

RECEIVED
Office Of Oil and Gas
JAN 6 2026
WV Department of
Environmental Protection

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

Company Name: Antero Resources Corporation
API No: 47-095-02909 County: Tyler
District: Lincoln Well No: Gorby Unit 1H
Farm Name: Antero Resources Corporation
Discharge Date/s From: (MMDDYY) 9/9/2025 To: (MMDDYY) 10/9/2025
Discharge Times. From: 0:00 To: 24:00
Total Volume to be Disposed from this facility (gallons): 2,413,529

Disposal Option(s) Utilized (write volumes in gallons):

- (1) Land Application: 0 (Include a topographical map of the Area.)
(2) UIC: 0 Permit No. _____
(3) Offsite Disposal: 0 Site Location: _____
(4) Reuse: 2,413,529 Alternate Permit Number: _____
(5) Centralized Facility: 0 Permit No. _____
(6) Other method: 0 (Include an explanation)

Follow Instructions below to determine your treatment category:

Optional Pretreatment test: N/A Cl- mg/l N/A DO mg/l

1. Do you have permission to use expedited treatment from the Director or his representative?
(Y/N) N/A 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) N/A If yes, go to line 5. If not, go to line 3.
3. Do you have a chloride value pretreatment (see above)? (Y/N) N/A If yes, go to line 4
If not, go to line 5.
4. Is the Chloride level less than 5000 mg/l? (Y/N) N/A If yes, then enter a one (1) on line 7.
5. Do you have a pretreatment value for DO? (See above) (Y/N) N/A 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) N/A If yes, enter a two (2) on line 7. If not, enter a three (3) on line 7.
7. N/A is the category of your pit. Use the Appropriate section.
8. Comments on Pit condition: _____
N/A NO PIT ON SITE

Name of Principal Exec. Officer: Gretchen Kohler
Title of Officer: Director of Environmental & Regulatory Compliance
Date Completed: 1/5/2026

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.

Gretchen Kohler
Signature of a Principal Exec. Officer or Authorized agent.

03/20/2026

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Category 1
Sampling Results
API No : _____

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/Bl
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): Jimmy Date: 2/12/26

03/20/2026