



# NOTICE OF INTENT

Application for Coverage under General Permit 00000-WG-LA  
Land Application of Drilling Fluids



Tracking Permit No.: 00018-WG-LA      AFIN No.: 23-0000  
JAN 10 2008

### 1. Information on Operator Requesting Permit:

Name of Facility: LEONARD 1-7-H		
Contact Name: LARRY HADLEY	Title: CONST. SUPERINTENDENT	
Address: 23 NABCO AVE.	Fax: 501-548-6550	
City: CONWAY	State: AR	Zip Code: 72032
Phone Number: 501-548-6800	E-Mail: larry_hadley@swn.com	

### 2. Information on Contractor if different from Operator (a representative at the well site during drilling activities):

Name of Facility:		
Contact Name:	Title:	
Address:	Fax:	
City:	State:	Zip Code:
Phone Number:	E-Mail:	

### 3. Information on Land Application Site

Land application site Owner's Name: Inogene & Wilma Leonard		
Does land own by the operator:		
Yes _____ Please attach a copy of the deed or other legal document proving ownership.		
No <u>X</u> Please attach a copy of the lease agreement with landowner granting land application of drilling fluids.		
Address (NO P.O. BOXES): 1.9 Mi SW Damascus		
City: Damascus	State: AR	Zip Code: 72039
Latitude <u>35</u> ° <u>20</u> ' <u>39</u> " N	Longitude <u>92</u> ° <u>25</u> ' <u>35</u> " W	County: Faulkner
Proposed acreage for disposal: <u>2.7</u> ac	Application Rate: <u>325</u> gpm	Maximum Application Depth: <u>5.5</u> inches
Well Name: LEONARD 1-7-H	Field:	Section <u>7</u> Township <u>8N</u> Range <u>13W</u>
ADEQ Reserve Pit Tracking Permit No.:	Does loading rate for metals exceed limits: Yes _____ No <u>X</u>	
Nearest City/Town: Damascus	Name of & Distance to the Nearest Stream: <u>1890' E TO A TRIBUTARY OF BATESVILLE CREEK</u>	
Describe the location of and directions to the land application site with respect to roads, towns and other easily identifiable landmarks: At Intersection Hwy 65 & SH 124, Damascus, AR, turn W on SH 124 and travel 1.7 Mi to Leonard Loop Road, turn S onto Leonard Loop Rd and travel 0.3 Mi, follow Leonard Loop Road E 740' to Gas Well location in open field.		

- Is this applicant a corporation? Yes X No \_\_\_\_\_ If "Yes", the operator certifies by signature the certification below that the corporation is registered with the Secretary of State of Arkansas.
- The applicant certifies by signing certification below that a copy of NOI with a location map was submitted to the Arkansas Department of Health (ADH) and County Judge of the County listed above.

6. Applicant must also submit the following documents for ADEQ review with this NOI:

- a. Design and implementation of waste management plans shall be in accordance with all applicable State and Federal regulations and Department guidelines and policies.
- b. All waste management plans, construction plans, specifications and design calculations must be signed and approved by an Arkansas registered professional engineer.
- c. The technical information specified in the general permit.
- d. The operator must complete and submit a "Disclosure Statement" with this NOI. The Disclosure Form may be obtained from ADEQ on the website at [http://www.adeg.state.ar.us/disclosure\\_stmt.pdf](http://www.adeg.state.ar.us/disclosure_stmt.pdf).
- e. Fee of \$ 500.00 Check # \_\_\_\_\_

7. Cognizant Official (Duly Authorized Representative):

- a. All reports required by the permit, or other information requested by the Director, shall be signed by the applicant (or person authorized by the applicant) or by a duly authorized representative of that person. A person is a duly authorized representative only if:
  - (1) The authorization is made in writing by the applicant.
  - (2) The authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity such as the position of plant manager, superintendent, position of equal responsibility, or an individual or position having overall responsibility for environmental matters for the company.
  - (3) The authorization is submitted to the Director.
- b. The applicant hereby designates the following person as duly authorized representative, for signing reports required by the permit, and other information requested by the Director:

Typed or Printed Name	Title	Telephone No.
Signature	Date Signed	

The applicant certifies by signing certification below that the above named individual is qualified to act as a duly authorized representative. (NOTE: If no duly authorized representative is designated herein, the Department considers the applicant to be the cognizant official for the facility and only reports signed by the applicant will be accepted by the Department)

8. Certification and Signatory Requirements:

- a. Signature on Notice of Intent (NOI): The Notice of Intent must be signed below by a person authorized (Operator) under the provisions of state law. Applicants should be familiar with the provisions regarding signatory authority which are described in the general permit.
- b. Certification: The applicant and any person signing a document required under this permit must make the following certification:

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

DALE Walker	Production Manager	501-548-6810
Signature	Date Signed	