Arkansas Department of Environmental Quality Permits Branch, Water Division 5301 Northshore Drive North Little Rock, AR 72118 (501) 682-0623

24 2013

PIPELINE HYDROST	CE OF INTENT TATIC TESTING DISCHARGE AL PERMIT ARG6700000				
APPLICANT INFORMATION	PROJECT INFORMATION				
1. Legal Name of Applicant (Operator): SourceGas Arkansas Inc.	1. Name of the Project: Loop Line Phase 1 - Part 2				
2. Applicant Legal Address: PO Box 13288	2. Project Physical Location: Dickson Road				
3. Applicant City: Fayetteville	3. Project City: Hiwasse         4. State: AR       Zip: 72739				
4. State: AR Zip: 72703					
5. Applicant Telephone Number: 479-575-1458	6. Project Contact Person and Telephone:				
6. Applicant Type (check one): (Note Certification)	Contact Person Name: Amanda Swope				
State Federal Partnership Sole Proprietorship Corporation*	Contact Person Title: EHS&T Coordinator				
*State of Incorporation: AR	Contact Person Telephone Number: 479-575-1458				
7. Permit and DMR send to:	10. Project Latitude: <u>36° 25' 27.82</u> "				
ATTN: Amanda Swope	Longitude: <u>94° 20' 49.47</u> "				
Address: PO Box 13288	12. Additional Project Location Information:         Section: 12 Township: 20 Range: 32				
City: Fayetteville					
State: AR Zip: 72703	Project County: Benton				
8. Cognizant Official: Amanda Swope	13. Facility/Project NAICS Codes: 2212				
Cognizant Title: EHS&T Coordinator	Type of Business: Natural gas distribution				
Cognizant Telephone: 479-575-1458					
OUTFAL	LINFORMATION				
1. Outfall Number: 1	4. Estimated Volume of Discharge: 10000 gallons				
(a) Stream Segment: 3I	5. Estimated Rate of Discharge: 0.01 MGD				
(b) Hydrologic Basin Code: 11070206	6. Source of Test Water: Gravette City Water				
(c) Outfall Latitude: <u>36° 25' 27.82</u> " Longitude: <u>94° 20' 49.47</u> "	7. Pipeline/Vessel: USED VIRGIN OTHER:				
(d) Section: <u>12</u> Township: <u>20</u> Range: <u>32</u>	8. Describe material from which pipeline/vessel was constructed: steel				
(e) County: Benton	9. Type of fluid normally contained/transported through pipe/vessel: natural gas				
(f) Start Date: <u>11/1/13</u> End Date: <u>11/1/14</u>	10. Corrosion Inhibitors used: Yes No X If yes, brief description (Including any potentially toxic constituents)				
2. Name of Receiving Stream: tributaries of Spavinaw Creek					
	r Act section 303(d) list of impaired waters or have an approved TMDL? ist the Receiving Stream(s):				

WATER DIVISION 5301 NORTHSHORE DRIVE / NORTH LITTLE ROCK, ARKANSAS 72118 / PHONE 501-682-0623 / FAX 501-682-0880 www.adeq.state.ar.us ARG670000 NOI / Revision date 6/30/2008

### Arkansas Department of Environmental Quality Permits Branch, Water Division 5301 Northshore Drive North Little Rock, AR 72118 (501) 682-0623

1. Outfall Number: N/A	. Estimated Volume of Discharge: gallons				
(a) Stream Segment:	5. Estimated Rate of Discharge: MGD				
(b) Hydrologic Basin Code:	6. Source of Test Water:				
(c) Outfall Latitude:°'" Longitude:°'"	7. Pipeline/Vessel: USED VIRGIN OTHER:				
(d) Section: Township: Range:	8. Describe material from which pipeline/vessel was constructed:				
(e) County:	9. Type of fluid normally contained/transported through pipe/vessel:				
(f) Start Date: End Date:	10. Corrosion Inhibitors used: Yes No No III If yes, brief description (Including any potentially toxic constituents)				
2. Name of Receiving Stream:					
	Act section 303(d) list of impaired waters or have an approved TMDL? t the Receiving Stream(s):				
ADDITIONAL OUTFALLS CAN ADDED USING SEPARATE ATTACHED PAGES.					
ADDITIONAL PERMIT INFORMATION					
<ol> <li>Is the permittee capable of meeting the applicable effluent lin</li> <li>* If the answer is NO, <b>DO NOT</b> submit the NOI for permit co</li> </ol>					
2. Facility has Individual NPDES Permit: YES (Permit)	Number) 🛛 NO				
3. Disclosure Statement: Arkansas Code Annotated Section 8-1-106 requires that all applicants for the issuance or transfer of any permit, license, certification or operational authority issued by the Arkansas Department of Environmental Quality (ADEQ) file a disclosure statement with their applications. The filing of a disclosure statement is mandatory. No application can be considered complete without one. You must submit a new disclosure statement even if you have one on file with the Department. The form may be obtained from ADEQ web site at: <a a="" arkansas."<="" certify="" corporation,="" facility="" href="http://www.adeq.state.ar.us/disclosure_state.ar.us/discl&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td colspan=5&gt;CERTIFICATION&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td colspan=4&gt;" i="" if="" is="" it="" of="" registered="" secretary="" state="" td="" that,="" the="" this="" with=""></a>					
"I certify that the cognizant official designated in this Application is qualified to act as a duly authorized representative under the provisions of 40 CFR 122.22(b). If no cognizant official has been designated, I understand that the Department will accept report signed only by the Applicant. I certify under penalty of law that this document and all attachments were prepared under my direction of supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitter is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."					
Typed or Printed Name: Doug White <u>foot</u>	Title: Senior Vice President, Operations				
Signature:	Date: 10/21/13				
$\bigcirc$					

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			ADD	TION	AL INF	ORMATIO	N			
1. Additional locat	ion descr	iption:								
2. Additional Com	ments:									
Permittee please of	check the	e followin	g:							
Complete NOI:	Yes	NO	Disclosure:	Yes	NO	Map:	Yes	NO	Yes NO Fee: 🛛 🗌	



## Arkansas Secretary of State



ARKANSAS SECRETARY OF STATE Mark Martin

### Search Incorporations, Cooperatives, Banks and Insurance Companies

Printer Friendly Version

LLC Member information is now confidential per Act 865 of 2007

Use your browser's back button to return to the Search Results

Begin New Search For service of process contact the <u>Secretary of State's office</u>.

Corporation Name	SOURCEGAS ARKANSAS INC.
Fictitious Names	ASSOCIATED NATURAL GAS COMPANY
Filing #	100003980
Filing Type	For Profit Corporation
Filed under Act	Dom Bus Corp; 576 of 1965
Status	Good Standing
Principal Address	
Reg. Agent	NATIONAL REGISTERED AGENTS, INC. OF AR
Agent Address	124 W CAPITOL AVE, STE 1900
	LITTLE ROCK, AR 72201
Date Filed	06/05/1978
Officers	SEE FILE, Incorporator/Organizer KAREN HURST, Tax Preparer WILLIAM N CANTRELL, President MICHAEL NOONE, Secretary DOUGLAS D WHITEFOOT, Vice-President ANDREW J WALLS, Treasurer STEVE ROCHELEAU, Controller
Foreign Name	N/A
Foreign Address	
State of Origin	N/A
Purchase a Certificate of Good Standing for this Entity	Pay Franchise Tax for this corporation

http://www.sos.arkansas.gov/corps/search\_corps.php?DETAIL=23076&corp\_type\_id=&... 10/28/2013

### **Cousins, Sarah**

From:Solaimanian, JamalSent:Thursday, November 07, 2013 1:39 PMTo:Cousins, SarahSubject:RE: disclosure statement

It is fine. Please just make sure she gets it to us. Thanks.

Jamal Solaimanian, Ph.D., P.E.

Engineering Supervisor Water Division, ADEQ 501-682-0620 jamal@adeq.state.ar.us

From: Cousins, Sarah Sent: Thursday, November 07, 2013 8:33 AM To: Solaimanian, Jamal Subject: FW: disclosure statement

Your call

From: Swope, Amanda [mailto:Amanda.Swope@sourcegas.com] Sent: Thursday, November 07, 2013 8:20 AM To: Cousins, Sarah Subject: RE: disclosure statement

I have had the hardest time getting this signed. I know it's not notarized yet, but I'm working on that today and I'll get it to you as soon as possible. Could we please continue the processing of the permit so I'm able to discharge the water?

From: Cousins, Sarah [mailto:cousins@adeq.state.ar.us] Sent: Monday, October 28, 2013 2:52 PM To: Swope, Amanda Subject: RE: disclosure statement

Ah, ok, we actually need one for this year, so I'll need you to send me an updated one. Everything else in the application is complete and I have it all entered so it will move pretty quickly after I get that.

Thanks, Sarah Cousins

From: Swope, Amanda [mailto:Amanda.Swope@sourcegas.com]
Sent: Monday, October 28, 2013 2:36 PM
To: Cousins, Sarah
Subject: RE: disclosure statement

Our most recent one is attached.

From: Cousins, Sarah [mailto:cousins@adeq.state.ar.us] Sent: Monday, October 28, 2013 1:42 PM

# **To:** Swope, Amanda **Subject:** disclosure statement

Amanda,

I know SourceGas Arkansas Inc. gets permits all the time, but I can't seem to find a very recent disclosure statement. Do you have one you could send me for this Loop Line Phase 1 – Part 2 project in Hiwasse?

Thanks, Sarah Cousins Permit Engineer ADEQ-Water Division 501-682-0627

# INSTRUCTIONS FOR DISCLOSURE STATEMENT

Arkansas Code Annotated Section 8-1-106 requires that all applicants for the issuance, or transfer of any permit, license, certification or operational authority issued by the Arkansas Department of Environmental Quality (ADEQ) file a disclosure statement with their applications. The filing of a disclosure statement is mandatory. No application can be considered complete without one.

Disclosure statement means a written statement by the applicant that contains:

- The full name and business address of the applicant and all affiliated persons;
- The full name and business address of any legal entity in which the applicant holds a debt or equity interest of at least five percent (5%) or that is a parent company or subsidiary of the applicant, and a description of the ongoing organizational relationships as they may impact operations within the state;
- A description of the experience and credentials of the applicant, including any past or present permits, licenses, certifications, or operational authorizations relating to environmental regulation;
- A listing and explanation of any civil or criminal legal actions by government agencies involving environmental protection laws or regulations against the applicant and affiliated persons in the ten (10) years immediately preceding the filing of the application, including administrative enforcement actions resulting in the imposition of sanctions, permit or license revocations or denials issued by any state or federal authority, actions that have resulted in a finding or a settlement of a violation, and actions that are pending;
- A listing of any federal environmental agency and any other environmental agency outside this state that has or has had regulatory responsibility over the applicant; and
- Any other information the Director of the Arkansas Department of Environmental Quality may require that relates to the competency, reliability, or responsibility of the applicant and affiliated persons.

## **Exemptions:**

The following persons or entities are not required to file a disclosure statement:

- Governmental entities, consisting only of subdivisions or agencies of the federal government, agencies of the state government, counties, municipalities, or duly authorized regional solid waste authorities as defined by § 8-6-702. (This exemption shall not extend to improvement districts or any other subdivision of government which is not specifically instituted by an act of the General Assembly.)
- Applicants for a general permit to be issued by the department pursuant to its authority to implement the National Pollutant Discharge Elimination System for storm water discharge.
- If the applicant is a publicly held company required to file periodic reports under the Securities and Exchange Act of 1934 or a wholly owned subsidiary of a publicly held company, the applicant shall not be required to submit a disclosure statement, but shall submit the most recent annual and quarterly reports required by the Securities and Exchange Commission which provide information regarding legal proceedings in which the applicant has been involved. The applicant shall submit such other information as the director may require that relates to the competency, reliability, or responsibility of the applicant and affiliated persons.

## **Exemptions continued:**

The following permits, licenses, certifications, and operational authorizations are also exempt from submitting a disclosure statement:

- Hazardous Waste Treatment, Storage, and Disposal Permit Modifications (Class 1, 2, and 3), as defined in Arkausas Pollution Control and Ecology Commission (APC&EC) Regulation 23;
- Phase 1 Consultants, as defined in APC&EC Regulation 32;
- Certifications for Operators of Commercial Hazardous Waste Facilities, as defined in APC&EC Regulation 23 § 264.16(f);
- Regulated Storage Tank Contractor or Individual License Renewals as defined in APC&EC Regulation 12;
- Certifications for Persons Operating and Maintaining Underground Storage Tank Systems which Contain Regulated Substances, as defined in APC&EC Regulation 12.701, et. seq.;
- Laboratory Certifications, as defined in Ark. Code Ann. § 8-2-201, et. seq.;
- Individual Homeowners seeking coverage under General Permit ARG5500000;
- Wastewater Operator Licenses, as defined in APC&EC Regulation 3;
- Water Permit Modifications for permits issued under the authority of the Arkansas Water and Air Pollution Control Act (Ark. Code Ann. §8-4-101, et. seq.);
- Solid Waste Permit Modifications for permits issued under APC&EC Regulation 22;
- Solid Waste Landfill Operator License Renewals, as defined in Regulation No. 27;
- Air Permit Modifications for permits issued under APC&EC Regulations 18, 19, and 26; and
- Asbestos Certification Renewals, as defined in Regulation 21.

Deliberate falsification or omission of relevant information from disclosure statements shall be grounds for civil or criminal enforcement action or administrative denial of a permit, license, certification, or operational authorization.

# ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY DISCLOSURE STATEMENT

Instructions for the Completion of this Document:

- A. Individuals, firms or other legal entities with no changes to an ADEQ Disclosure Statement, complete items 1 through 5 and 18.
- B. Individuals who never submitted an ADEQ Disclosure Statement, complete items 1 through 4, 6, 7, and 16 through 18.
- C. Firms or other legal entities who never submitted an ADEQ Disclosure Statement, complete 1 through 4, and 6 through 18.

Mail to: ADEQ DISCLOSURE STATEMENT [List Proper Division(s)] 5301 Northshore Drive North Little Rock, AR 72118-5317 Hand Deliver to: ADEQ DISCLOSURE STATEMENT [List Proper Division (s)] 5301 Northshore Drive North Little Rock, AR 72118-5317

1. APPLICANT: (Full Name)
SourceGas Arkansas Inc.
2. MAILING ADDRESS (Number and Street, P.O.Box Or Rural Route) :
PO Box 13288
3. CITY, STATE, AND ZIPCODE:
Fayetteville, AR 72703-1002
4. (check all that apply.)
Individual X Corporate or Other Entity
Permit         X         License         X         Operational Authority
🔀 New Application 🕅 Modification 🖾 Renewal Application (If no changes from previous disclosure statement, complete number 5 and 18.)
🗙 Air 🔀 Water 🔀 Hazardous Waste 🔀 Regulated Storage Tank 🗌 Mining 🔀 Solid Waste
Environmental Preservation and Technical Service
5. Declaration of No Changes:
The violation history, experience and credentials, involvement in current or pending environmental lawsuits, civil and criminal, have not changed since the last Disclosure Statement I filed with ADEQ on
Signature of Individual or Authorized Representative of Firm or Legal Entity (Also complete #18.)

6. Describe the experience and credentials of the Applicant, including the receipt of any past or present permits, licenses, certifications or operational authorization relating to environmental regulation. (Attach additional pages, if necessary.)

SourceGas Arkansas Inc. operated as Arkansas Western Gas Company prior to July 1, 2011, and has held numerous air, water, hazardous waste, UST, stormwater, and hydrostatic testing permits since 1991. Currently SourceGas Arkansas Inc. operates several natural gas compressor stations and a LNG plant under GOP, SIP and Title V permits. These air permits are 1359-AR-3, 1447-AR-4, 1551-A, 1868-AGP-018, 1868-AGP-0285, 1868-AGP-019, 1868-AGP-262, 1868-AGP-123, 1310-AOP-R2, 1185-AOP-R5, 1450-AOP-R3, 1378-AOP-R3, and 1972-AOP-R2.

There are 2 facilities with USTs: 470016137 and 720000015.

Active hazardous waste generator permitted facilities include: AR0000024505, ARD983287871, ARD983286642, ARR000002360, and ARD983288325.

7. List and explain all civil or criminal legal actions by government agencies involving environmental protection laws or regulations against the Applicant \* in the last ten (10) years including:

1. Administrative enforcement actions resulting in the imposition of sanctions;

2. Permit or license revocations or denials issued by any state or federal authority;

3. Actions that have resulted in a finding or a settlement of a violation; and

4. Pending actions.

(Attach additional pages, if necessary.)

ADEQ Consent Administrative Order LIS: 10-064, Davis Compressor Station, AFIN: 24-00090

ADEQ Consent Administrative Order LIS: 12-048, SourceGas Operations Facility, AFIN: 72-00792

ADEQ Consent Administrative Order LIS: 12-131, Davis Compressor Station, AFIN: 24-00090

\* Firms or other legal entities shall also include this information for all persons and legal entities identified in sections 8-16 of this Disclosure Statement.

8. List all officers of the Applicant. (Add addition	
NAME: William Cantrell	TITLE: CEO
NAME: William Cantrell STREET: 600 12th Street, Suite 300	
CITY, STATE, ZIP: Golden, Colorado 80401	
NAME: Michael Noone	TITLE: President
STREET: 600 12th Street, Suite 300	
CITY, STATE, ZIP: Golden, Colorado 80401	
NAME: Douglas Whitefoot	TITLE: Sr. Vice President, Operations
STREET: 600 12th Street, Suite 300	
CITY, STATE, ZIP: Golden, Colorado 80401	
9. List all directors of the Applicant. (Add addition	nal pages, if necessary.)
NAME: William Cantrell	TITLE: CEO
STREET: 600 12th Street, Suite 300	
CITY, STATE, ZIP: Golden, Colorado 80401	
NAME: Michael Noone	TITLE: President
STREET: 600 12th Street, Suite 300	
CITY, STATE, ZIP: Golden, Colorado 80401	
NAME:	TITLE:
10. List all partners of the Applicant. (Add additi	
10. List all partners of the Applicant. (Add additi	
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10. List all partners of the Applicant. (Add additing NAME:	onal pages, if necessary.) TITLE:
10. List all partners of the Applicant. (Add additi         NAME:         STREET:         CITY, STATE, ZIP:         11. List all persons employed by the Applicant in a NAME:         NAME:         CITY, STATE, ZIP:         NAME:         CITY, STATE, ZIP:         NAME:         NAME:         NAME:         NAME:         NAME:	onal pages, if necessary.) TITLE:

	ontrol more than five percent (5%) of the Applicant's debt or equity.
NAME: SourceGas Inc.	TITLE:
STREET: 600 12th Street, Suite 300	
CITY, STATE, ZIP: Golden, Colorado 80401	
NAME:	TITLE:
STREET:	
CITY, STATE, ZIP:	
NAME:	TITLE:
13. List all legal entities, in which the Applicant h	olds a debt or equity interest of more than five percent (5%).
NAME, NONE	TITLE:
CITT, STATE, ZIP:	
NAME	TITLE;
	ακαι το τη
	TITLE:
CITY, STATE, ZIP:	
14. Lister normal someone of the Applicant De	scribe the parent company's ongoing organizational relationship with the Applicant.
14. List any parent company of the Applicant. De	seribe the parent company's ongoing organizational relationship with the Apprendix.
NAME: SourceGas Inc.	
NAME: 600 12th Streat Suite 200	
STREET: 600 12th Street, Suite 300	
STREET: 600 12th Street, Suite 300 CITY, STATE, ZIP: Golden, Colorado 80401	
STREET: 600 12th Street, Suite 300	
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STREET: 600 12th Street, Suite 300 CITY, STATE, ZIP: Golden, Colorado 80401 Organizational Relationship:	
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STREET: 600 12th Street, Suite 300 CITY, STATE, ZIP: Golden, Colorado 80401 Organizational Relationship: SourceGas Inc., a Delaware corporation, c	wns 100% of the issued and outstanding shares of SourceGas Arkansas Inc.
STREET: 600 12th Street, Suite 300 CITY, STATE, ZIP: Golden, Colorado 80401 Organizational Relationship: SourceGas Inc., a Delaware corporation, c	wwns 100% of the issued and outstanding shares of SourceGas Arkansas Inc.
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STREET:       600 12th Street, Suite 300         CITY, STATE, ZIP:       Golden, Colorado 80401         Organizational Relationship:       SourceGas Inc., a Delaware corporation, c         SourceGas Inc., a Delaware corporation, c         15. List any subsidiary of the Applicant. Describe         NAME:         none         STREET:	wns 100% of the issued and outstanding shares of SourceGas Arkansas Inc.
STREET:       600 12th Street, Suite 300         CITY, STATE, ZIP:       Golden, Colorado 80401         Organizational Relationship:       SourceGas Inc., a Delaware corporation, c         SourceGas Inc., a Delaware corporation, c         15. List any subsidiary of the Applicant. Describe         NAME:         none         STREET:         CITY, STATE, ZIP:	wns 100% of the issued and outstanding shares of SourceGas Arkansas Inc.
STREET:       600 12th Street, Suite 300         CITY, STATE, ZIP:       Golden, Colorado 80401         Organizational Relationship:       SourceGas Inc., a Delaware corporation, c         SourceGas Inc., a Delaware corporation, c         15. List any subsidiary of the Applicant. Describe         NAME:         NONE	wns 100% of the issued and outstanding shares of SourceGas Arkansas Inc.
STREET:       600 12th Street, Suite 300         CITY, STATE, ZIP:       Golden, Colorado 80401         Organizational Relationship:       SourceGas Inc., a Delaware corporation, c         SourceGas Inc., a Delaware corporation, c         15. List any subsidiary of the Applicant. Describe         NAME:         none         STREET:         CITY, STATE, ZIP:	wns 100% of the issued and outstanding shares of SourceGas Arkansas Inc.
STREET:       600 12th Street, Suite 300         CITY, STATE, ZIP:       Golden, Colorado 80401         Organizational Relationship:       SourceGas Inc., a Delaware corporation, c         SourceGas Inc., a Delaware corporation, c         15. List any subsidiary of the Applicant. Describe         NAME:         none         STREET:         CITY, STATE, ZIP:	wns 100% of the issued and outstanding shares of SourceGas Arkansas Inc.
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STREET:       600 12th Street, Suite 300         CITY, STATE, ZIP:       Golden, Colorado 80401         Organizational Relationship:       SourceGas Inc., a Delaware corporation, c         SourceGas Inc., a Delaware corporation, c         15. List any subsidiary of the Applicant. Describe         NAME:         none         STREET:         CITY, STATE, ZIP:	wns 100% of the issued and outstanding shares of SourceGas Arkansas Inc.
STREET:       600 12th Street, Suite 300         CITY, STATE, ZIP:       Golden, Colorado 80401         Organizational Relationship:       SourceGas Inc., a Delaware corporation, c         SourceGas Inc., a Delaware corporation, c         15. List any subsidiary of the Applicant. Describe         NAME:         none         STREET:         CITY, STATE, ZIP:	wns 100% of the issued and outstanding shares of SourceGas Arkansas Inc.

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ITY, STATE, ZIP:	
. List all federal environmental agencics and any other environmental agencies outside this state that have or have had regulat	fory responsibility over th
plicant.	tory responsibility over th
SEPA Region 6	
S LFA Region o	

### **18. VERIFICATION AND ACKNOWLEDGEMENT**

The Applicant agrees to provide any other information the director of the Arkansas Department of Environmental Quality may require at any time to comply with the provisions of the Disclosure Law and any regulations promulgated thereto. The Applicant further agrees to provide the Arkansas Department of Environmental Quality with any changes, modifications, deletions, additions or amendments to any part of this Disclosure Statement as they occur by filing an amended Disclosure Statement.

DELIBERATE FALSIFICATION OR OMISSION OF RELEVANT INFORMATION FROM DISCLOSURE STATEMENTS SHALL BE GROUNDS FOR CIVIL OR CRIMINAL ENFORCEMENT ACTION OR ADMINISTRATIVE DENIAL OF A PERMIT, LICENSE, CERTIFICATION OR OPERATIONAL AUTHORIZATION.

# General Permit Route Sheet

HUC:	11070209					
Facility Name LOOP Line Phase - Partz					artz	
Permit Number ARG			670783		AFIN NO.*	04-02200
Stream Segment: 37		5 Receiving Stream:		unnamed trib of Spaninaw Creek		
Assigned			Activity		Initials	Date Complete/Entered
Sect.	Application Logged/Assign Tracking Number/Place in red folder with appropriate route sheet and filing folders (1-day)			KB	N/A	
Engineer	Completeness and Technical Review/Enter permit information into Database (3-days)			SC	117	
AA (Max of 5 business days)	AFIN req					(i18)
	Enter AFIN and other information into PDS and NPDES database prior to requesting invoice (same day)			The	11/5	
	Complete Invoice Request Form and submit Invoice Request (same day)			JP	r1 8/	
	Prepare Authorization letter and attach appropriate permit, forms (1-day)			JP	11/8	
Engineer	Review/organize folder for scanning (1- day)			S	11/12	
Engineer Supervisor	Review all the documents/permits/ perform technical review for the proposed project. (1-day)			$\bigcap$	11/13	
Assistant Chief	Review the documents and sign the authorization letter or the permit. (1-day)					
AA	Enter Int Status/Et Input eff database	fective	ve Date. date in access		TB	1119
Sect.	Mail original to applicant. Scan complete folder and place in appropriate E-drive folders. Update Zylab. Be sure to include this permit in weekly report, due every Tuesday by 2:00 P.M.			KB	11-19-13	
Sent email for Disclosure stad ament 10/28 DS received 11/7, signed but not notarized. Amanda swope will be sending us the REMARKS: notarized copy, Tamal says it's ok to proceed - 11/7						