



# NEW MEXICO ENVIRONMENT DEPARTMENT GROUND WATER QUALITY BUREAU



## PRODUCED WATER PILOT PROJECT PERMIT APPLICATION

*Instructions for completing the application are included in the form itself. You may fill out the application manually, or a PDF version may be downloaded from [www.env.nm.gov](http://www.env.nm.gov) (Ground Water Quality) and filled out electronically. Timely processing of this application is contingent upon the technical completeness of the submission. Failure to provide all of the information pursuant to Section 20.6.8.400 NMAC, following notice of technical deficiency, may result in denial of the application.*

**Send two complete paper copies AND one electronic copy of this application to:**

Program Manager  
Ground Water Pollution Prevention Section  
New Mexico Environment Department  
P.O. Box 5469  
Santa Fe, NM 87502

**Electronic copy must be submitted via email to: [pw.environment@env.nm.gov](mailto:pw.environment@env.nm.gov)**

### SECTION 1. TYPE OF APPLICATION

Type of Produced Water Pilot Project Application (Check One)	<input type="checkbox"/> New Pilot Project (Not Previously Permitted or Applied For)
	<input type="checkbox"/> Amended Pilot Project (Permitted but Change in Scope/Volume/Source/Plan)

### SECTION 2. CONTACT INFORMATION (20.6.8.400(C)(1)(a)(i) NMAC)

2.1 Applicant Information (All fields required to have entry, enter Not Applicable as appropriate)	<p style="text-align: right;">Applicant* _____</p> <p style="text-align: right;">Contact Name _____</p> <p style="text-align: right;">Title _____</p> <p style="text-align: right;">Company _____</p> <p style="text-align: right;">Mailing Address _____</p> <p style="text-align: right;">Phone Number _____</p> <p style="text-align: right;">Email Address _____</p> <p style="font-size: small;">*Applicant, as the legally responsible party for the pilot project. Note: the applicant will be included in all communications regarding the Produced Water Pilot Project Permit, unless directed in writing otherwise</p>
--	--

2.2 Additional Contacts (optional)	<p style="text-align: right;">Contact Name _____</p> <p style="text-align: right;">Title _____</p> <p style="text-align: right;">Company _____</p> <p style="text-align: right;">Mailing Address _____</p> <p style="text-align: right;">Phone Number _____</p> <p style="text-align: right;">Email Address _____</p> <p><input type="checkbox"/> Authorization to include in Pilot Project Permit correspondence (Administrative Completeness, Request for Additional Information, Draft Permit, Hearing Notices, Issued Permit)</p> <p><input type="checkbox"/> Authorization to coordinate for site inspection</p> <p><input type="checkbox"/> Authorization to include in Pilot Project Permit compliance</p> <p style="text-align: right;">Contact Name _____</p> <p style="text-align: right;">Title _____</p> <p style="text-align: right;">Company _____</p> <p style="text-align: right;">Mailing Address _____</p> <p style="text-align: right;">Phone Number _____</p> <p style="text-align: right;">Email Address _____</p> <p><input type="checkbox"/> Authorization to include in Pilot Project Permit correspondence (Administrative Completeness, Request for Additional Information, Draft Permit, Hearing Notices, Issued Permit)</p> <p><input type="checkbox"/> Authorization to coordinate for site inspection</p> <p><input type="checkbox"/> Authorization to include in Pilot Project Permit compliance</p>
------------------------------------	---

**SECTION 3. PILOT PROJECT INFORMATION (20.6.8.400(C)(1)(a)(ii), (iv) and (v) NMAC)**

Pilot Project Information	Pilot Project Reference Name (as will be used on the Pilot Project Permit) _____																																														
	Pilot Project Objective _____																																														
	<b>APPENDIX A1: Pilot Project Research Plan Attached</b> (20.6.8.400(C)(1)(a)(v) NMAC)																																														
	Duration of Pilot Project _____																																														
	Anticipated Start Date _____																																														
	Anticipated End Date _____																																														
	Average Daily Volume of Untreated Produced Water _____ Barrels per day (bbls/d) <span style="float: right;">Gallons per day (gpd)</span>																																														
	Location of Pilot Project																																														
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 10%;">Component ID</th> <th style="width: 15%;">Latitude**</th> <th style="width: 15%;">Longitude**</th> <th style="width: 10%;">County</th> <th style="width: 10%;">Section(s)***</th> <th style="width: 10%;">Township***</th> <th style="width: 10%;">Range***</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Source Water</td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td style="text-align: center;">Transportation Route</td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td style="text-align: center;">Treatment System(s)</td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td style="text-align: center;">Disposal Location(s)</td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>								Component ID	Latitude**	Longitude**	County	Section(s)***	Township***	Range***	Source Water								Transportation Route								Treatment System(s)								Disposal Location(s)							
		Component ID	Latitude**	Longitude**	County	Section(s)***	Township***	Range***																																							
	Source Water																																														
	Transportation Route																																														
	Treatment System(s)																																														
	Disposal Location(s)																																														
**Latitude and longitude in decimal degrees from center of area																																															
*** Include all Section, Township and Range (STR) within area																																															
Property Owner Where Pilot Project is Proposed _____																																															
Address _____																																															
Phone Number _____																																															
Email Address _____																																															
<input type="checkbox"/> Authorization to include in Pilot Project Permit correspondence (Administrative Completeness, Request for Additional Information, Draft Permit, Hearing Notices, Issued Permit)																																															
<input type="checkbox"/> Authorization to coordinate for site inspection																																															
<input type="checkbox"/> Authorization to include in Pilot Project Permit compliance																																															
<b>APPENDIX B: County Assessor's Query Attached</b>																																															
<b>APPENDIX C: Map(s) with the Following Elements Attached</b>																																															
<input type="checkbox"/> Scaled Aerial Image																																															
<input type="checkbox"/> North Facing Indicator																																															
<input type="checkbox"/> Location of Pilot Project Treatment System(s)																																															
<input type="checkbox"/> Location(s) and Identification of Source Water																																															
<input type="checkbox"/> Location of Disposal Location(s)																																															
<input type="checkbox"/> Identification of OSE Points of Diversion																																															
<input type="checkbox"/> Identification of Surface Waters of the State as defined in 20.6.4 NMAC																																															
<input type="checkbox"/> Identification of Major Landmarks and Roadways																																															
<input type="checkbox"/> Identification of Section, Township and Range																																															

**SECTION 4. PRODUCED WATER CHARACTERIZATION (20.6.8.400(C)(1)(a)(iii) NMAC)**

Source(s) of Produced Water (Well Identification and Location)\*\*\*\*

\*\*\*\*Sources of produced water should align with source sample IDs in analysis. Provide the API number for well identification.

**Constituent Concentrations in Untreated Produced Water Sample**

	Source Sample ID	Concentration	Units	Analytical Method	Notes
Antimony (Sb) (CAS 7440-36-0)					
Arsenic (As) (CAS 7440-38-2)					
Barium (Ba) (CAS 7440-39-3)					
Beryllium (be) (CAS 7440-41-7)					
Cadmium (Cd) (CAS 7440-43-9)					
Chromium (Cr) (CAS 7440-47-3)					
Cyanide (CN) (CAS 57-12-5)					
Fluoride (F) (CAS 16984-48-8)					
Lead (Pb) (CAS 7439-92-1)					
Total Mercury (Hg) (CAS 7439-97-6)					
Nitrate (NO <sub>3</sub> as N) (CAS 14797-55-8)					
Nitrite (NO <sub>2</sub> as N) (CAS 10102-44-0)					
Selenium (Se) (CAS 7782-49-2)					
Silver (Ag) (CAS 7440-224)					
Thallium (Tl) (CAS 7440-28-0)					
Uranium (U) (CAS 7440-61-1)					
Radium-226 (CAS 13982-63-3)					
Radium-228 (CAS 15262-20-1)					
Benzene (CAS 71-43-2)					
Polychlorinated biphenyls (PCB's) (CAS 1336-36-3)					
Toluene (CAS 108-88-3)					
Carbon Tetrachloride (CAS 56-23-5)					
1,2-dichloroethane (EDC) (CAS 107-06-2)					
1,1-dichloroethylene (1,1-DCE) (CAS 75-35-4)					
tetrachloroethylene (PCE) (CAS 127-18-4)					
trichloroethylene (TCE) (CAS 79-01-6)					
ethylbenzene (CAS 100-41-4)					
total xylenes (CAS 1330-20-7)					
methylene chloride (CAS 75-09-2)					
chloroform (CAS 67-66-3)					
1,1-dichloroethane (CAS 75-34-3)					
ethylene dibromide (EDB) (CAS 106-93-4)					
1,1,1-trichloroethane (CAS 71-55-6)					
1,1,2-trichloroethane (CAS 79-00-5)					
1,1,2,2-tetrachloroethane (CAS 79-34-5)					
vinyl chloride (CAS 75-01-4)					
PAHs: total naphthalene (CAS 91-20-3) plus monomethylnaphthalenes					
benzo-a-pyrene (CAS 50-32-8)					

Produced Water Characterization

Produced Water Characterization		cis-1,2-dichloroethene (CAS 156-59-2)					
		trans-1,2-dichloroethene (CAS 156-60-5)					
		1,2-dichloropropane (PDC) (CAS 78-87-5)					
		styrene (CAS 100-42-5)					
		1,2-dichlorobenzene (CAS 95-50-1)					
		1,4-dichlorobenzene (CAS 106-46-7)					
		1,2,4-trichlorobenzene (CAS 120-82-1)					
		pentachlorophenol (CAS 87-86-5)					
		atrazine (CAS 1912-24-9)					
		Chloride (Cl) (CAS 16887-00-6)					
		Copper (Cu) (CAS 7440-50-8)					
		Iron (Fe) (CAS 7439-89-6)					
		Manganese (Mn) (CAS 7439-96-5)					
		Phenols					
		Sulfate (SO <sub>4</sub> ) (CAS 14808-79-8)					
		Total Dissolved Solids (TDS)					
		Zinc (Zn) (CAS 7440-66-6)					
		pH					
		Methyl tertiary-butyl ether (MTBE) (CAS 1634-04-4)					
		Aluminum (Al) (CAS 7429-90-5)					
		Boron (B) (CAS 7440-42-8)					
		Cobalt (Co) (CAS 7440-48-4)					
		Molybdenum (Mo) (CAS 7439-98-7)					
		Nickel (Ni) (CAS 7440-02-0)					
		perfluorohexane sulfonic acid (PHHxS) (CAS 355-46-4)					
		perfluorooctane sulfonate (PFOS) (CAS 1763-23-1)					
		perfluorooctanoic acid (PFOA) (CAS 335-67-1)					
		<input type="checkbox"/>	<b><u>APPENDIX D: Lab Analysis of Untreated Produced Water with Metadata Attached *****</u></b>				
		*****Metadata to include sampling and analysis plan with quality assurance					

**SECTION 5. GROUNDWATER CHARACTERIZATION**

Groundwater Characterization		Depth to first water _____ feet below ground surface (bgs)																																																
	<input type="checkbox"/>	<b><u>APPENDIX E: Survey Supporting Depth to Water Attached</u></b>																																																
		Total Dissolved Solids (TDS) _____ milligrams per liter (mg/L)																																																
	<input type="checkbox"/>	<b><u>APPENDIX F: Survey or Data Supporting TDS Concentrations Attached</u></b>																																																
		OSE Registered Uses of Groundwater within STR (list all that apply)																																																
		<table border="1"> <thead> <tr><th>POD ID</th><th>Section</th><th>Township</th><th>Range</th><th>DTW</th><th>Permitted Use</th></tr> </thead> <tbody> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>	POD ID	Section	Township	Range	DTW	Permitted Use																																										
	POD ID	Section	Township	Range	DTW	Permitted Use																																												
	<input type="checkbox"/>	<b><u>APPENDIX G: Office of the State Engineer (OSE) Waters Database Query Attached</u></b>																																																

**SECTION 6. ADDITIONAL INFORMATION**

Describe Any Additional Relevant Information	
--	--

**SECTION 7. CHECKLIST AND CERTIFICATION STATEMENT (20.6.8.400 NMAC)**

7.1 Authorized Pilot Project Verification	<u>By initialling below, the Applicant acknowledges the Pilot Project will provide information for all of the following (20.6.8.400(C)(1)(a)(vi) NMAC):</u>	
		Untreated produced water quality
		Treatment technologies
		Treated produced water quality
		Treatment volumes
		Toxicity studies for potential water reuse applications

7.2 Required Pilot Project Plans	<b><u>APPENDIX A2: Comprehensive Pilot Project Management Plan (may be part of the Pilot Project Research Plan)</u></b>	
	<u>By initialling below, the Applicant certifies that the following elements are included in an attached comprehensive pilot project management plan.</u>	
		Plan to minimize risk of human exposure (20.6.8.400(C)(1)(a)(x) NMAC) including written procedures to describe measures to prevent releases onto the ground, directly or indirectly into ground or surface water (20.6.8.400(B)(5) NMAC) and reporting procedures (20.6.8.400(B)(7) NMAC)
		Plan for transportation of untreated and treated produced water (20.6.8.400(C)(1)(a)(viii) NMAC)
		Plan for safe handling of untreated or treated produced water (20.6.8.400(C)(1)(a)(ix) NMAC)
		Plan for characterization of untreated or treated produced water (20.6.8.400(C)(1)(a)(ix) NMAC)
		Plan for proper disposal of untreated or treated produced water (20.6.8.400(C)(1)(a)(ix) NMAC)
		Plan for safe handling and disposal of treatment residuals, wastes and any materials that come into contact with untreated or treated produced water (20.6.8.400(C)(1)(a)(ix) NMAC)
		Plan for any other waste generated by the project (20.6.8.400(C)(1)(a)(ix) NMAC)
	Written procedures describing measures to prevent releases (20.6.8.400(C)(1)(a)(vii) NMAC)	

7.3 Handling	<u>By initialling below, the Applicant certifies that:</u>	
		Disposal of pilot project components using treated or untreated produced water in accordance with federal, state and local regulations (20.6.8.400(B)(9) and (C)(1)(a)(vi) NMAC)
		Handling, transportation, distribution and storage of untreated and treated produced water will be done in accordance with applicable federal, state and local regulations (20.6.8.400(B)(6) and (C)(1)(a)(viii) NMAC)
	Other applicable federal, state and local statutes, permits and certifications have been acquired (20.6.8.400(B)(1) and (C)(1)(a)(vi) NMAC)	

7.4 Closure	By initialling below, the Applicant proposes final disposition of produced water (treated or untreated) in the following manner (select all that apply): (20.6.8.400(B)(8) and (C)(1)(a)(vi) NMAC)	
	<input type="checkbox"/>	Discharge to a disposal well permitted pursuant to the oil conservation commission's regulations for oil and gas injection
	<input type="checkbox"/>	Delivery to a surface waste management facility permitted pursuant to the oil conservation commission regulations for surface waste management
	<input type="checkbox"/>	Disposal in a permanent pit permitted pursuant to the oil conservation commission's regulations for oil and gas pits
	<input type="checkbox"/>	Closed-loop system
	<input type="checkbox"/>	Below grade tanks and sumps in accordance with oil conservation commission's regulations at 19.15.17 NMAC
	<input type="checkbox"/>	Alternative disposal as provided in this application as APPENDIX

7.5 Financial Assurance	<b>APPENDIX H: Financial Assurance Documentation with the Following Elements Attached</b> (20.6.8.400(C)(1)(a)(xi) NMAC)	
	By initialling below, the Applicant acknowledges that the following financial assurance items are required and included with this application.	
	<input type="checkbox"/>	A cost estimate covering all activities necessary to achieve complete closure and remediation, including any incremental administrative or trustee costs
	<input type="checkbox"/>	Proposed financial assurance instrument(s) sufficient to cover the total estimated cost of complete closure
	<input type="checkbox"/>	Financial assurance instrument(s) that name NMED as the sole beneficiary and exclude any form of self-guarantee
<input type="checkbox"/>	A statement that the financial assurance instrument(s) will remain in effect until complete closure and permit termination	

7.6 Public Noticing	By identifying the following locations and property owners, the Applicant, upon the Department's administratively complete determination, shall provide notice to the following: (20.6.8.400(C)(1)(a)(xii) NMAC)	
	Flyer Location(s):	_____
	Newspaper of Local Circulation:	_____
	Location for 2'x3' Sign (Conspicuous to the Public, at or Near the Proposed Pilot Project):	_____
<input type="checkbox"/>	<b>APPENDIX I: List of Property Owners Within 1/3-Mile Radius Attached</b>	

7.7 Data Reporting	By initialling below, the Applicant acknowledges that in accordance with 20.6.8.400(C)(3) NMAC, upon issuance of a Pilot Project Permit, the following reporting conditions will be required as part of the Produced Water Pilot Project Permit.	
	<input type="checkbox"/>	Research results
	<input type="checkbox"/>	Lab analysis of all water contaminants in untreated produced water
	<input type="checkbox"/>	Lab analysis of all water contaminants in treated produced water
	<input type="checkbox"/>	Monthly volumes of water treated, water quality data for all liquid streams
<input type="checkbox"/>	Monthly volumes, mass and characteristics of liquid and solid waste disposed of	

7.8 Permit Acknowledgements and Signatures	By initialling below, the Applicant acknowledges the following:	
	<input type="checkbox"/>	NMED does not require applicants to pay a fee for applying for a Produced Water Pilot Project Permit at this time
	<input type="checkbox"/>	Permit shall not exceed five years from the date of issuance (20.6.8.400(C)(2) NMAC)
	<input type="checkbox"/>	This application has been submitted prior to initiation of the proposed produced water pilot project (20.6.8.400(B)(3) and (C)(1)(a)(vi) NMAC)
	<input type="checkbox"/>	The applicant will not initiate the proposed produced water pilot project until a permit issued (20.6.8.400 (B)(4) and (C)(1)(a)(vi) NMAC)
	Signature must be that of the person listed as the legally responsible party on this application <i>I, the Applicant, attest under penalty of law to the truth of the information and supporting documentation contained in this application for a Produced Water Pilot Project Permit.</i>	
	Signature: _____	Date: _____
Printed Name: _____	Title: _____	

7.9 Appendices	<u>List of Attachments, in Order (Check all that are included):</u>	
	<input type="checkbox"/>	APPENDIX A1: Pilot Project Research Plan
	<input type="checkbox"/>	APPENDIX A2: Comprehensive Pilot Project Management Plan (may be part of the Pilot Project Research Plan).
	<input type="checkbox"/>	APPENDIX B: County Assessor's Query
	<input type="checkbox"/>	APPENDIX C: Map(s)
	<input type="checkbox"/>	APPENDIX D: Lab Analysis of Untreated Produced Water With Metadata
	<input type="checkbox"/>	APPENDIX E: Survey Supporting Depth to Water
	<input type="checkbox"/>	APPENDIX F: Survey or Data Supporting TDS Concentrations
	<input type="checkbox"/>	APPENDIX G: Office of the State Engineer (OSE) Waters Database Query
	<input type="checkbox"/>	APPENDIX H: Financial Assurance Documentation
	<input type="checkbox"/>	APPENDIX I: List of Property Owners Within 1/3-Mile Radius
	<u>Other Attachments as Identified:</u>	
	<input type="checkbox"/>	APPENDIX :
	<input type="checkbox"/>	APPENDIX :

**SECTION 8. NOTARY** (This section to be completed by the Notary)

Notary	STATE OF	
	County of	
	I, (Applicant name)	, being first duly sworn, depose and say that I am the applicant named in this application,
	that I have read the contents thereof, and that, to the best of my knowledge and belief, the foregoing statements are true and correct in every respect.	
	Subscribed and sworn to me before me this	_____
	day of _____,	(Signature of Applicant)
My Commission expires	_____	
(SEAL)	(Signature of Notary Public)	

**Your application is not complete unless Section 8 is completed by the Notary.**