time: 10	/26/2010 11:30	SLOQ				
		Result		Method		Analysis Start	Analysis End	Analyst *	
Test									
<u>Test</u> Moisture		4.37 %	N	loisture Calc.	0.01	10/29/10 10:30	11/01/10	NFM-SA	

Where the analytical method has been performed under NELAP certification, the analysis has met all of the requirements of the NELAC standard unless otherwise noted on the Analytical Report. * CV = Benchmark Analytics, Inc. Center Valley, PA; SA = Benchmark Analytics, Inc. Sayre, PA

Parameter is not NELAC certified Ν

υ Ammonia sample not distilled

MANAGER

ani	M.	Davis
<u> </u>		

DATE: 11/3/2010

A ID #: 08-00380 7 ID # 11216	Easter 2566 Pen	Analytics, In The Division Ansylvania Ave. PA 18840	c.	Work	Order: 101	04 <b>07</b> 7
	-	70) 888-0169				
	Fax: (5	70) 888-0717				
END DATA TO:						
ME: Steve Gridley			W	'O#: 1010	4077	
OMPANY: Talisman Energy US ODRESS: 337 Daniel Zenker D			P	AGE: 3 of 4	4	
Horseheads, NY 148				O#:		
IONE: (607) 731-0145 X: (607) 562-4001	TEST	REPORT	P	WS ID#		
ECEIVED FOR LAB BY: CMS	DATE:	10/27/2010 14:15			P	age 3 of 4
Free Liquid	< 0.1 %	EPA 9095A	0.1	10/28/10 11:15	10/28/10	IC-SA
pH	7.71@22.3°C	EPA 9045C	0.1	11/01/10 14:00	11/01/10	NFM-SA
Phosphorus	16 mg/kg-dry	EPA 365.3	5	11/01/10 9:30	11/02/10	MED-SA
MPLE: Flowback Sand	L	ab ID: 10104077-001C	Compo	osite		
SAMPLED BY: SG	Sample	Time: 10/26/2010 11:30	-			
Test	Result	Method	<u>slóq</u>	Analysis Start	Analysis End	Analyst *
Ethylene glycol	< 10.00 mg/Kg	Glycols	10.00	10/29/10 0:00	10/29/10	
Propylene glycol Sample Note: Analysis performed	< 10.00 mg/Kg by Summit Environmental T	Glycols echnologies, Inc.	10.00	10/29/10 0:00	10/29/10	
MPLE: Flowback Sand	L	ab ID: 10104077-001D	Compo	site		
SAMPLED BY: SG		Time: 10/26/2010 11:30				
Test	Result	Method	SLOQ	Analysis Start	Analysis End	Analvet *
Phenolics, Total Recoverable	9.95 mg/Kg DRY	EPA 9065	1.30	10/29/10 9:30	10/29/10	<u>CIC21731</u>
Sample Note: Analysis performed						
MPLE: Flowback:Sand		ab ID: 10104077-001E	Compo	site		• • • • •
SAMPLED BY: SG	Sample	Time: 10/26/2010 11:30				
Test	Result	Method	<u>SLOQ</u>	Analysis Start	Analysis End	Analyst *
Total Petroleum Hydrocarbons	660 mg/Kg	EPA 9071	170	10/28/10 14:20	10/28/10	
Sample Note: Analysis performed	by Microbac Laboratories, In	cErie Division				
MPLE: TCLP Lechate of Flowbac	k Sand Li	ab ID: 10104077-001G	Compo	site		
SAMPLED BY: SG	Sample	Time: 10/28/2010 8:00	81.00			
Test	Result	Method	<u>SLOQ</u>	Analysis Start	Analysis End	Analyst *
Mercury - TCLP extracted	< 0.0008 mg/L	EPA 7470A	8000.0	10/30/10 8:45	10/31/10	RMD-CV
Arsenic - TCLP extracted	< 0.500 mg/L	EPA 6010B	0.500	10/30/10 13:40	10/31/10	RMD-CV

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Ν Parameter is not NELAC certified

U Ammonia sample not distilled

MANAGER

Carrie M. Daris

DATE: 11/3/2010

PA ID #: 08-00380 NY ID # 11216		Benchmark Analytics, Inc. Eastern Division 2566 Pennsylvania Ave. Sayre, PA 18840 Phone: (570) 888-0169 Fax: (570) 888-0717			Work Order: 10104077				
SEND DATA	A TO:								
NAME:	Steve Gridley			W	O#: 10	0104077			
COMPANY:		IC.		PA	AGE: 4	of 4			
ADDRESS: 337 Daniel Zenker Dr Horseheads, NY 1484					D#:				
PHONE: FAX:	(607) 731-0145 (607) 562-4001	TEST REPORT		PWS ID#					
RECEIVED I	FOR LAB BY: CMS	DATE: 1	0/27/2010 14:15				Page 4 of 4		
	n - TCLP extracted	< 0.100 mg/L		0 400	10/30/10 13	:40 10/31/10	RMD-CV		
Cadmiun		~ 0.100 mg/L	EPA 6010B	0.100	10/00/10 10				
	m - TCLP extracted	< 0.500 mg/L	EPA 6010B EPA 6010B	0.100	10/30/10 13	:40 10/31/10	RMD-CV		
Chromiur							RMD-CV RMD-CV		
Chromiur Copper -	m - TCLP extracted	< 0.500 mg/L	EPA 6010B	0.500	10/30/10 13	:40 10/31/10			
Chromiur Copper - Lead - TO	m - TCLP extracted TCLP extracted	< 0.500 mg/L < 0.100 mg/L	EPA 6010B EPA 6010B	0.500 0.100	10/30/10 13 10/30/10 13	:40 10/31/10 :40 10/31/10	RMD-CV		
Chromiur Copper - Lead - T( Nickel - T	m - TCLP extracted TCLP extracted CLP extracted	< 0.500 mg/L < 0.100 mg/L < 0.500 mg/L	EPA 6010B EPA 6010B EPA 6010B	0.500 0.100 0.500	10/30/10 13 10/30/10 13 10/30/10 13	:40 10/31/10 :40 10/31/10 :40 10/31/10	RMD-CV RMD-CV		
Chromiu Copper - Lead - T( Nickel - T Selenium	m - TCLP extracted TCLP extracted CLP extracted FCLP extracted	< 0.500 mg/L < 0.100 mg/L < 0.500 mg/L < 0.100 mg/L	EPA 6010B EPA 6010B EPA 6010B EPA 6010B	0.500 0.100 0.500 0.100	10/30/10 13 10/30/10 13 10/30/10 13 10/30/10 13	:40         10/31/10           :40         10/31/10           :40         10/31/10           :40         10/31/10	RMD-CV RMD-CV RMD-CV		

Where the analytical method has been performed under NELAP certification, the analysis has met all of the requirements of the NELAC standard unless otherwise noted on the Analytical Report. * CV = Benchmark Analytics, Inc. Center Valley, PA; SA = Benchmark Analytics, Inc. Sayre, PA

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Parameter is not NELAC certified Ν

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Ammonia sample not distilled U

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MANAGER

Carrie	hл	Davis
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DATE: 11/3/2010

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				1					
CHAIN OF CUSTODY	1						i	PAGE1	OF <u>1</u>
EPORT TO: Talisman / UEG								ARE SPECIAL DETECT	ROM CHAITE
geowetlands@aol.com	i					V	//O#: 10104077	NEEDED: YES /	
wollin@rallysolutions.ca	REFR	RIGERA	TE SAMI	مدر			RESULTS ARE <u>BEING</u> USED FOR:	IF YES, PLEASE ATTAC	
	AFTE	RCOL	LECTION					IS A QC PACKA	· •
DNTACT Steve Gridley	Т	RANSF	PORT		/	/ GW SW WW	GROUND WATER SO SOIL SURFACE WATER HZ HAZARDOUS WASTE WATER OTHER	YES E	
		то	•		/	DF	DEIONIZED WATER DI DISTILLED WATER PERSONAL OTHER	IF YES, PLEASE ATTAC	H REQUIREMENTS
AX#		ABORA In Coo	TORY	/	/	125	H HYDROCHLORIC ACID OH SODIUM HYDROXIDE S SULFURIC ACID AS ASCORBIC ACID		
ILL TO: Tallsman		WITH	<b>KE</b>				N NITRIC ACID AC ACETIC ACID SO ₃ SODIUM SULFITE NH, AMMONIUM CHLORIDE	The second	
O# COMPLETIONS	[	7	1.01	7	$\langle g \rangle$	<u>آ (</u>	Thio SODIUM THIOSULFATE ZN ZINC ACETATE <u>NONE</u> <u>Hg</u> MERCURIC CHLORIDE		
ROJECT DESCRIPTION	1	12,		§ /4	5 4'		w An incomplete chain of custody may delay the	Please	e fill out all able areas
AMPLER SIGNATURE / AFFILIATION	1 /	ding /	F. S.	4		»[/	processing of your sample(s).	con	npletely
Sa Junoma ONTAINER SAMPLING POINT	8	THE OF	SAMPLE MATCH	Sumple Tran	SAMO	PRESC MITULS	SO3       SODIUM SULFITE       NH, AMMONIUM CHLORIDE         Thio       SODIUM THIOSULFATE       ZN         -       NONE       Hg         MECURIC CHLORIDE       X         -       NONE       Hg         MERCURIC CHLORIDE       X         -       None       Hg         MERCURIC CHLORIDE       X         -       None       Hg         -       -       Hg         -	LAB USE	ONLY
Flowback Sand	10/26	11.5				λ	TPH, pH, Free Liquids, % Moisture	-001+	I-G
A-metals, anion, chlorine	2						Chlorides, Sodium, Bromine		
8260, Alcohob, formabl							TCLP Metals: Ar, Ba, Cd, Cr, Pb, Hg, Se		
B wetchem							Ag, Cu, Zn, Ni		
C-Gilycol				i			Alcohols, Glycols, Formaldehyde		
D-Phenols			•				EPA 8260		· 《读》:
E-TPH							Total Phosphorus, Total Phenolics		
8 F-TotalSample	ļ						Ammonia - Nitrogen		
9 G-TCLP metals	<u> </u>		<b> </b>				due 11/1110		
0	<u> </u>	ļ!					<u>12</u> HOUR TURNAROUND		
11							DAY TURNAROUND		1.1
DELIVERED BY	••••				•			<u></u> ℃ ARRIVAL	ONICE Y/N
RELINQUISHED BY:	· · · · · · · · · · · · · · · · · · ·				т	IME:	20 Pm RECEIVED BY	DATE:	
Les Suren		D	10 126 ATE:	:		ME:		DATE:	<u>/33こ</u> TIME:
Na		//	C 127	1/0			15	1 1	
RELINQUISHED BY: /			ATE:	1	T	IME:	RECEIVED BY AND OWN	DATE: 10 121110	TIME
•								Ad Gr	raphics Prinking 570-888 14 - 15

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

2540-PM-BWM0347 Rev. 1/2011

pennsylvania

DEPARTMENT OF ENVIRONMENTAL PROTECTION

# FORM 26R CHEMICAL ANALYSIS OF RESIDUAL WASTE ANNUAL REPORT BY THE GENERATOR

typed or legik each attache	bly printed in the spaces d sheet as Form 26R,	ately completed. All reques provided. If additional sp reference the item numb ats needs to match the date	bace is necessary, iden ber and identify the d	tify Date Red	EP USE ONLY ceived & General Notes
General Refe	rence 287.54				
Date Prepare	d/Revised Fe	bruary 11, 2011			
	SECTION A.	<b>CLIENT</b> (GENERATO	R OF THE WASTE) IN	FORMATIO	N
Company Na		iel Stranfernandelangen, og Stadet 199 <mark>9. I van bleker talket i sener i sener i sener i sener i sener sener sen</mark>	en held the colonial all reach with a series of the series of the transformer of the transformer of the series	nana ta'naki tanya (1955-1967) karanga na Si Panying Bandal (1966)	
	ergy USA Inc.				
	y, Name of Parent Comp	bany			PA Generator ID#
Talisman En					/A
	iling Address Line 1	C	Company Mailing Addre	ss Line 2	
50 Pennwood				DI	
	dress Last Line – City	State PA	Zip+4	Phone (724) 814-	Ext
Warrendale	any Contact Last Name First Name MI				uffix
Brown	itact Last Name	Dina	141 E	3	XIIIL
Municipality	········		County		
Warrendale			Allegheny		
Contact Phon	e Ext	Contact Email Address	,		
(724) 814-53		dybrown@talismanusa.	com		
		ny Mailing Address (noted	above)?		Yes 🛛 No
		neration and storage. Was			
	J well pad site located at	368 Beaman Road, Columb	ia Township, Bradford Co	ounty, PA. The w	aste is temporarily
stored onsite.		······································			
Municipality	Columbia	County Bradf	ord	State	PA
		SECTION B. WAST			·
Residual	Resid	ual Waste		Unit of	Time
Waste Code		Description	Amount	Measure	Frame
804	Fracing Fluid Waste (		142		al
004	Fracing Fluid Waste	· · · · · · · · · · · · · · · · · · ·		🗌 lb 🛛 to	on 🔲 One Time
		1. GENERAL F			
a. pHRa			(based on analyses or k	nowledge)	
b. Physic	cal State	Liquid Waste (EPA Me			
		Solid (EPA Method 90	,		
		Gas (ambient tempera			
c. Physic	cal Appearance	Color Greyish Black			on
		Number of Solid or Liqui		One	
		Describe each phase of s	separation. <u>Sand</u>		
		2. CHEMICAL ANALY			
a. The re	sults of a detailed chem	nical characterization of the		n the	Yes No
	ctions, is attached.				
b. A deta	iled description of the v	vaste sampling method is	attached.		🗙 Yes 🗌 No
c. The qu attach		control procedures emplo	yed by the laboratory(i	es) is 👘	🗙 Yes 🗌 No
		waste determination is atta	ached.		X Yes No
	icable, a detailed explar actual chemical analys	nation supporting use of g		Yes	No N/A

		. PROCESS DESCRIPTIO				
a.	A detailed description of the the waste, as specified in th			esses producing	🛛 Yes	No No
b.	A schematic of the manufac as specified in the instruction		control processes pro	ducing the waste,	X Yes	No No
C.	If portions of the information a confidentiality claim, as de			on for 🗌 Yes	No No	🛛 N/A
	SECT	ION C. MANAGEN	<b>MENT OF RESIDU</b>	JAL WASTE		
			DISPOSAL FACILITY(I			
The	area below (ad.) will accommo	date the identification o	of two facilities. Attac	h additional sheets	if necessary	/.
a.	Solid waste permit number( 100361	s) for processing or disp	oosal facility being uti	lized.		
b.	Facility Name	McKean County Lar	ndfill			
ļ	Address Line 1	19 Ness Lane				
	Address Line 1	····				
	Address City State ZIP	Kane	PA	16735		
	Municipality	Kane	County	McKean		
C.	Facility Contact Name	Mike Manderfeld				
	Title	General Manager			<u></u>	
	Phone	814-778-9931	Email Address	manderfeld@gm	nail.com	
d.	Volume of waste shipped to	processing or disposal	facility in the previou	s vear.		
	142	🗋 cuyd 🔲 gal	🗌 lb 🛛 to		)	
a.	Solid waste permit number(	s) for processing or disp	oosal facility being uti	lized.		
b.	Facility Name				<u></u>	
	Address Line 1					
	Address Line 1					
	Address City State ZIP					
	Municipality		County			
с.	Facility Contact Name					
	Title					
	Phone		Email Address			
d.	Volume of waste shipped to	processing or disposal	facility in the previou	s vear.		
	]	] cu yd 🛛 🗍 gal		•	)	
			IEFICIAL USE			
a.	Has the waste been approve	d for beneficial use?			🗌 Yes	🛛 No
	If "Yes", list the general per	nit number or approval	number.			
b.	Volume of waste beneficially	_ `_ `				
	0	]cuyd 🗌 gal	🗌 lb 🗌 toi	n (check one)	)	

SECTION D. CERTIFICATION
I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this Annual Report and all attached documents and that based upon my inquiry of those individuals immediately responsible for obtaining the information, I verify that the submitted information is true, accurate and complete to the best of my knowledge. I understand that the submission of false information herein is made subject to the penalties of 18 Pa. C.S §4904, relating to unsworn falsification to authorities, which include fine and imprisonment.
Check the following, if applicable:
I certify the information required in Section B-1, General Properties was supplied to the Department for the yea and has not changed.
Form Submitted: Derm 26R
Other (specify)
Date Submitted:
I certify the information required in Section B-2, Chemical Analysis was supplied to the Department for the year and has not changed.
Form Submitted:  Form 26R
Other (specify)
Date Submitted:
I certify the information required in Section B-3, Process Description and Schematic, was supplied to the Departmen for the year and has not changed.
Form Submitted: Form 26R
Other (specify)
Date Submitted:
Name of Responsible Official         Title         Environmental Specialist
Dina Brown
Signature In Glen Date 2/25/11

PA ID #: 08-00380 NY ID # 11216	Easte 2566 Pe Say	ərn İ ənnsy re, P/	nalytics, In Division /Ivania Ave. A 18840	C.	Work	Order: 101	12518
		• •	888-0169 888-0717				
SEND DATA TO:							
NAME: Steve Gridley				W	O#: 1011	2518	
COMPANY: Talisman Energy USA	, Inc.	•					
ADDRESS: 337 Daniel Zenker Dr	-			PA	AGE: 1 of	4	
Horseheads, NY 1484	15			P	D#:		
	-		FRONT	P۱	NS ID#		
PHONE: (607) 731-0145			EPORT				
FAX: (607) 562-4001							
Pad							
RECEIVED FOR LAB BY: SCP	DATE	: 11/1	16/2010 16:40			Р	age 1 of 4
SAMPLE: Flowback Sand		Lab II	D: 10112518-001A	Compo	site		
SAMPLED BY: SG	Sam		e: 11/16/2010 13:50				
Test	Result		Method	<u>SLOQ</u>	Analysis Start	Analysis End	Analyst *
Methanol	< 10 mg/Kg	N	Alcohols by FID	10	11/17/10 13:51	11/17/10	KMG-CV
Ethanol	< 10 mg/Kg	N	Alcohols by FID	10	11/17/10 13:51	11/17/10	KMG-CV
Isopropanol	< 10 mg/Kg	N	Alcohols by FID	10	11/17/10 13:51	11/17/10	KMG-CV
t-Butanol	< 10 mg/Kg	N	Alcohols by FID	10	11/17/10 13:51	11/17/10	KMG-CV
n-Propanol	< 10 mg/Kg	N	Alcohols by FID	10	11/17/10 13:51	11/17/10	KMG-CV
Isobutanol	< 10 mg/Kg	N	Alcohols by FID	10	11/17/10 13:51	11/17/10	KMG-CV
n-Butanol	< 10 mg/Kg	N	Alcohols by FID	10	11/17/10 13:51	11/17/10	KMG-CV
Sodium	1350 mg/Kg-dry		EPA 6010B	70.3	11/18/10 9:00	. 11 <b>/18/10</b>	GSR-CV
Bromine	<0.46 mg/kg	- <b>N</b>	HACH 8167	0.05	11/18/10 9:48	11/18/10	SMH-CV
1,1-Dichloroethene	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Methylene chloride	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
2-Butanone	< 0.213 mg/Kg-dry		EPA 8260B	0.213	11/17/10 21:01	11/17/10	DN-CV
trans-1,2-Dichloroethene	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
1,1-Dichloroethane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
cis-1,2-Dichloroethene	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Chloroform	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
1,1,1-Trichloroethane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Carbon tetrachloride	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Benzene	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
1,2-Dichloroethane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Trichloroethene	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
1,2-Dichioropropane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Dibromomethane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Bromodichloromethane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
cis-1,3-Dichloropropene	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
REMARKS							

Where the analytical method has been performed under NELAP certification, the analysis has met all of the requirements of the NELAC standard unless otherwise noted on the Analytical Report.

* CV = Benchmark Analytics, Inc. Center Valley, PA; SA = Benchmark Analytics, Inc. Sayre, PA

N Parameter is not NELAC certified

U Ammonia sample not distilled

MANAGER

Carrie	M.	Davis

DATE: 11/23/2010

PA ID #: 08-6 NY ID # 112		Easte 2566 Pe Say Phone:	ərn I ənnsy re, PA (570)	nalytics, In Division /Ivania Ave. A 18840 888-0169 888-0717	IC.	Work	Order: 101	12518
SEND DATA	TO:							
NAME:	Steve Gridley	1			W	<b>/O#: 101</b> 1	2518	
COMPANY: ADDRESS:	Talisman Energy USA, 337 Daniel Zenker Dr	inc. ,			P	AGE: 2 of	4	
ADDINE00.	Horseheads, NY 1484	5			D	O#:		
PHONE: FAX:	(607) 731-0145 (607) 562-4001	TES	ST RE	EPORT	P	WS ID#		
Pad			1 1.1 1.1 1.1 1. 					
	FOR LAB BY: SCP	DATE	: 11/1	6/2010 16:40			P	age 2 of 4
Toluene		< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
4-Methyl-	2-pentanone (MIBK)	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
trans-1,3-	Dichloropropene	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
1,1,2-Tric	hloroethane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Tetrachlo	roethene	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Dibromod	chloromethane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
1,2-Dibroi	moethane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Chlorober		< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
	etrachloroethane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Ethylbenz		< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
m,p-Xyler	ne	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
o-Xylene	a and an an an an an	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Xylenes,		< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Bromofor		< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
	etrachloroethane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
	hloropropane	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
	probenzene	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
	probenzene	< 0.043 mg/Kg-dry		EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
•	probenzene	< 0.043 mg/Kg-dry	•	EPA 8260B	0.043	11/17/10 21:01	11/17/10	DN-CV
Chloride Formaldel	huda	2540 mg/Kg-dry	N	EPA 300.0 NIOSH 3500	53.8 1.0	11/18/10 15:13 11/19/10 7:45	11/19/10 11/19/10	HDP-CV
Percent M	•	3.6 mg/Kg-dry 6.0 %		SM2540G	1.0	11/17/10 9:00	11/19/10	LTW-CV IC-SA
SAMPLE: FIG		· · · ·	iah I⊓	t 10112518-001B	Сотро	·		
	D BY: SG	Samp		: 10/16/2010 13:50	•			
Test		Result		Method	<u>SLOQ</u>	Analysis Start	Analysis End	Analyst *
<u></u>				Moisture Calc.	0:01	11/17/10 9:00	11/18/10	IC-SA
Moisture		6.01 %		Moisture Calc.	0.01	11/11/10 5:00	11/10/10	10-04

Where the analytical method has been performed under NELAP certification, the analysis has met all of the requirements of the NELAC standard unless otherwise noted on the Analytical Report. * CV = Benchmark Analytics, Inc. Center Valley, PA; SA = Benchmark Analytics, Inc. Sayre, PA

Ν Parameter is not NELAC certified

U Ammonia sample not distilled

MANAGER

$\wedge$		~ ·
Carrie	<u>M.</u>	Davis

DATE: 11/23/2010

PA ID #: 08-00380 NY ID # 11216	<b>Easter</b> 2566 Pen Sayre, Phone: (5	Analytics, In n Division nsylvania Ave. PA 18840 70) 888-0169	IC.	Work	Order: 101	12518
	Fax: (5)	70) 888-0717			•	
NAME: Steve Gridley COMPANY: Talisman Energy USA	Inc		W	'O#: 1011	2518	
ADDRESS: 337 Daniel Zenker Dr			P/	AGE: 3 of 4	4	
Horseheads, NY 148			P	O#:		
PHONE: (607) 731-0145 FAX: (607) 562-4001	TEST	REPORT	P	WS ID#		
Pad						
RECEIVED FOR LAB BY: SCP	DATE: 1	1/16/2010 16:40	a.		P	age 3 of 4
Free Liquid	< 0.1 %	EPA 9095A	0.1	11/16/10 17:00	11/16/10	IC-SA
pH	7.96@24.3°C	EPA 9045C	0.1	11/17/10 16:52	11/17/10	SG-SA
Phosphorus	18 mg/kg-dry	EPA 365.3	5	11/17/10 14:30	11/18/10	MED-SA
		· · · · · · · · · · · · · · · · · · ·	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
SAMPLE: Flowback Sand SAMPLED BY: SG		ab (D: 10112518-001C) Fime: 10/16/2010 13:50	Compo	site		
			SLOQ			
<u>Test</u>	Result	Method	10.00	Analysis Start	Analysis End	Analyst *
Ethylene glycol	< 10.00 mg/kg < 10.00 mg/kg	Glycols by 8015 Glycols by 8015	10.00 10.00	11/18/10 0:00 11/18/10 0:00	11/18/10 11/18/10	
Propytene glycol Sample Note: Analysis performed			10.00	11/10/10 0.00	11/10/10	
AMPLE: Flowback Sand		ab ID: 10112518-001D	Сотро	site		
SAMPLED BY: SG		Fime: 10/16/2010 13:50	Compo			
	Compio		<u>SLOQ</u>			
Test	Result	Method		Analysis Start	Analysis End	Analvst *
Phenolics, Total Recoverable Sample Note: Analysis performed I	11.1 mg/Kg DRY	EPA 9065	1.33	11/19/10 8:45	11/19/10	
SAMPLE: Flowback Sand		b ID: 10112518-001E	Compo	site.	. ,	
SAMPLED BY: SG	Sample 1	Fime: 10/16/2010 13:50	<u>SLOQ</u>			
Test	Result	Method	0000	Analysis Start	Analysis End	Analyst *
Total Petroleum Hydrocarbons	879 mg/Kg	EPA 9071		11/18/10 14:40	11/18/10	
rotari etoteun riyatotarbons	. Microboo Laboratasian In	c-Erie Division.				
Sample Note: Analysis performed t	by Microbac Laboratories, mi					
Sample Note: Analysis performed t	-	b ID: 10112518-001G	Compo	site		
-	Sand La	b ID: 10112518-001G Time: 11/17/2010 8:00	-	site		
Sample Note: Analysis performed to AMPLE: TCLP Extract of Flowback SAMPLED BY: SG	Sand La Sample T	ime: 11/17/2010 8:00	Compo <u>SLOQ</u>			Annh+
Sample Note: Analysis performed to AMPLE: TCLP Extract of Flowback SAMPLED BY: SG Test	Sand La Sample T <u>Result</u>	Time: 11/17/2010 8:00 <u>Method</u>	<u>SLOQ</u>	<u>Analysis Start</u>	Analysis End	
Sample Note: Analysis performed to AMPLE: TCLP Extract of Flowback SAMPLED BY: SG <u>Test</u> Mercury - TCLP extracted	Sand La Sample T <u>Result</u> < 0.0008 mg/L	ime: 11/17/2010 8:00 <u>Method</u> EPA 7470A	<u>SLOQ</u> 0.0008	<u>Analysis Start</u> 11/17/10 9:00	11/18/10	KW-CV
Sample Note: Analysis performed to AMPLE: TCLP Extract of Flowback SAMPLED BY: SG Test	Sand La Sample T <u>Result</u>	Time: 11/17/2010 8:00 <u>Method</u>	<u>SLOQ</u>	<u>Analysis Start</u>		

Where the analytical method has been performed under NELAP certification, the analysis has met all of the requirements of the NELAC standard unless otherwise noted on the Analytical Report.

* CV = Benchmark Analytics, Inc. Center Valley, PA; SA = Benchmark Analytics, Inc. Sayre, PA

N Parameter is not NELAC certified

U Ammonia sample not distilled

MANAGER

Canie	M.	Davis

___ DATE: ____

11/23/2010

PA ID #: 08- NY ID # 112		Eastern 2566 Penn Sayre, Phone: (57	<b>Analytics, In</b> n <b>Division</b> nsylvania Ave. PA 18840 70) 888-0169 70) 888-0717	IC.	Work	Order: 10'	12518
SEND DATA	A TO:						
NAME:	Steve Gridley			w	O#: 1011	2518	
COMPANY: ADDRESS:	Talisman Energy USA, Ir 337 Daniel Zenker Dr	IC.		PA	AGE: 4 of 4	1	
ADDRE33.	Horseheads, NY 14845				O#:	-	
PHONE: FAX:	(607) 731-0145 (607) 562-4001	TEST	TEST REPORT		WS ID#		
Pad							
	FOR LAB BY: SCP	DATE: 1	1/16/2010 16:40			P	age 4 of 4
Cadmiur	n - TCLP extracted	< 0.100 mg/L	EPA 6010B	0.100	11/18/10 13:15	11/18/10	GSR-CV
Chromiur	m - TCLP extracted	< 0.500 mg/L	EPA 6010B	0.500	11/18/10 13:15	11/18/10	GSR-CV
	TCLP extracted	0.106 mg/L	EPA 6010B	0.100	11/18/10 13:15	11/18/10	GSR-CV
Copper -					44140140 40.45	11/18/10	GSR-CV
••	CLP extracted	< 0.500 mg/L	EPA 6010B	0.500	11/18/10 13:15	11/10/10	001107
Lead - TO		< 0.500 mg/L < 0.100 mg/L	EPA 6010B EPA 6010B	0.500 0.100	11/18/10 13:15	11/18/10	
Lead - TO Nickel - T	CLP extracted	0					GSR-CV
Lead - TC Nickel - T Selenium	CLP extracted	< 0.100 mg/L	EPA 6010B	0.100	11/18/10 13:15	11/18/10	GSR-CV GSR-CV GSR-CV

Where the analytical method has been performed under NELAP certification, the analysis has met all of the requirements of the NELAC standard unless otherwise noted on the Analytical Report.

* CV = Benchmark Analytics, Inc. Center Valley, PA; SA = Benchmark Analytics, Inc. Sayre, PA

N Parameter is not NELAC certified

U Ammonia sample not distilled

MANAGER

ani M. Davis	ani	M.	Davis
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DATE: 11/23/2010

<u>------</u>

CHAIN OF CUSTODY		Be	PAGE 1 OF 1
REPORT TO: Talisman / UEG	25	566 Per.	
geowetlands@aol.com		W/O#: 10112518	
	REFRIGERATE SAMPLES		
	AFTER COLLECTION	DW DRINKING WATER SL SLUDGE NYDOH NYDEC PAD	IF YES, PLEASE ATTACH EP IS A QC PACKAGE NEEDED?
CONTACT OF OF		GW GROUND WATER SO SOIL SW SURFACE WATER HZ HAZARDOUS LANDFILL	
CONTACT Steve Gridley	TRANSPORT	WW WASTE WATER OTHER DE DEIONIZED WATER DI DISTILLED WATER PERSONAL OTHER	
PH# 607-731-0145 FAX#		/ // // H HYDROCHLORIC ACID OH SODIUM HYDROXIDE	IFYES, PLEASE ATTACH REQUIREMENTS
BILL TO: Talisman		S SULFURIC ACID AS ASCORBIC ACID	
``````````````````````````````````````	WITH ICE	S SO, SODIUM SULFITE NH, AMMONIUM CHLORIDE	ta no
PO# COMPLETIONS	3	- NONE Hg MERCURIC CHLORIDE	S LE LE
PROJECT DESCRIPTION	E. E.	An incomplete chain of custody may delay the 人で processing of your sample(s).	한 국 Please fill out all applicable areas
SAMPLER SIGNATURE / AFFILIATION	Series States	E E	Completely
CONTAINER SAMPLING POINT	Contraction of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second seco	SO3       SO0IUM SULFITE       NH, AMMONIUM CHLORIDE         Thio       SODIUM THIOSULFATE       ZN ZINC ACETATE         -       NONE       Hg       MERCURIC CHLORIDE         -       -       NONE       Hg         -       -       None       Hg         -       -       -       -         -       -       -       -         -       -       -       -       -         -       -       -       -       -         -       -       -       -       -       -         -       -       -       -       -       -       -         -       -       -       -       -       -       -       -	Please fill out all applicable areas completely LAB USE ONLY
1 Flowback Sand	1/16 1350 50 5 50-	U TPH, pH, Free Liquids, % Moisture	C ALC: N
2 0LM (12)	upu cleant 2 10	Chlorides, Sodium, Bromine	
E 3 ATPH	Can Illin	TCLP Metals: Ar, Ba, Cd, Cr, Pb, Hg, Se	
E 3 A-TPH 3 4 A-DH, Free Liquida % M	oisture, thos N	H3 Ag, Cu, Zn, Ni	
	1cohol, Formalde	Alcohols, Glycols, Formaldehyde	
6 . Glucol		O EPA 8260	
D 7 G- Phenols		Total Phosphorus, Total Phenolics	
A 8 \$ 8260		Ammonia - Nitrogen	
F J. F. T. Sanple			
G10 B. TCLP Metalo ~ Ci	INI, ZO	24 HOUR TURNAROUND	
11		DAY TURNAROUND	
RELINQUISHED BY	DATE: 16, 10	IME: 16 YO RECEIVED BY:	DATE: TIME:
RELINQUISHED BY:	DATE:	IME: RECEIVED BY:	DATE:
RELINQUISHED BY:	DATE:	IME: RECEIVED BY:	DATE: 10110 TIME: 10:40
		UTAN	Ad Graphics Printing 570-888-0685

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#### COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

# FORM 26R CHEMICAL ANALYSIS OF RESIDUAL WASTE ANNUAL REPORT BY THE GENERATOR

This form must be fully and accurately completed. All required information must be typed or legibly printed in the spaces provided. If additional space is necessary, identify each attached sheet as Form 26R, reference the item number and identify the date prepared. The date on attached sheets needs to match the date noted below.       DEP USE ONLY						
Genera	al Refe	rence 287.54				
Date P	repare	d/Revised F	ebruary 11, 2011			
			CLIENT (GENERATO	R OF THE WASTE) IN	FORMATION	
Compa						
		ergy USA Inc. y, Name of Parent Corr	npany		EPA	Generator ID#
		ergy Inc.			N/A	
		iling Address Line 1		Company Mailing Addre	ss Line 2	
		d Place	State	7in 14	Phone	Ext
Warre		dress Last Line – City	PA	<b>Zip+4</b> 15086	(724) 814-530	
		ntact Last Name	First Name	MI	Suffiz	
Brown			Dina	-		
Munici Warrei				County Allegheny		
Contac		e Ext	Contact Email Address	Allegheny		
(724) 8	314-53	21	dybrown@talismanusa			
			any Mailing Address (noted			Yes 🛛 No
lf 'No',			eneration and storage. Was			
stored		) J well pad site located	at 2196 Fallbrook Road, Arn	nenia Township, Bradiord	County, PA. The wa	iste is temporarily
			_		_	
Municipality Armenia County Bradford State PA						
SECTION B. WASTE DESCRIPTION Residual Residual Waste Unit of Time						
Waste			Description	Amount	Unit of Measure	Time Frame
804		Fracing Fluid Waste		316	🗌 cu yd 🔄 gal	
a. pH Range         7.27 to (based on analyses or knowledge)						
b.	-	cal State	Liquid Waste (EPA N		inomodgo)	
Solid (EPA Method 9095)						
Gas (ambient temperature & pressure)						
C.	Physic	cal Appearance	Color Greyish Blac			
Number of Solid or Liquid Phases of Separation One						
			Describe each phase of	separation. Sand		·····
2. CHEMICAL ANALYSIS ATTACHMENTS						
a. The results of a detailed chemical characterization of the waste, as described in the Xes No instructions, is attached.						
b.						Yes 🗌 No
С.					Yes 🗌 No	
	The results of the hazardous waste determination is attached.					
d.			waste determination is att ination supporting use of g		Yes	Yes No No X N/A

		the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s			and a state in a second	
		<b>PROCESS DESCRIPTION</b>				
a.	A detailed description of the the waste, as specified in the			s producing	🛛 Yes	🗌 No
b.	A schematic of the manufactors as specified in the instruction		ntrol processes produci	ng the waste,	🛛 Yes	No No
c.	If portions of the information a confidentiality claim, as des			r 🗌 Yes	No No	N/A
· · · · ·	SECTI	ON C. MANAGEM	n per se la marine de  WASTE	in en		
882.882.840 	· · · · · · · · · · · · · · · · · · ·	1. PROCESSING OR L	DISPOSAL FACILITY(IES)	1	•	
The a	rea below (ad.) will accommo				if necessary	•
a.	Solid waste permit number(s) 100361	for processing or dispo	sal facility being utilized	l.		
b.	Facility Name	McKean County Land	fill			
	Address Line 1	19 Ness Lane				
	Address Line 1					
	Address City State ZIP	Kane	PA	16735		· · · · · · · · · · · · · · · · · · ·
	Municipality	Kane	County M	cKean		
с.	Facility Contact Name	Mike Manderfeld				
	Title	General Manager				
	Phone	814-778-9931	Email Address m	anderfeld@gm	ail.com	
d.	Volume of waste shipped to p 316	rocessing or disposal fa	acility in the previous yea	<b>ar.</b> (check one)		
a.	Solid waste permit number(s)	for processing or dispo	sal facility being utilized	I.		
b.	Facility Name					
	Address Line 1					
	Address Line 1					
	Address City State ZIP			· · · · · ·		
	Municipality		County			
с.	Facility Contact Name					
	Title					
	Phone		Email Address			
d.	Volume of waste shipped to p	rocessing or disposal fa	cility in the previous ve	ar		
ч.		cu yd 🗌 gal	☐ lb ☐ ton	(check one)		
			FICIAL USE		5 ( ) .	
a.	Has the waste been approved	for beneficial use?			Yes	No No
	If "Yes", list the general perm	it number or approval ກເ	umber.			
b.	Volume of waste beneficially	used in the previous yea				
	0	cu yd 📃 gal	🔲 lb 🔄 ton	(check one)		

SECTION D. CERTIFICATION				
I certify, under penalty of law, that I have personally examined and am familiar with the information submitted in this Annual Report and all attached documents and that based upon my inquiry of those individuals immediately responsible for obtaining the information, I verify that the submitted information is true, accurate and complete to the best of my knowledge. I understand that the submission of false information herein is made subject to the penalties of 18 Pa. C.S. §4904, relating to unsworn falsification to authorities, which include fine and imprisonment.				
Check the following, if applicable:				
I certify the information required in Section B-1, General Properties was supplied to the Department for the year and has not changed.				
Form Submitted:	] Form 26R			
	Other (specify)			
Date Submitted:				
I certify the information re- and has not changed	quired in Section B-2, Chemical Analysis was supplied to the Department for the year .			
Form Submitted:	] Form 26R			
	Other (specify)			
Date Submitted:				
I certify the information required in Section B-3, Process Description and Schematic, was supplied to the Department for the year and has not changed.				
Form Submitted:	] Form 26R			
	Other (specify)			
Date Submitted:				
Name of Responsible Official	Title Environmental Specialist			
Dina Brown				
Signature <u>An</u> <u>A</u>	Date 2/25(/1			
· · · ·				