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Rev. 10-10

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APR 26 2012

State of West Virginia
Department of Environmental Protection - Office of Oil and Gas
Discharge Monitoring Report
Oil and Gas General Permit

WV GEOLOGICAL SURVEY
MORGANTOWN, WV

Company Name: Triad Hunter, LLC
API No: 47-095-02023 County: Tyler County
District: McElroy Well No: Everett Weese 1109
Farm Name: Roger Weese
Discharge Date/s From:(MMDDYY) 12/20/11 To: (MMDDYY) 01/03/12
Discharge Times. From: 06:00 pm To: 12:00 pm
Total Volume to be Disposed from this facility (gallons): 281,114.4 gallons
Disposal Option(s) Utilized (write volumes in gallons):

- (1) Land Application: _____ (Include a topographical map of the Area.)
- (2) UIC: 281,114.4 gallons Permit No. 387 Ohio Disposal Well 34-121-1995
- (3) Offsite Disposal: _____ Site Location: _____
- (4) Reuse: _____ Alternate Permit Number: _____
- (5) Centralized Facility: _____ Permit No. _____
- (6) Other method: _____ (Include an explanation)

Follow Instructions below to determine your treatment category:

Optional Pretreatment test: 10000 Cl- mg/l _____ DO mg/l

1. Do you have permission to use expedited treatment from the Director or his representative?
(Y/N) No If yes, who? _____ and place a four (4) on line 7.
If not go to line 2
2. Was Frac Fluid or flowback put into the pit? (Y/N) No If yes, go to line 5. If not, go to line 3.
3. Do you have a chloride value pretreatment (see above)? (Y/N) Yes If yes, go to line 4
If not, go to line 5.
4. Is the Chloride level less than 5000 mg/l? (Y/N) No If yes, then enter a one (1) on line 7.
5. Do you have a pretreatment value for DO? (See above) (Y/N) No If yes, go to line 6
If not, enter a three (3) in line 7.
6. Is the DO level greater than 2.5 mg/l?(Y/N) _____ If yes, enter a two (2) on line 7. If not, enter a three (3) on line 7.
7. 3 is the category of your pit. Use the Appropriate section.
8. Comments on Pit condition: _____

Name of Principal Exec. Officer: Rocky RODRIGZ
Title of Officer: SR. VP OF APALACHIAN OPERATIONS
Date Completed: 3-8-12

I certify under penalty of law that I have personally examined and am familiar with the information submitted on this document and all the attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

[Signature]
Signature of a Principal Exec. Officer or Authorized agent.

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Category 1
Sampling Results
API No : _____

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Parameter	Predischarge		Discharge		Units
	Limits	Reported	Limits	Reported	
pH	6-10	_____	6-10	_____	S.U
Settling Time	5	_____	N/A	N/A	Days
Fe	6	_____	6	_____	mg/l
D.O.	2.5	_____	2.5	_____	mg/l
Settleable Sol.	0.5	_____	0.5	_____	mg/l
Cl	5,000	_____	5,000	_____	mg/l
Oil	Trace	_____	Trace	_____	Obs.
TOC**		_____	Monitor	_____	mg/l
Oil and Grease		_____	Monitor	_____	mg/l
Total Al***		_____	Monitor	_____	mg/l
TSS		_____	Monitor	_____	mg/l
Total Mn	Monitor	_____	Monitor	_____	mg/l
Volume		_____	Monitor	_____	Gal
Flow		_____	Monitor	_____	Gal/min
Disposal Area		_____	Monitor	_____	Acres

*** Al is only reported if the pH is above 9.0

Category 2
Sampling Results
API No : _____

Parameter	Predischarge		Discharge		Units
	Limits	Reported	Limits	Reported	
pH	6-10	_____	6-10	_____	S.U
Settling Time	10	_____	N/A	N/A	Days
Fe	6	_____	6	_____	mg/l
D.O.	2.5	_____	2.5	_____	mg/l
Settleable Sol.	0.5	_____	0.5	_____	mg/l
Cl*	12,500	_____	12,500	_____	mg/l
Oil	Trace	_____	Trace	_____	Obs.
TOC**		_____	Monitor	_____	mg/l
Oil and Grease		_____	Monitor	_____	mg/l
Total Al***		_____	Monitor	_____	mg/l
TSS		_____	Monitor	_____	mg/l
Total Mn	Monitor	_____	Monitor	_____	mg/l
Volume		_____	Monitor	_____	Gal
Flow		_____	Monitor	_____	Gal/min
Disposal Area		_____	Monitor	_____	Acres

* Can be 25,000 with inspector's approval,

(Inspector's signature): _____

Date: _____

** Include a description of your aeration technique.

Aeration Code: _____

*** Al is only reported if the pH is above 9.0

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Category 3
Sampling Results
API No : _____

Parameter	Predischarge		Discharge		Units
	Limits	Reported	Limits	Reported	
pH	6-10	_____	6-10	_____	S.U
Settling Time	20	_____	N/A	N/A	Days
Fe	6	_____	6	_____	mg/l
D.O.	2.5	_____	2.5	_____	mg/l
Settleable Sol.	0.5	_____	0.5	_____	mg/l
Cl*	12,500	_____	12,500	_____	mg/l
Oil	Trace	_____	Trace	_____	Obs.
TOC**		_____	Monitor	_____	mg/l
Oil and Grease		_____	Monitor	_____	mg/l
Total Al***		_____	Monitor	_____	mg/l
TSS		_____	Monitor	_____	mg/l
Total Mn	Monitor	_____	Monitor	_____	mg/l
Volume		_____	Monitor	_____	Gal
Flow		_____	Monitor	_____	Gal/min
Disposal Area		_____	Monitor	_____	Acres

* Can be 25,000 with inspector's approval,

(Inspector's signature): _____ Date: _____
 ** Include a description of your aeration technique. Aeration Code: _____
 *** Al is only reported if the pH is above 9.0.

Category 4
Sampling Results
API No: _____

Parameter	Predischarge		Discharge		Units
	Limits	Reported	Limits	Reported	
pH	6-10	_____	6-10	_____	S.U
Settling Time	1	_____	N/A	N/A	Days
Fe	Monitor	_____	Monitor	_____	mg/l
D.O.	Monitor	_____	Monitor	_____	mg/l
Settleable Sol.	Monitor	_____	Monitor	_____	mg/l
Cl*	12,500	_____	12,500	_____	mg/l
Oil	Trace	_____	Trace	_____	Obs.
TOC**		_____	Monitor	_____	mg/l
Oil and Grease		_____	Monitor	_____	mg/l
TSS		_____	Monitor	_____	mg/l
Total Mn	Monitor	_____	Monitor	_____	mg/l
Volume		_____	Monitor	_____	Gal
Flow		_____	Monitor	_____	Gal/min
Activated Carbon (0.175)		_____	N/A	N/A	lb/B1
Date Site Reclaimed	N/A	N/A			10 days from dis.
Disposal Area		_____	Monitor	_____	Acres

* Can be 25,000 with inspector's approval,

(Inspector's signature): _____ Date: _____