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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 |

÷.

| 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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5 App (C)

Talismin App 1(d)

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 |

NON-OPERATED Talisman

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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 |

٠

| | | 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. | | | | | | - | |
| D . | 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 | | |
| Contact Pho | | 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 . | 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 | | | | 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. | 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 | | | | | | | | | |
| . | 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) | | _ | |
| D . | 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. | | | | | | | |
|) , | 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- | | 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 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 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. | | | | | |
|) . | 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 | | | | | |
| 1 . | 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 . | 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. | | | | |
|) , | 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 | | | | |
| . | 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 | | | |
| | | | | | | |
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| | | | | diministry for the second | | |
| | | | | and the second | | |
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| | | | | Later Constitution | | |
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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 | | - / | | |
| | | | | |

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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 6 - 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 | STE DESCRIPTION | | | | |
| | 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. |
| 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 |
| | 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 | | | | |
| . | 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 | | | | |
| 4 . | 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 | | | |
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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. | | | | | | |
|) . | 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. | | | | | | |
|) . | | 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 . | 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 | IFORMATION | |
| 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. | | | | - | | - | |
|) . | 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. | 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 |
|) . | 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 | | | | | | | | | |
| . . | 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. | | | | | | | |
| . | | 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 . | 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

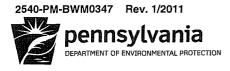


COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF WASTE MANAGEMENT

| 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 | d/Revised Fel | oruary 11, 2011 | | | |
| | | SECTION A. | CLIENT (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 | J/Revised Fe | bruary 11, 2011 | | | |
| | | SECTION A. | CLIENT (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 |
| | | | | | | |
| | | _ | e | | e | |
| 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 | d/Revised 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 | Columbia | County Bradfo | ord | State | РА | |
| | | | SECTION B. WAST | E DESCRIPTION | | ······································ | |
| 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) | | |
| D . | 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 | / used in the previous ye a cu yd gal | a r. | (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 ify 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 | C 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. |
| u . | [| 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. | CLIENT (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 | FION |
|-----------------------|---|-----------------------------|--|---|---|
| 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. | CLIENT (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 | First Name 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 | E DESCRIPTION | | |
| 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) | 1,884 ROPERTIES (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 | processing or disposal f 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. | CLIENT (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 | First Name 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 | E DESCRIPTION | | |
| | 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 |

| | | PROCESS DESCRIPTION & S | | | | |
|-------|---|---|--|---|--------------|---------------------------------------|
| 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. | CLIENT (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 pality | | County Bradfo | | ····· | State | PA | |
| | | stored in tanks onsite. | | ord | | | PA | i |
| Munic Resi | ipality idual | stored in tanks onsite. Columbia Resid u | County Bradfo SECTION B. WAST Jal Waste | ord | | State Jnit of | PA | Time |
| Munic Resi | ipality | stored in tanks onsite. Columbia Resid u | County Bradfo | ord | L M | State Jnit of easure | PA | |
| Munic Resi | ipality idual | stored in tanks onsite. Columbia Resid 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. | 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/ Revised 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 | N | | |
| 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 | J/Revised Fe | bruary 11, 2011 | | | |
| | SECTION A. | CLIENT (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 |
| | | | 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 | I 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) | nalytics, In Division ylvania Ave. A 18840) 888-0169) 888-0717 | IC. | Work | Order: 101 | 0 407 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: | | | | | | | | |

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Parameter is not NELAC certified Ν

U Ammonia sample not distilled

| Carrie | M. | Davis | |
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| | | | |

DATE: 11/3/2010

| PA ID #: 08- NY ID # 112 | | Easte 2566 Pe Sayn Phone: (| Benchmark Analytics, Inc Eastern Division 2566 Pennsylvania Ave. Sayre, PA 18840 Phone: (570) 888-0169 Fax: (570) 888-0717 | | | C. 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, 1,1,2- 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, 3- 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 | |

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Parameter is not NELAC certified Ν

υ Ammonia sample not distilled

MANAGER

| ani | M. | Davis |
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| <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 07 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 | | |

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Parameter is not NELAC certified Ν

Ammonia sample not distilled U

·. ••

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 | KE | | | | 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> | | | | | | 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: | |
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| Na | | // | C 127 | 1/0 | | | 15 | 1 1 | |
| RELINQUISHED BY: / | | | ATE: | 1 | T | IME: | RECEIVED BY AND OWN | DATE: 10 121110 | TIME |
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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. | CLIENT (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 | MENT OF RESIDU | 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 /18/10 | GSR-CV |
| Bromine | <0.46 mg/kg | - N | 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 | /O#: 101 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 | Easter 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 | Analytics, In n Division 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 |
|--------------|-----|----|-------|
|--------------|-----|----|-------|

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 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 |

2540-PM-BWM0347 Rev. 1/2011
Performance Performance Rev. 1/2011
Performance Pe

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 | Zip+4 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 s | | | and a state in a second | |
|-----------------|---|--|---|---------------------------|---|---------------------------------------|
| | | PROCESS DESCRIPTION | | | | |
| 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 | ar. (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 | | | |
| · · · · | | | | |