



Administrative Package Cover Page

This file contains the following documents:

1. Summary of application (in plain language)
 - English
 - Alternative Language (Spanish)
 2. First Notice (NORI-Notice of Receipt of Application and Intent to Obtain a Permit)
 - English
 - Alternative Language (Spanish)
 3. Application materials
-



Portada de Paquete Administrativo

Este archivo contiene los siguientes documentos:

1. Resumen en lenguaje sencillo (PLS, por sus siglas en inglés) de la actividad propuesta
 - Inglés
 - Idioma alternativo (español)
2. Primer aviso (NORI, por sus siglas en inglés)
 - Inglés
 - Idioma alternativo (español)
3. Solicitud original



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

Summary of Application (in plain language) Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

Applicants should use this template to develop a plain language summary of your facility and application as required by Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H. You may modify the template as necessary to accurately describe your facility as long as the summary includes the following information: (1) the function of the proposed plant or facility; (2) the expected output of the proposed plant or facility; (3) the expected pollutants that may be emitted or discharged by the proposed plant or facility; and (4) how you will control those pollutants, so that the proposed plant will not have an adverse impact on human health or the environment.

Fill in the highlighted areas below to describe your facility and application in plain language. Instructions and examples are provided below. Make any other edits necessary to improve readability or grammar and to comply with the rule requirements. After filling in the information for your facility delete these instructions.

If you are subject to the alternative language notice requirements in 30 TAC Section 39.426, **you must provide a translated copy of the completed plain language summary in the appropriate alternative language as part of your application package.** For your convenience, a Spanish template has been provided below.

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS INDUSTRIAL WASTEWATER/STORMWATER

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and is not a federal enforceable representation of the permit application.

Energy Transfer (CN 606187110) operates Jackson Gas Plant (RN 106225436), a natural gas processing facility. The facility is located at 676 CR 260, in Ganado, Jackson County, Texas 77962. Requesting to renew their TPDES permit with a major amendment to add a stormwater outfall to help prevent standing water on the property.

Discharges from the facility are expected to contain Reject Osmosis Wastewater that is comingled with stormwater. There is no treatment that occurs. 16. Choose from the drop-down menu treated by not applicable.

PLANTILLA EN ESPAÑOL PARA SOLICITUDES NUEVAS/RENOVACIONES/ENMIENDAS DE TPDES o TLAP

AGUAS RESIDUALES INDUSTRIALES /AGUAS PLUVIALES

El siguiente resumen se proporciona para esta solicitud de permiso de calidad del agua pendiente que está siendo revisada por la Comisión de Calidad Ambiental de Texas según lo requerido por el Capítulo 39 del Código Administrativo de Texas 30. La información proporcionada en este resumen puede cambiar durante la revisión técnica de la solicitud y no es una representación ejecutiva fedérale de la solicitud de permiso.

Energy Transfer (CN 606187110) opera la Planta de Gas Jackson RN 106225436, una facilidad de procesamiento de gas natural. La instalación está ubicada en 676 CR 260, en Ganado, Condado de Jackson, Texas 77962. La compañía solicita renovar su permiso TPDES con una enmienda mayor para agregar un desagüe pluvial que ayude a prevenir el agua estancada en la propiedad.

Se espera que las descargas de la instalación contengan **aguas rechazadas de ósmosis mezcladas con aguas pluviales**. No se realiza ningún tratamiento. 16. Elija del menú desplegable tratado por 17. Introduzca una descripción del tratamiento de aguas residuales utilizado en la instalación aquí.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



NOTICE OF RECEIPT OF APPLICATION AND INTENT TO OBTAIN WATER QUALITY PERMIT AMENDMENT

PERMIT NO. WQ0005366000

APPLICATION. ET Gathering & Processing LLC, 8111 Westchester Drive, Dallas, Texas 75225, which owns a natural gas processing facility, has applied to the Texas Commission on Environmental Quality (TCEQ) to amend Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0005366000 (EPA I.D. No. TX0133998) to authorize the addition of Outfall 004 to discharge stormwater at an intermittent and flow-variable volume. The facility is located at 676 County Road 260, near the city of Ganado, in Jackson County, Texas 77962. The discharge route is from the plant site via Outfalls 001, 002, 003, and 004 to an unnamed ditch, thence to an unnamed tributary, thence to Sandy Creek, thence to Lake Texana. TCEQ received this application on September 2, 2025. The permit application will be available for viewing and copying at Jackson County Memorial Library, 411 North Wells Street, Room 121, Edna, in Jackson County, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-96.5375,29.109444&level=18>

ALTERNATIVE LANGUAGE NOTICE. Alternative language notice in Spanish is available at:

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

El aviso de idioma alternativo en español está disponible en

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

ADDITIONAL NOTICE. TCEQ's Executive Director has determined the application is administratively complete and will conduct a technical review of the application. After technical review of the application is complete, the Executive Director may prepare a draft permit and will issue a preliminary decision on the application. **Notice of the Application and Preliminary Decision will be published and mailed to those who are on the county-wide mailing list and to those who are on the mailing list for this application. That notice will contain the deadline for submitting public comments.**

PUBLIC COMMENT / PUBLIC MEETING. You may submit public comments or request a public meeting on this application. The purpose of a public meeting is to provide the opportunity to submit comments or to ask questions about the application. TCEQ will hold a

public meeting if the Executive Director determines that there is a significant degree of public interest in the application or if requested by a local legislator. A public meeting is not a contested case hearing.

OPPORTUNITY FOR A CONTESTED CASE HEARING. After the deadline for submitting public comments, the Executive Director will consider all timely comments and prepare a response to all relevant and material, or significant public comments. **Unless the application is directly referred for a contested case hearing, the response to comments, and the Executive Director's decision on the application, will be mailed to everyone who submitted public comments and to those persons who are on the mailing list for this application. If comments are received, the mailing will also provide instructions for requesting reconsideration of the Executive Director's decision and for requesting a contested case hearing.** A contested case hearing is a legal proceeding similar to a civil trial in state district court.

TO REQUEST A CONTESTED CASE HEARING, YOU MUST INCLUDE THE FOLLOWING ITEMS IN YOUR REQUEST: your name, address, phone number; applicant's name and proposed permit number; the location and distance of your property/activities relative to the proposed facility; a specific description of how you would be adversely affected by the facility in a way not common to the general public; a list of all disputed issues of fact that you submit during the comment period and, the statement "[I/we] request a contested case hearing." If the request for contested case hearing is filed on behalf of a group or association, the request must designate the group's representative for receiving future correspondence; identify by name and physical address an individual member of the group who would be adversely affected by the proposed facility or activity; provide the information discussed above regarding the affected member's location and distance from the facility or activity; explain how and why the member would be affected; and explain how the interests the group seeks to protect are relevant to the group's purpose.

Following the close of all applicable comment and request periods, the Executive Director will forward the application and any requests for reconsideration or for a contested case hearing to the TCEQ Commissioners for their consideration at a scheduled Commission meeting.

The Commission may only grant a request for a contested case hearing on issues the requestor submitted in their timely comments that were not subsequently withdrawn. **If a hearing is granted, the subject of a hearing will be limited to disputed issues of fact or mixed questions of fact and law relating to relevant and material water quality concerns submitted during the comment period.**

MAILING LIST. If you submit public comments, a request for a contested case hearing or a reconsideration of the Executive Director's decision, you will be added to the mailing list for this specific application to receive future public notices mailed by the Office of the Chief Clerk. In addition, you may request to be placed on: (1) the permanent mailing list for a specific applicant name and permit number; and/or (2) the mailing list for a specific county. If you wish to be placed on the permanent and/or the county mailing list, clearly specify which list(s) and send your request to TCEQ Office of the Chief Clerk at the address below.

INFORMATION AVAILABLE ONLINE. For details about the status of the application, visit the Commissioners' Integrated Database at www.tceq.texas.gov/goto/cid. Search the database using the permit number for this application, which is provided at the top of this notice.

AGENCY CONTACTS AND INFORMATION. All public comments and requests must be submitted either electronically at <https://www14.tceq.texas.gov/epic/eComment/>, or in writing to the Texas Commission on Environmental Quality, Office of the Chief Clerk, MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Please be aware that any contact information you provide, including your name, phone number, email address and physical address will become part of the agency's public record. For more information about this permit application or the permitting process, please call the TCEQ Public Education Program, Toll Free, at 1-800-687-4040 or visit their website at www.tceq.texas.gov/goto/pep. Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from ET Gathering & Processing LLC at the address stated above or by calling Mr. Thomas Becker, Director of Environmental, at 210-403-6482.

Issuance Date: October 1, 2025

Comisión de Calidad Ambiental del Estado de Texas



AVISO DE RECIBO DE LA SOLICITUD Y EL INTENTO DE OBTENER PERMISO PARA LA CALIDAD DEL AGUA PERMISO MODIFICACION

PERMISO NO. WQ0005366000

SOLICITUD. ET Gathering & Processing LLC, 811 Westchester Drive, Dallas, Texas 75225, que posee una planta de procesamiento de gas natural, ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) para modificar el Permiso No. WQ0005366000 (EPA I.D. No. TX0133998) del Sistema de Eliminación de Descargas de Contaminantes de Texas (TPDES) para autorizar la incorporación del desagüe 004 para descargar aguas pluviales con un volumen intermitente y variable en el flujo. La planta está ubicada en el 676 County Road 260, cerca de la ciudad de Ganado, en el Condado de Jackson, Texas 77962. La ruta de descarga es del sitio de la planta a un arroyo sin nombre, de allí a un afluente sin nombre, de allí al arroyo Sandy, de allí al lago Texana. La TCEQ recibió esta solicitud el 2 de septiembre de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Jackson County Memorial Library, 411 North Wells Street, Room 121, Edna, en el Condado de Jackson antes de la fecha de publicación de este aviso en el periódico. La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web:

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-96.5375,29.109444&level=18>

AVISO DE IDIOMA ALTERNATIVO. El aviso de idioma alternativo en español está disponible en <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y emitirá una Decisión Preliminar sobre la solicitud. **El aviso de la solicitud y la decisión preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.**

COMENTARIO PUBLICO / REUNION PUBLICA. Usted puede presentar comentarios públicos o pedir una reunión pública sobre esta solicitud. El propósito de una reunión pública es dar la oportunidad de presentar comentarios o hacer preguntas acerca de la solicitud. La TCEQ

realiza una reunión pública si el Director Ejecutivo determina que hay un grado de interés público suficiente en la solicitud o si un legislador local lo pide. Una reunión pública no es una audiencia administrativa de lo contencioso.

OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO CONTENCIOSO. Después del plazo para presentar comentarios públicos, el Director Ejecutivo considerará todos los comentarios apropiados y preparará una respuesta a todo los comentarios públicos esenciales, pertinentes, o significativos. **A menos que la solicitud haya sido referida directamente a una audiencia administrativa de lo contencioso, la respuesta a los comentarios y la decisión del Director Ejecutivo sobre la solicitud serán enviados por correo a todos los que presentaron un comentario público y a las personas que están en la lista para recibir avisos sobre esta solicitud. Si se reciben comentarios, el aviso también proveerá instrucciones para pedir una reconsideración de la decisión del Director Ejecutivo y para pedir una audiencia administrativa de lo contencioso.** Una audiencia administrativa de lo contencioso es un procedimiento legal similar a un procedimiento legal civil en un tribunal de distrito del estado.

PARA SOLICITAR UNA AUDIENCIA DE CASO IMPUGNADO, USTED DEBE INCLUIR EN SU SOLICITUD LOS SIGUIENTES DATOS: su nombre, dirección, y número de teléfono; el nombre del solicitante y número del permiso; la ubicación y distancia de su propiedad/actividad con respecto a la instalación; una descripción específica de la forma cómo usted sería afectado adversamente por el sitio de una manera no común al público en general; una lista de todas las cuestiones de hecho en disputa que usted presente durante el período de comentarios; y la declaración "[Yo/nosotros] solicito/solicitamos una audiencia de caso impugnado". Si presenta la petición para una audiencia de caso impugnado de parte de un grupo o asociación, debe identificar una persona que representa al grupo para recibir correspondencia en el futuro; identificar el nombre y la dirección de un miembro del grupo que sería afectado adversamente por la planta o la actividad propuesta; proveer la información indicada anteriormente con respecto a la ubicación del miembro afectado y su distancia de la planta o actividad propuesta; explicar cómo y porqué el miembro sería afectado; y explicar cómo los intereses que el grupo desea proteger son pertinentes al propósito del grupo.

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión.

La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron retirados posteriormente. **Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios.**

LISTA DE CORREO. Si somete comentarios públicos, un pedido para una audiencia administrativa de lo contencioso o una reconsideración de la decisión del Director Ejecutivo, la Oficina del Secretario Principal enviará por correo los avisos públicos en relación con la solicitud. Además, puede pedir que la TCEQ ponga su nombre en una o más de las listas

correos siguientes (1) la lista de correo permanente para recibir los avisos del solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agregue su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

INFORMACIÓN DISPONIBLE EN LÍNEA. Para detalles sobre el estado de la solicitud, favor de visitar la Base de Datos Integrada de los Comisionados en www.tceq.texas.gov/goto/cid. Para buscar en la base de datos, utilizar el número de permiso para esta solicitud que aparece en la parte superior de este aviso.

CONTACTOS E INFORMACIÓN A LA AGENCIA. Todos los comentarios públicos y solicitudes deben ser presentadas electrónicamente vía <http://www14.tceq.texas.gov/epic/eComment/> o por escrito dirigidos a la Comisión de Texas de Calidad Ambiental, Oficial de la Secretaría (Office of Chief Clerk), MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Tenga en cuenta que cualquier información personal que usted proporcione, incluyendo su nombre, número de teléfono, dirección de correo electrónico y dirección física pasarán a formar parte del registro público de la Agencia. Para obtener más información acerca de esta solicitud de permiso o el proceso de permisos, llame al programa de educación pública de la TCEQ, gratis, al 1-800-687-4040. Si desea información en español, puede llamar al 1-800-687-4040.

También se puede obtener información adicional de la empresa ET Gathering & Processing LLC a la dirección indicada arriba o llamando al Sr. Thomas Becker, Director Ambiental al 210-403-6482.

Fecha de emisión: 1 de octubre de 2025

Leah Whallon

From: Shilinga, Cindy <Cindy.Shilinga@wsp.com>
Sent: Monday, September 22, 2025 2:11 PM
To: Leah Whallon
Cc: Bippert, Landon; Shilinga, Cindy
Subject: Re: Application to Amend Permit No. WQ0005366000; ET Gathering & Processing LLC; Jackson Gas Plant
Attachments: 09222025JacksonGP_TCEQ Ownership Change_20031.pdf; Adjacent Landowner List Labels.updated.docx; ET Jackson GP TPDES Form10411_09162025.pdf; F1 Landowner Map updated.pdf; Industrial Discharge Amendment Spanish NORI_Spanish translation.docx
Follow Up Flag: Follow up
Flag Status: Flagged

Leah,

Please see attached the requested information that was listed in the NOD. If, there is anything else needed please let us know.

Attachment 1: Change of ownership
Attachment 2: Landowner list
Attachment 3: New Admin Application
Attachment 4: Updated F1 Landowner Map
Attachment 5: Translated NORI

Thanks,



Cindy Shilinga
Senior Consultant
Assessment and Permitting

WSP USA
1501 E Mockingbird Ln Ste 420
Victoria, TX 77904
T+ 1 361-484-1675

wsp.com

From: Leah Whallon <Leah.Whallon@Tceq.Texas.Gov>
Sent: Thursday, September 11, 2025 1:00 PM
To: landon.bippert@energytransfer.com <landon.bippert@energytransfer.com>
Cc: Shilinga, Cindy <Cindy.Shilinga@wsp.com>
Subject: Application to Amend Permit No. WQ0005366000; ET Gathering & Processing LLC; Jackson Gas Plant

Good Afternoon,

Please see the attached Notice of Deficiency letter dated September 11, 2025, requesting additional information needed to declare the application administratively complete. Please send the complete response by September 25, 2025.

Please let me know if you have any questions.

Thank you,



Leah Whallon

Texas Commission on Environmental Quality

Water Quality Division

512-239-0084

leah.whallon@tceq.texas.gov

How is our customer service? Fill out our online customer satisfaction survey at
www.tceq.texas.gov/customersurvey

NOTICE: This communication and any attachments ("this message") may contain information which is privileged, confidential, proprietary or otherwise subject to restricted disclosure under applicable law. This message is for the sole use of the intended recipient(s). Any unauthorized use, disclosure, viewing, copying, alteration, dissemination or distribution of, or reliance on, this message is strictly prohibited. If you have received this message in error, or you are not an authorized or intended recipient, please notify the sender immediately by replying to this message, delete this message and all copies from your e-mail system and destroy any printed copies.

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TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

**APPLICATION TO TRANSFER A WASTEWATER PERMIT
OR CAFO PERMIT**

If you have questions about completing this form please contact the Applications Review and Processing Team at 512-239-4671.

SECTION 1. CURRENT PERMIT INFORMATION

What is the Permit Number? WQ0005366000

What is the EPA I.D. Number? TX TX0133998

What is the Current Name on the Permit?

Energy Transfer Company, Texas Processing Inc./ETC Texas Pipeline, Ltd.

What is the Customer Number (CN) for the current permittee? CN 601587652

What is the Regulated Entity Reference Number (RN): RN 106225436

For Publicly Owned Treatment Works (POTWs) Only:

- a) Does this permit require implementation of an approved pretreatment program by the POTW? Yes ☐ No ☒
- b) Does this permit have a domestic reclaimed water authorization associated with it?
NOTE: **The domestic reclaimed water authorization associated with this permit will be cancelled on the same date the transfer took place.** See instructions for more information.
Yes ☐ No ☒

SECTION 2. FACILITY OWNER (APPLICANT) INFORMATION

A. What is the Legal Name of the facility owner?

ET Gathering & Processing LLC

B. What is the Customer Number (CN) issued to this entity? CN 606187110

C. Complete and attach a Core Data Form (TCEQ-10400) for this customer.

SECTION 3. CO-APPLICANT INFORMATION

Complete this section only if another person or entity is required to apply as a co-permittee.

A. What is the Legal Name of the co-applicant applying for this permit?

- B.** What is the Customer Number (CN) issued to this entity? CN [REDACTED]
- C.** Complete and attach a Core Data Form (TCEQ-10400) for this customer.

SECTION 4. APPLICATION CONTACT INFORMATION

This is the person TCEQ will contact if additional information is needed about this application.

Application Contact First and Last Name: Landon Bippert

Title: Sr Environmental Specialist Credentials: [REDACTED]

Company Name: Energy Transfer

Mailing Address: 676 CR260

City, State, and Zip Code: Ganado, Texas 77962

Phone Number: 361-554-1558 Fax Number: [REDACTED]

E-mail Address: landon.bippert@energytransfer.cm

SECTION 5. PERMIT CONTACT INFORMATION

This is the person TCEQ will contact if additional information is needed during the term of the permit.

Permit Contact First and Last Name: Landon Bippert

Title: Sr Environmental Specialist Credentials: [REDACTED]

Company Name: Energy Transfer

Mailing Address: 676 CR 260

City, State, and Zip Code: Ganado, Texas 77962

Phone Number: 361-554-1558 Fax Number: [REDACTED]

E-mail Address: landon.bippert@energytransfer.com

SECTION 6. SITE INFORMATION

Site Name: Jackson Gas Plant

SECTION 7. LEASE AND EASEMENT REQUIREMENTS

A. Landowner where the facility is or will be located:

Landowner Name: Energy Transfer

If this individual is not the same person as the facility owner or co-applicant, attach one of the following documents:

- A lease agreement or deed recorded easement, if the facility is NOT a fixture of the land, or
- A deed recorded easement if the facility IS a fixture of the land.

B. Landowner of the effluent disposal site:

Landowner Name: [REDACTED]

If this individual is not the same person as the facility owner or co-applicant, attach a lease agreement.

C. For CAFOs: Attach the following records:

- Warranty Deed or Property Tax Records
- Lease Agreement (for land management units that are not owned by the facility owner or co-applicant)

Facility Size on the proof of ownership, in acres: [REDACTED]

SECTION 8. TRANSFER DATE

What is the date that the transfer of operator or ownership will occur? 10/01/2023

SECTION 9. REPORTING AND BILLING INFORMATION

A. Please identify the individual for receiving the reporting forms.

First and Last Name: Thomas Becker

Title: Director-Environmental

Credentials: [REDACTED]

Company Name: Energy Transfer

Mailing Address: 1300 Main

City, State, and Zip Code: Houston, Texas 77002

Phone Number: 210-403-6482 Fax Number: [REDACTED]

E-mail Address: Thomas.becker@energytransfer.com

B. Please identify the individual for receiving the annual fee invoices.

First and Last Name: Megan Burow

Title: Administrative Assistant

Credentials: [REDACTED]

Company Name: Energy Transfer

Mailing Address: 19003 Frontage Rd W-10

City, State, and Zip Code: San Antonio, Texas 78257

Phone Number: 361-698-4142 Fax Number:

E-mail Address: megan.burow@energytransfer.com

SECTION 10. DELINQUENT FEES OR PENALTIES

Do you owe fees to the TCEQ? Yes ☐ No ☒

Do you owe any penalties to the TCEQ? Yes ☐ No ☒

If you answered yes to either of the above questions, provide the amount owed, the type of fee or penalty, and an identifying number.

TRANSFEROR SIGNATURE (Current Facility Owner)

I consent to the transfer of the permit and 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 there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. I further certify that I am authorized under 30 Texas Administrative Code Section 305.44 to sign this document and can provide documentation in proof of such authorization upon request.

Facility Owner Name: Chad Ingalls

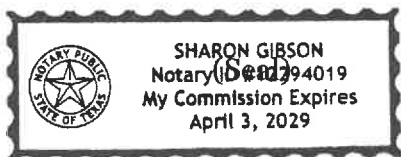
Title: VP-Operations

Signature: [Signature] Date: 09/17/2025

SUBSCRIBED AND SWORN to before me by the said Chad Ingalls on

this 17th day of September, 2025

My commission expires on the 3rd day of April, 2029



[Signature]
Notary Public

Bexar
County, Texas

TRANSFeree SIGNATURE (New Facility Owner)

I certify that a change of ownership of the facility for the subject permit has been issued will occur as indicated in the application. As a condition of the transfer, I do hereby declare that:

The transferee will be the owner of the existing treatment facility from which wastewater is discharged, deposited or disposed or the facilities required to comply with the permit will be constructed as described in the application considered by the TCEQ prior to the issuance of the permit.

The transferee possesses a copy of the permit, understands the terms and conditions therein, and does accept and assume all obligations of the permit.

The transferee assumes financial responsibility for the proper maintenance and operation of all waste treatment and disposal facilities required by the permit or which may be required to comply with the permit terms and conditions. The transferee certifies that the transfer is not made for the purpose of avoiding liability for improper actions carried out prior to the date of transfer. Neither is the transfer made for the purpose of transferring responsibility for improper operations to an insolvent entity.

The transferee certifies under penalty of law that this document is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for known violations and revocation of this permit.

New Facility Owner: Chad Ingalls

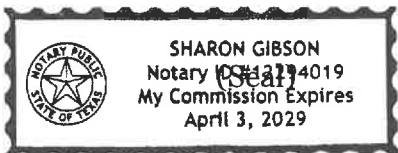
Title: VP-Operations

Signature: _____ Date: 09/17/2025

SUBSCRIBED AND SWORN to before me by the said Chad Ingalls on

this 17th day of September, 2025

My commission expires on the 3rd day of April, 2029



Sharon Gibson
Notary Public

Bexar
County, Texas



TCEQ Core Data Form

For detailed instructions on completing this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)		
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)	<input checked="" type="checkbox"/> Other	APPLICATION TO TRANSFER A WASTEWATER PERMIT
2. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued)
CN 606187110		RN 106225436

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)		10/1/2023	
<input type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership <input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)					
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>					
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John) <i>If new Customer, enter previous Customer below:</i>					
ET Gathering & Processing LLC					
7. TX SOS/CPA Filing Number		8. TX State Tax ID (11 digits)		9. Federal Tax ID (9 digits)	
0805195570		32091185952		30-0108820	
10. DUNS Number (if applicable)					
11. Type of Customer:		<input checked="" type="checkbox"/> Corporation		<input type="checkbox"/> Individual	
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship		Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited	
12. Number of Employees		13. Independently Owned and Operated?			
<input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input checked="" type="checkbox"/> 501 and higher		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following					
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator <input type="checkbox"/> Other: <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant					
15. Mailing Address:		8111 Westchester Dr			
City		Dallas		State TX	
ZIP		75225		ZIP + 4	
16. Country Mailing Information (if outside USA)		17. E-Mail Address (if applicable)			
		Thomas.Becker@energytransfer.com			

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
(210) 403-6482		() -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected, a new permit application is also required.)								
<input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)								
Jackson County Gas PLant								
23. Street Address of the Regulated Entity: (No PO Boxes)	676 County Rd 260							
	City	Ganado	State	TX	ZIP	77962	ZIP + 4	
24. County	Jackson							

If no Street Address is provided, fields 25-28 are required.

25. Description to Physical Location:	FROM GANADO TAKE FM 710 N FOR 4.5 MI TO GALOW RD TURN LEFT & GO 1.25 MI TO SITE ON RIGHT							
26. Nearest City					State	Nearest ZIP Code		
Ganado					TX	77962		
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>								
27. Latitude (N) In Decimal:		29.10993			28. Longitude (W) In Decimal:		-96.53727	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds			
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)		32. Secondary NAICS Code (5 or 6 digits)			
4922			486210					
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)								
natural gas processing								
34. Mailing Address:	676 County Rd 260							
	City	Ganado	State	TX	ZIP	77962	ZIP + 4	
35. E-Mail Address:	london.bippert@energytransfer.com							
36. Telephone Number	37. Extension or Code				38. Fax Number (if applicable)			
(361) 554-1558					() -			

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance.


<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
<input type="checkbox"/> Voluntary Cleanup	<input checked="" type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:
	TX0133998/ WQ0005366000			

SECTION IV: Preparer Information

40. Name:	Landon Bippert	41. Title:	Sr. Env Specialist
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(361) 554-1558		() -	landon.bippert@energytransfer.com

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

Company:	ET Gathering & Processing LLC	Job Title:	Director-Environmental
Name (In Print):	Thomas Becker	Phone:	(210) 403- 6482
Signature:		Date:	9-22-2025



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

INDUSTRIAL WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the industrial wastewater permit application.

APPLICANT NAME: ET- Jackson Gas Plant

PERMIT NUMBER (If new, leave blank): WQ00 05366000

Indicate if each of the following items is included in your application.

	Y	N		Y	N
Administrative Report 1.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 8.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Administrative Report 1.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 9.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SPIF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 10.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Core Data Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Summary of Application (PLS)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Public Involvement Plan Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technical Report 1.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 1.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Original USGS Map	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 2.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Affected Landowners Map	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Landowner Disk or Labels	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Flow Diagram	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Site Drawing	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Original Photographs	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 4.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Design Calculations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 4.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Solids Management Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 5.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Water Balance	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 6.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 7.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>			

For TCEQ Use Only

Segment Number _____ County _____
Expiration Date _____ Region _____

Permit Number _____



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

INDUSTRIAL WASTEWATER PERMIT APPLICATION

ADMINISTRATIVE REPORT 1.0

This report is required for all applications for TPDES permits and TLAPs, except applications for oil and gas extraction operations subject to 40 CFR Part 435. Contact the Applications Review and Processing Team at 512-239-4671 with any questions about completing this report.

Applications for oil and gas extraction operations subject to 40 CFR Part 435 must use Oil and Gas Exploration and Production Administrative Report ([TCEQ Form-20893 and 20893-inst¹](#)).

Item 1. Application Information and Fees (Instructions, Page 26)

- a. Complete each field with the requested information, if applicable.

Applicant Name: ET-Jackson Gas Plant

Permit No.: WQ0005366000

EPA ID No.: TX0133998

Expiration Date: February 28, 2026

- b. Check the box next to the appropriate authorization type.

☒ Industrial Wastewater (wastewater and stormwater)

☐ Industrial Stormwater (stormwater only)

☐ Reverse Osmosis Water Treatment (reverse osmosis water treatment wastewaters only)

- c. Check the box next to the appropriate facility status.

☒ Active

☐ Inactive

- d. Check the box next to the appropriate permit type.

☒ TPDES Permit

☐ TLAP

☐ TPDES with TLAP component

- e. Check the box next to the appropriate application type.

☐ New

☐ Renewal with changes

☐ Renewal without changes

☒ Major amendment with renewal

☐ Major amendment without renewal

☐ Minor amendment without renewal

☐ Minor modification without renewal

- f. If applying for an amendment or modification, describe the request: Requesting to add stormwater Outfall 004 to help prevent standing water on the property.

For TCEQ Use Only

Segment Number _____ County _____

Expiration Date _____ Region _____

¹ https://www.tceq.texas.gov/publications/search_forms.html

Permit Number _____

g. Application Fee

EPA Classification	New	Major Amend. (with or without renewal)	Renewal (with or without changes)	Minor Amend. / Minor Mod. (without renewal)
Minor facility not subject to EPA categorical effluent guidelines (40 CFR Parts 400-471)	<input type="checkbox"/> \$350	<input type="checkbox"/> \$350	<input type="checkbox"/> \$315	<input type="checkbox"/> \$150
Minor facility subject to EPA categorical effluent guidelines (40 CFR Parts 400-471)	<input type="checkbox"/> \$1,250	<input checked="" type="checkbox"/> \$1,250	<input type="checkbox"/> \$1,215	<input type="checkbox"/> \$150
Major facility	N/A ²	<input type="checkbox"/> \$2,050	<input type="checkbox"/> \$2,015	<input type="checkbox"/> \$450

h. Payment Information

Mailed

Check or money order No.: [Click to enter text.](#)

Check or money order amt.: [Click to enter text.](#)

Named printed on check or money order: [Click to enter text.](#)

Epay

Voucher number: 781460 & 781461

Copy of voucher attachment: A6

Item 2. Applicant Information (Instructions, Pages 26)

a. Customer Number, if applicant is an existing customer: CN606187110

Note: Locate the customer number using the [TCEQ's Central Registry Customer Search](#)³.

b. Legal name of the entity (applicant) applying for this permit: ET Gathering & Processing LLC

Note: The owner of the facility must apply for the permit. The legal name must be spelled exactly as filed with the TX SOS, Texas Comptroller of Public Accounts, County, or in the legal documents forming the entity.

c. Name and title of the person signing the application. (**Note:** The person must be an executive official that meets signatory requirements in 30 TAC § 305.44.)

Prefix: Mr. Full Name (Last/First Name): Becker, Thomas

Title: Director of Environmental

Credential: [Click to enter text.](#)

d. Will the applicant have overall financial responsibility for the facility?

☒ Yes ☐ No

² All facilities are designated as minors until formally classified as a major by EPA.

³ <https://www15.tceq.texas.gov/crpub/index.cfm?fuseaction=cust.CustSearch>

Note: The entity with overall financial responsibility for the facility must apply as a co-applicant, if not the facility owner.

Item 3. Co-applicant Information (Instructions, Page 27)

☒ Check this box if there is no co-applicant.; otherwise, complete the below questions.

a. Legal name of the entity (co-applicant) applying for this permit: Click to enter text.

Note: The legal name must be spelled exactly as filed with the TX SOS, Texas Comptroller of Public Accounts, County, or in the legal documents forming the entity.

b. Customer Number (if applicant is an existing customer): CNClick to enter text.

Note: Locate the customer number using the TCEQ's Central Registry Customer Search.

c. Name and title of the person signing the application. (**Note:** The person must be an executive official that meets signatory requirements in 30 TAC § 305.44.)

Prefix: Click to enter text.

Full Name (Last/First Name): Click to enter text.

Title: Click to enter text.

Credential: Click to enter text.

d. Will the co-applicant have overall financial responsibility for the facility?

☐ Yes ☐ No

Note: The entity with overall financial responsibility for the facility must apply as a co-applicant, if not the facility owner.

Item 4. Core Data Form (Instructions, Pages 27)

a. Complete and attach one Core Data Form (TCEQ Form 10400) for each customer (applicant and co-applicant(s)). If the customer type selected on the Core Data Form is Individual, complete Attachment 1 of the Administrative Report. Attachment: A10

Item 5. Application Contact Information (Instructions, Page 27)

Provide names of two individuals who can be contacted about this application. Indicate if the individual can be contacted about administrative or technical information, or both.

a. ☒ Administrative Contact ☒ Technical Contact

Prefix: Mr. Full Name (Last/First Name): Bippert, Landon

Title: Sr Specialist-Environmental

Credential: Click to enter text.

Organization Name: Energy Transfer

Mailing Address: 676 CR 260

City/State/Zip: Ganado, Texas 77962

Phone No: 361-554-1558

Email: Landon.Bippert@energytransfer.com

b. ☒ Administrative Contact ☒ Technical Contact

Prefix: Click to enter text.

Full Name (Last/First Name): Shilinga, Cindy

Title: Consultant

Credential: Click to enter text.

Organization Name: WSP, USA

Mailing Address: 1501 E. Mockingbird Ln. Ste 420 City/State/Zip: Victoria, Texas 77904

Phone No: 361-484-1675 Email: cindy.shilinga@wsp.com

Attachment: [Click to enter text.](#)

Item 6. Permit Contact Information (Instructions, Page 28)

Provide two names of individuals that can be contacted throughout the permit term.

a. Prefix: Mr. Full Name (Last/First Name): Bippert, Landon

Title: Sr Specialist-Environmental Credential: [Click to enter text.](#)

Organization Name: Energy Transfer

Mailing Address: 676 CR 260 City/State/Zip: Ganado, Texas 77962

Phone No: 361-554-1558 Email: Landon.Bippert@energytransfer.com

b. Prefix: Mr. Full Name (Last/First Name): Becker, Thomas

Title: Director of Environmental Credential: [Click to enter text.](#)

Organization Name: Energy Transfer

Mailing Address: 1300 Main City/State/Zip: Houston, Texas 77002

Phone No: 210-403-6482 Email: Thomas.Becker@energytransfer.com

Attachment: [Click to enter text.](#)

Item 7. Billing Contact Information (Instructions, Page 28)

The permittee is responsible for paying the annual fee. The annual fee will be assessed for permits **in effect on September 1 of each year**. The TCEQ will send a bill to the address provided in this section. The permittee is responsible for terminating the permit when it is no longer needed (form TCEQ-20029).

Provide the complete mailing address where the annual fee invoice should be mailed and the name and phone number of the permittee's representative responsible for payment of the invoice.

Prefix: [Click to enter text.](#) Full Name (Last/First Name): Burow, Megan

Title: Administrative Assistant Credential: [Click to enter text.](#)

Organization Name: Energy Transfer

Mailing Address: 19003 Frontage Rd W-10 City/State/Zip: San Antonio, Texas 78257

Phone No: 361-698-4142 Email: Megan.Burow@energytransfer.com

Item 8. DMR/MER Contact Information (Instructions, Page 28)

Provide the name and mailing address of the person delegated to receive and submit DMRs or MERs. **Note:** DMR data must be submitted through the NetDMR system. An electronic reporting account can be established once the facility has obtained the permit number.

Prefix: Mr. Full Name (Last/First Name): Becker, Thomas

Title: Director of Environmental Credential: [Click to enter text.](#)

Organization Name: Energy Transfer

Mailing Address: 1300 Main City/State/Zip: Houston, Texas 77002

Phone No: 210-403-6482

Email: Thomas.Becker@energytransfer.com

Item 9. Notice Information (Instructions, Pages 28)

a. Individual Publishing the Notices

Prefix: Mr. Full Name (Last/First Name): Becker, Thomas

Title: Director of Environmental

Credential: Click to enter text.

Organization Name: Energy Transfer

Mailing Address: 1300 Main

City/State/Zip: Houston, Texas 77002

Phone No: 210-403-6482

Email: Thomas.Becker@energytransfer.com

b. Method for Receiving Notice of Receipt and Intent to Obtain a Water Quality Permit Package (only for NORI, NAPD will be sent via regular mail)

☒ E-mail: Thomas.Becker@energytransfer.com

☐ Fax: Click to enter text.

☐ Regular Mail (USPS)

Mailing Address: Click to enter text.

City/State/Zip Code: Click to enter text.

c. Contact in the Notice

Prefix: Mr. Full Name (Last/First Name): Becker, Thomas

Title: Director of Environmental

Credential: Click to enter text.

Organization Name: Energy Transfer

Phone No: 210-403-6482

Email: Thomas.Becker@energytransfer.com

d. Public Viewing Location Information

Note: If the facility or outfall is located in more than one county, provide a public viewing place for each county.

Public building name: Jackson County Memorial Library Location within the building: Ask front desk for permit application

Physical Address of Building: 411 N Wells St

City: Edna, Texas 77957

County: Jackson

e. Bilingual Notice Requirements

This information is required for new, major amendment, minor amendment or minor modification, and renewal applications.

This section of the application is only used to determine if alternative language notices will be needed. Complete instructions on publishing the alternative language notices will be in your public notice package.

Call the bilingual/ESL coordinator at the nearest elementary and middle schools and obtain the following information to determine if an alternative language notice(s) is required.

1. Is a bilingual education program required by the Texas Education Code at the elementary or middle school nearest to the facility or proposed facility?

☒ Yes ☐ No

If no, publication of an alternative language notice is not required; skip to Item 8 (Regulated Entity and Permitted Site Information.)

2. Are the students who attend either the elementary school or the middle school enrolled in a bilingual education program at that school?

☒ Yes ☐ No

3. Do the students at these schools attend a bilingual education program at another location?

☐ Yes ☒ No

4. Would the school be required to provide a bilingual education program, but the school has waived out of this requirement under 19 TAC §89.1205(g)?

☐ Yes ☒ No ☐ N/A

5. If the answer is yes to question 1, 2, 3, or 4, public notices in an alternative language are required. Which language is required by the bilingual program? Spanish

- f. Summary of Application in Plain Language Template – Complete and attach the Summary of Application in Plain Language Template (TCEQ Form 20972), also known as the plain language summary or PLS. Attachment: A1
- g. Complete and attach one Public Involvement Plan (PIP) Form (TCEQ Form 20960) for each application for a new permit or major amendment. Attachment: A2

Item 10. Regulated Entity and Permitted Site Information (Instructions Page 29)

- a. TCEQ issued Regulated Entity Number (RN), if available: RN106225436

Note: If your business site is part of a larger business site, a Regulated Entity Number (RN) may already be assigned for the larger site. Use the RN assigned for the larger site. Search the TCEQ's Central Registry to determine the RN or to see if the larger site may already be registered as a Regulated Entity. If the site is found, provide the assigned RN.

- b. Name of project or site (name known by the community where located): Jackson Gas Plant

- c. Is the location address of the facility in the existing permit the same?

☒ Yes ☐ No ☐ N/A (new permit)

Note: If the facility is located in Bexar, Comal, Hays, Kinney, Medina, Travis, Uvalde, or Williamson County, additional information concerning protection of the Edwards Aquifer may be required.

- d. Owner of treatment facility:

Prefix: Click to enter text. Full Name (Last/First Name): Click to enter text.

or Organization Name: ET Gathering & Processing LLC

Mailing Address: 1300 Main

City/State/Zip: Houston, Texas 77002

Phone No: Click to enter text. Email: Click to enter text.

- e. Ownership of facility: ☐ Public ☒ Private ☐ Both ☐ Federal

- f. Owner of land where treatment facility is or will be: ET Gathering & Processing LLC
 Prefix: Click to enter text. Full Name (Last/First Name): Click to enter text.
 or Organization Name: ET Gathering & Processing LLC
 Mailing Address: 1300 Main City/State/Zip: Houston, Texas 77002
 Phone No: Click to enter text. Email: Click to enter text.
Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years (In some cases, a lease may not suffice - see instructions). Attachment: Click to enter text.
- g. Owner of effluent TLAP disposal site (if applicable): Click to enter text.
 Prefix: Click to enter text. Full Name (Last/First Name): Click to enter text.
 or Organization Name: Click to enter text.
 Mailing Address: Click to enter text. City/State/Zip: Click to enter text.
 Phone No: Click to enter text. Email: Click to enter text.
Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years. Attachment: Click to enter text.
- h. Owner of sewage sludge disposal site (if applicable):
 Prefix: Click to enter text. Full Name (Last/First Name): Click to enter text.
 or Organization Name: Click to enter text.
 Mailing Address: Click to enter text. City/State/Zip: Click to enter text.
 Phone No: Click to enter text. Email: Click to enter text.
Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years. Attachment: Click to enter text.

Item 11. TDPES Discharge/TLAP Disposal Information (Instructions, Page 31)

- a. Is the facility located on or does the treated effluent cross Native American Land?
☐ Yes ☒ No
- b. Attach an original full size USGS Topographic Map (or an 8.5"×11" reproduced portion for renewal or amendment applications) with all required information. Check the box next to each item below to confirm it has been included on the map.
- | | |
|---|--|
| <input checked="" type="checkbox"/> One-mile radius | <input checked="" type="checkbox"/> Three-miles downstream information |
| <input checked="" type="checkbox"/> Applicant's property boundaries | <input type="checkbox"/> Treatment facility boundaries |
| <input checked="" type="checkbox"/> Labeled point(s) of discharge | <input checked="" type="checkbox"/> Highlighted discharge route(s) |
| <input type="checkbox"/> Effluent disposal site boundaries | <input checked="" type="checkbox"/> All wastewater ponds |
| <input type="checkbox"/> Sewage sludge disposal site | <input checked="" type="checkbox"/> New and future construction |
- Attachment: F3

- c. Is the location of the sewage sludge disposal site in the existing permit accurate?
☒ Yes ☐ No or New Permit
If no, or a new application, provide an accurate location description: [Click to enter text.](#)
- d. Are the point(s) of discharge in the existing permit correct?
☒ Yes ☐ No or New Permit
If no, or a new application, provide an accurate location description: [Click to enter text.](#)
- e. Are the discharge route(s) in the existing permit correct?
☒ Yes ☐ No or New Permit
If no, or a new permit, provide an accurate description of the discharge route: [Click to enter text.](#)
- f. City nearest the outfall(s): Ganado, Texas
- g. County in which the outfalls(s) is/are located: Jackson County
- h. Is or will the treated wastewater discharge to a city, county, or state highway right-of-way, or a flood control district drainage ditch?
☒ Yes ☐ No
If yes, indicate by a check mark if: ☒ Authorization granted ☐ Authorization pending
For new and amendment applications, attach copies of letters that show proof of contact and provide the approval letter upon receipt. Attachment: A3
For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: N/A
- i. For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
☐ Yes ☐ No or New Permit ☐ [Click to enter text.](#)
If no, or a new application, provide an accurate location description: [Click to enter text.](#)
- j. City nearest the disposal site: [Click to enter text.](#)
- k. County in which the disposal site is located: [Click to enter text.](#)
- l. For TLAPs, describe how effluent is/will be routed from the treatment facility to the disposal site: [Click to enter text.](#)
- m. For TLAPs, identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: [Click to enter text.](#)

Item 12. Miscellaneous Information (Instructions, Page 33)

- a. Did any person formerly employed by the TCEQ represent your company and get paid for service regarding this application?

☐ Yes ☒ No

If yes, list each person: [Click to enter text.](#)

- b. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

Account no.: [Click to enter text.](#)

Total amount due: [Click to enter text.](#)

- c. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If yes, provide the following information:

Enforcement order no.: [Click to enter text.](#)

Amount due: [Click to enter text.](#)

Item 13. Signature Page (Instructions, Page 33)

Permit No: WQ000536600

Applicant Name: ET Jackson Gas Plant

Certification: I, Thomas Becker, 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 there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I further certify that I am authorized under 30 Texas Administrative Code §305.44 to sign and submit this document and can provide documentation in proof of such authorization upon request.

Signatory name (typed or printed): Thomas Becker

Signatory title: Director of Environmental

Signature: 
(Use blue ink)

Date: 9-22-2025

Subscribed and Sworn to before me by the said _____
on this 22nd day of September, 2025.

My commission expires on the 3rd day of April, 2029.


Notary Public



Bexar
County, Texas

Note: If co-applicants are necessary, each entity must submit an original, separate signature page.

INDUSTRIAL WASTEWATER PERMIT APPLICATION

ADMINISTRATIVE REPORT 1.1

The following information is required for new and amendment applications.

Item 1. Affected Landowner Information (Instructions, Page 35)

- a. Attach a landowner map or drawing, with scale, as applicable. Check the box next to each item to confirm it has been provided.
- ☒ The applicant's property boundaries.
 - ☒ The facility site boundaries within the applicant's property boundaries.
 - ☐ The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone.
 - ☒ The property boundaries of all landowners surrounding the applicant's property. (Note: if the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)
 - ☒ The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream.
 - ☒ The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge.
 - ☐ The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides.
 - ☒ The boundaries of the effluent disposal site (e.g., irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property.
 - ☒ The property boundaries of all landowners surrounding the applicant's property boundaries where the effluent disposal site is located.
 - ☐ The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners within one-quarter mile of the applicant's property boundaries where the sewage sludge land application site is located.
 - ☐ The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (e.g., sludge surface disposal site or sludge monofil) is located.
- Attachment: F1
- b. ☒ that the landowners list has also been provided as mailing labels in electronic format (Avery 5160).
- c. Check this box to confirm a separate list with the landowners' names and mailing addresses cross-referenced to the landowner's map has been provided. Provide the source of the landowners' names and mailing addresses: Jackson County Appraisal District

- e. As required by Texas Water Code § 5.115, is any permanent school fund land affected by this application?

☐ Yes ☒ No

If yes, provide the location and foreseeable impacts and effects this application has on the land(s): [Click to enter text.](#)

Item 2. Original Photographs (Instructions, Page 37)

Provide original ground level photographs. Check the box next to each of the following items to indicate it is included.

- ☒ At least one original photograph of the new or expanded treatment unit location.
- ☒ At least two photographs of the existing/proposed point of discharge and as much area downstream (photo 1) and upstream (photo 2) as can be captured. If the discharge is to an open water body (e.g., lake, bay), the point of discharge should be in the right or left edge of each photograph showing the open water and with as much area on each respective side of the discharge as can be captured.
- ☒ At least one photograph of the existing/proposed effluent disposal site.
- ☒ A plot plan or map showing the location and direction of each photograph.

Attachment: [A4](#)

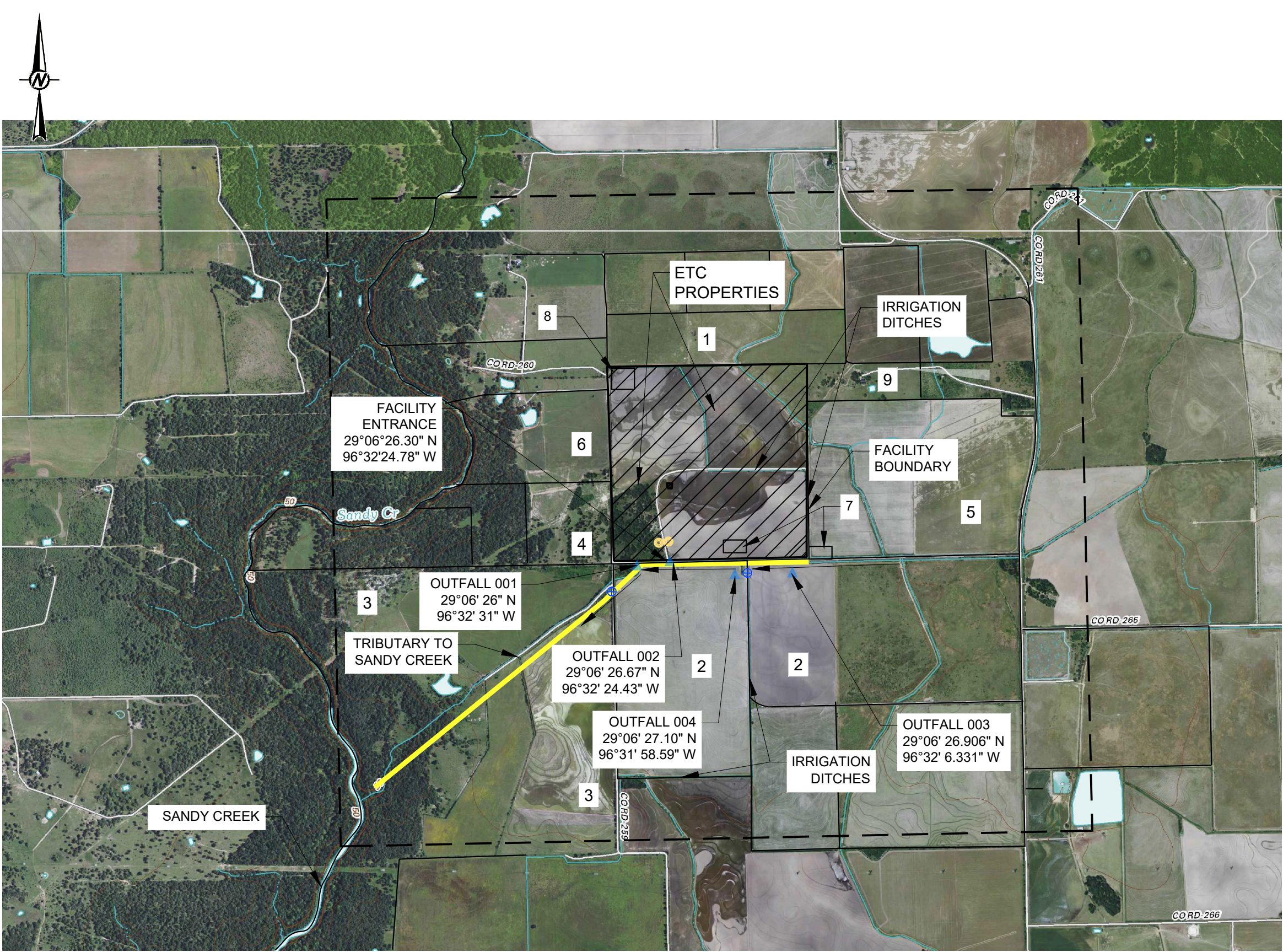
INDUSTRIAL WASTEWATER PERMIT APPLICATION

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

This form applies to TPDES permit applications only. Complete and attach the Supplemental Permit information Form (SPIF) (TCEQ Form 20971).

Attachment: A5

Path: \\wsp-jackson\net\USCentralData\USDA\4001TasakanaProjects - Vector\A_2025\US0046961_1846 ET Jackson Gas Plant\ - Last Edited By: jmc3868 Date: 2025-09-12 Time 6:30:47 PM | Printed By: INRC03868 Date: 2025-09-12 Time 6:31:12 PM



LEGEND


- ← FLOW DIRECTION
- DRINKING WATER WELL
- ⊕ WELL (IRRIGATION) LOCATED WITHIN 1-MILE BOUNDARY
- ▲ OUTFALL
- - - 1-MILE DOWNSTREAM FACILITY BOUNDARIES
- STREAM FLOW
- BOUNDARY LINE
- # LANDOWNER
- ▨ PLANT BOUNDARY



CLIENT
ET GATHERING & PROCESSING LLC

PROJECT
TPDES PERMIT RENEWAL JACKSON GAS PLANT

TITLE
LANDOWNER MAP

	CONSULTANT	YYYY-MM-DD	2025-09-12
	DESIGNED	CS	
	PREPARED	RR	
	REVIEWED	CS	
	APPROVED	CS	

1 in IF THIS MEASUREMENT DOES NOT MATCH WHAT IS SHOWN, THE SHEET SIZE HAS BEEN MODIFIED FROM ANSI B

Ruth G. Stephenson Life Estate Owner 1
Attn: SCOTT STEPHENSON
1730 Avenue C Apt# E
El Campo, TX 77437

Mc Colloch, Robert Owner 2
608 S Union St
Richmond, TX 77406

High Cotton Land Company Owner 3
120 S Third St
Ganado, TX 75056

Owaski, John Owner 4
1808 Chestnut St
Sault St Marie, MI 49783

Ganado Solar LLC Owner 5
100 Brickstone SQ #STE300
Andover, MA 01810

Gallow, Mason Owner 6
3420 CO RD 259
Ganado, TX 75056

South Texas Electric Coop Inc Owner 7
Property Tax Dept
PO Box 119
Nursery, TX 77976

William Hefner, IV Owner 8
7110 Hwy 71
Garwood, TX 77442

William Hefner, III Owner 8
7130 Hwy 71
Garwood, TX 77442

WAYNICK JEFFREY A &
THOMAS C & LISA M WIGGINS Owner 9
4094 FM 710
GANADO, TX 77962

Comisión de Calidad Ambiental del Estado de Texas



AVISO DE RECIBO DE LA SOLICITUD Y EL INTENTO DE OBTENER PERMISO PARA LA CALIDAD DEL AGUA PERMISO MODIFICACION

PERMISO NO. WQ000_____

SOLICITUD. La empresa ET Gathering & Processing LLC, 811 Westchester Drive, Dallas, Texas 75225, que posee una planta de procesamiento de gas natural, ha solicitado a la Comisión de Calidad Ambiental de Texas (TCEQ) para modificar el Permiso No. WQ0005366000 (EPA I.D. No. TX0133998) del Sistema de Eliminación de Descargas de Contaminantes de Texas (TPDES) para autorizar *la incorporacion del desague 004 pata descargar aguas pluviales con un volumen intermitente y variable en el flujo*. La planta está ubicada el 676 County Road 260, cerca de la ciudad de Ganado, en el Condado de Jackson, Texas 77962. La ruta de descarga es del sitio de la planta a un arriyo sin nombre, de allí a un afluente sin nombre, de allí al arroyo Sandy, de allí al lago Texana (pendiente de RWA). La TCEQ recibió esta solicitud el 2 de septiembre de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Jackson County Memorial Library, 411 North Wells Stree, Room 121, Edna, en el Condado de Jackson antes de la fecha de publicación de este aviso en el periódico. La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-96.5375,29.109444&level=18>

Include the following non-italicized sentence if the facility is located in the Coastal Management Program boundary and is an application for a major amendment which will increase the pollutant loads to coastal waters or would result in relocation of an outfall to a critical area, or a renewal with such a major amendment. The Coastal Management Program boundary is the area along the Texas Coast of the Gulf of México as depicted on the map in 31 TAC §503.1 and includes part or all of the following counties: Cameron, Willacy, Kenedy, Kleberg, Nueces, San Patricio, Aransas, Refugio, Calhoun, Victoria, Jackson, Matagorda, Brazoria, Galveston, Harris, Chambers, Jefferson y Orange. If the application is for amendment that does not meet the above description or a renewal without such a major amendment, do not include the sentence:

El Director Ejecutivo de la TCEQ ha revisado esta medida para ver si está de acuerdo con los objetivos y las regulaciones del Programa de Administración Costero de Texas (CMP) de acuerdo con las regulaciones del Consejo Coordinador de la Costa (CCC) y ha determinado que la acción es conforme con las metas y regulaciones pertinentes del CMP.

AVISO DE IDIOMA ALTERNATIVO. El aviso de idioma alternativo en español está disponible

en <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y emitirá una Decisión Preliminar sobre la solicitud. **El aviso de la solicitud y la decisión preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.**

COMENTARIO PUBLICO / REUNION PUBLICA. Usted puede presentar comentarios públicos o pedir una reunión pública sobre esta solicitud. El propósito de una reunión pública es dar la oportunidad de presentar comentarios o hacer preguntas acerca de la solicitud. La TCEQ realiza una reunión pública si el Director Ejecutivo determina que hay un grado de interés público suficiente en la solicitud o si un legislador local lo pide. Una reunión pública no es una audiencia administrativa de lo contencioso.

OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO CONTENCIOSO. Después del plazo para presentar comentarios públicos, el Director Ejecutivo considerará todos los comentarios apropiados y preparará una respuesta a todo los comentarios públicos esenciales, pertinentes, o significativos. **A menos que la solicitud haya sido referida directamente a una audiencia administrativa de lo contencioso, la respuesta a los comentarios y la decisión del Director Ejecutivo sobre la solicitud serán enviados por correo a todos los que presentaron un comentario público y a las personas que están en la lista para recibir avisos sobre esta solicitud. Si se reciben comentarios, el aviso también proveerá instrucciones para pedir una reconsideración de la decisión del Director Ejecutivo y para pedir una audiencia administrativa de lo contencioso.** Una audiencia administrativa de lo contencioso es un procedimiento legal similar a un procedimiento legal civil en un tribunal de distrito del estado.

PARA SOLICITAR UNA AUDIENCIA DE CASO IMPUGNADO, USTED DEBE INCLUIR EN SU SOLICITUD LOS SIGUIENTES DATOS: su nombre, dirección, y número de teléfono; el nombre del solicitante y número del permiso; la ubicación y distancia de su propiedad/actividad con respecto a la instalación; una descripción específica de la forma cómo usted sería afectado adversamente por el sitio de una manera no común al público en general; una lista de todas las cuestiones de hecho en disputa que usted presente durante el período de comentarios; y la declaración "[Yo/nosotros] solicito/solicitamos una audiencia de caso impugnado". Si presenta la petición para una audiencia de caso impugnado de parte de un grupo o asociación, debe identificar una persona que representa al grupo para recibir correspondencia en el futuro; identificar el nombre y la dirección de un miembro del grupo que sería afectado adversamente por la planta o la actividad propuesta; proveer la información indicada anteriormente con respecto a la ubicación del miembro afectado y su distancia de la planta o actividad propuesta; explicar cómo y porqué el miembro sería afectado; y explicar cómo los intereses que el grupo desea proteger son pertinentes al propósito del grupo.

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia

de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión.

La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron retirados posteriormente. **Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios.**

LISTA DE CORREO. Si somete comentarios públicos, un pedido para una audiencia administrativa de lo contencioso o una reconsideración de la decisión del Director Ejecutivo, la Oficina del Secretario Principal enviará por correo los avisos públicos en relación con la solicitud. Además, puede pedir que la TCEQ ponga su nombre en una o más de las listas correos siguientes (1) la lista de correo permanente para recibir los avisos del solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agregue su nombre en una de las listas designe cual lista(s) y envía por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

INFORMACIÓN DISPONIBLE EN LÍNEA. Para detalles sobre el estado de la solicitud, favor de visitar la Base de Datos Integrada de los Comisionados en www.tceq.texas.gov/goto/cid. Para buscar en la base de datos, utilizar el número de permiso para esta solicitud que aparece en la parte superior de este aviso.

CONTACTOS E INFORMACIÓN A LA AGENCIA. Todos los comentarios públicos y solicitudes deben ser presentadas electrónicamente vía <http://www14.tceq.texas.gov/epic/eComment/> o por escrito dirigidos a la Comisión de Texas de Calidad Ambiental, Oficial de la Secretaría (Office of Chief Clerk), MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Tenga en cuenta que cualquier información personal que usted proporcione, incluyendo su nombre, número de teléfono, dirección de correo electrónico y dirección física pasarán a formar parte del registro público de la Agencia. Para obtener más información acerca de esta solicitud de permiso o el proceso de permisos, llame al programa de educación pública de la TCEQ, gratis, al 1-800-687-4040. Si desea información en español, puede llamar al 1-800-687-4040.

También se puede obtener información adicional de la empresa ET Gathering & Processing LLC a la dirección indicada arriba o llamando al Sr. Thomas Becker, Director Ambiental al 210-403-6482.

Fecha de emisión: *[Date notice issued]*



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

**INDUSTRIAL WASTEWATER APPLICATION
CHECKLIST FOR
OIL AND GAS EXTRACTION PERMITS
ISSUED UNDER TEXAS WATER CODE CHAPTER 26**

Complete and submit this checklist with the application.

APPLICANT NAME: ET - Jackson Gas Plant

Indicate if each of the following items is included in your application.

	Y	N		Y	N
Administrative Report 1.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 8.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Administrative Report 1.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 9.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SPIF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 10.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Core Data Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Summary of Application (PLS)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Public Involvement Plan Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Technical Report 1.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 1.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Worksheet 12.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 2.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Original USGS Map	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Affected Landowners Map	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Landowner Disk or Labels	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Flow Diagram	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Site Drawing	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 4.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Original Photographs	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 4.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Design Calculations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 5.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Solids Management Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 6.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Water Balance	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 7.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>			

For TCEQ Use Only

Segment Number _____ County _____

Expiration Date _____ Region _____

Permit Number _____



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

INDUSTRIAL WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.0 FOR OIL AND GAS EXTRACTION PERMITS ISSUED UNDER TEXAS WATER CODE CHAPTER 26

This report is required for all applications for TPDES permits and TLAPs, except applications for oil and gas extraction operations subject to 40 CFR Part 435.

Please download and follow the instructions for Completing the Oil and Gas Extraction Administrative Report ([TCEQ Form-20893-inst¹](#)). Contact the Industrial Permits Team (Oil and Gas Permits) at 512-239-4671 with any questions about completing this report.

1. TYPE OF APPLICATION AND FEES (Instructions, Page 8)

- a. For facilities currently authorized by EPA and/or RRC, provide the following information:
RRC Permit No., if applicable: Click to enter text. Expiration Date: Click to enter text.
EPA ID No., if applicable: TX0133998 Expiration Date: February 28, 2026
- b. Check the box next to the appropriate application type.
- | | |
|--|---|
| <input type="checkbox"/> New TPDES permit | <input type="checkbox"/> Major amendment without renewal |
| <input checked="" type="checkbox"/> Major amendment with renewal | <input type="checkbox"/> Renewal without changes |
| <input type="checkbox"/> Renewal with changes | <input type="checkbox"/> Minor modification without renewal |
| <input type="checkbox"/> Minor amendment without renewal | |
- c. If applying for an **amendment** or **modification** of a permit, describe the request in detail (include attachments as necessary): Requesting to add stormwater Outfall 004 to help prevent standing water on the property.
- d. Check the box next to the amount submitted for the application fee

Application Fee:

EPA Classification	New	Major Amendment (With or Without Renewal)	Renewal (With or Without Changes)	Minor Amendment/ Minor Modification (Without Renewal)
Minor facility	<input type="checkbox"/> \$1,250	<input checked="" type="checkbox"/> \$1,250	<input type="checkbox"/> \$1,215	<input type="checkbox"/> \$150
Major facility	N/A *	<input type="checkbox"/> \$2,050	<input type="checkbox"/> \$2,015	<input type="checkbox"/> \$450

* All facilities are designated as minors until formally classified as a major by EPA.

¹ https://www.tceq.texas.gov/publications/search_forms.html

e. Payment Information:

Mailed Check or money order number: [Click to enter text.](#)

Check or money order amount: [Click to enter text.](#)

Named printed on check or money order: [Click to enter text.](#)

ePAY Voucher number: [781460 & 781461](#)

Copy of voucher attached? ☒ Yes Attachment: [A6](#)

2. APPLICANT INFORMATION (Instructions, Page 8)

a. Facility Owner (Owner of the facility must apply for the permit.)

- Provide the legal name of the entity (applicant) applying for this permit: [ET Gathering & Processing LLC](#)
(The legal name must be spelled exactly as filed with the TX SOS, Texas Comptroller of Public Accounts, County, or in the legal documents forming the entity.)
- If the applicant is currently a customer with the TCEQ, provide the Customer Number, which can be located using the [TCEQ's Central Registry Customer Search](#)²: [CN606187110](#)
- Provide the name and title of the person signing the application. The person must be an executive official meeting signatory requirements in 30 TAC § 305.44.

Prefix: [Mr.](#)

Full Name (Last/First Name: [Becker, Thomas](#)

Title: [Director of Environmental](#) Credential: [Click to enter text.](#)

b. Co-applicant (Operator of the facility, if different from the owner of the facility) Information

- Provide the legal name of the co-applicant applying for this permit, if applicable: [Click to enter text.](#)
(The legal name must be spelled exactly as filed with the TX SOS, Texas Comptroller of Public Accounts, County, or in the legal documents forming the entity.)
- If the co-applicant is currently a customer with the TCEQ, provide the Customer Number, which can be located using the [TCEQ's Central Registry Customer Search](#): [CNClick to enter text.](#)
- Provide the name and title of the person signing the application. The person must be an executive official meeting signatory requirements in 30 TAC § 305.44.
Prefix: [Click to enter text.](#) Full Name (Last/First Name: [Click to enter text.](#)
Title: [Click to enter text.](#) Credential: [Click to enter text.](#)
- Provide a brief description of the need for a co-applicant: [Click to enter text.](#)

² <http://www15.tceq.texas.gov/crpub/index.cfm?fuseaction=cust.CustSearch>

c. Core Data Form

Complete the Core Data Form for each customer and include as an attachment. If the customer type selected on the Core Data Form is **Individual**, complete **Attachment 1** of the Administrative Report.

Attachment: A10

3. APPLICATION CONTACT INFORMATION (Instructions, Page 9)

If the TCEQ needs additional information regarding this application, who should be contacted?

- a. Prefix: Click to enter text. Full Name (Last/First Name: Bippert, Landon
Title: Sr Specialist- Environmental Credential: Click to enter text.
Organization Name: Energy Transfer
Mailing Address: 676 CR 260 City/State/ZIP Code: Ganado, Texas 77962
Phone No.: 361-554-1558 E-mail: Landon.Bippert@energytransfer.com
Check one or both: ☒ Administrative Contact ☒ Technical Contact
- b. Prefix: Click to enter text. Full Name (Last/First Name: Shilinga, Cindy
Title: Consultant Credential: Click to enter text.
Organization Name: WSP, USA
Mailing Address: 1501 E. Mockingbird Ln. Ste 420 City/State/ZIP Code: Victoria, TX 77904
Phone No.: 361-484-1675 E-mail: cindy.shilinga@wsp.com
Check one or both: ☒ Administrative Contact ☒ Technical Contact
Attachment: Click to enter text.

4. PERMIT CONTACT INFORMATION (Instructions, Page 9)

Provide two names of individuals that can be contacted throughout the permit term.

- a. Prefix: Click to enter text. Full Name (Last/First Name: Bippert, Landon
Title: SR Specialist- Environmental Credential: Click to enter text.
Organization Name: Energy Transfer
Mailing Address: 676 CR 260 City/State/ZIP Code: Ganado, Texas 77962
Phone No.: 361-554-1558 E-mail: Landon.Bippert@energytransfer.com
- b. Prefix: Click to enter text. Full Name (Last/First Name: Becker, Thomas
Title: Director of Environmental Credential: Click to enter text.
Organization Name: Energy Transfer
Mailing Address: 1300 Main City/State/ZIP Code: Houston, TX 77002
Phone No.: 210-403-6482 E-mail: Thomas.becker@energytransfer.com
Attachment: Click to enter text.

5. BILLING CONTACT INFORMATION (Instructions, Page 9)

The permittee is responsible for paying the annual fee. The annual fee will be assessed to permits in effect on September 1 of each year. The TCEQ will send a bill to the address provided in this section. The permittee is responsible for terminating the permit when it is no longer needed (form TCEQ-20029).

Provide the complete mailing address where the annual fee invoice should be mailed and the name and phone number of the permittee's representative responsible for payment of the invoice.

Prefix: Click to enter text. Full Name (Last/First Name: Burow, Megan
Title: Administrative Assistant Credential: Click to enter text.
Organization Name: Energy Transfer
Mailing Address: 19003 Frontage Rd W-10 City/State/ZIP Code: San Antonio, TX, 78257
Phone No.: 361-698-4142 E-mail: Megan.burow@energytransfer.com

6. DMR CONTACT INFORMATION (Instructions, Page 10)

Provide the name and mailing address of the person delegated to receive and submit DMRs.

Prefix: Click to enter text. Full Name (Last/First Name: Becker, Thomas
Title: Director of Environmental Credential: Click to enter text.
Organization Name: Energy Transfer
Mailing Address: 1300 Main City/State/ZIP Code: Houston, TX 77002
Phone No.: 210-403-6482 E-mail: Thomas.becker@energytransfer.com

DMR data must be submitted through the [NetDMR³](#) system. An electronic reporting account can be established once the facility has obtained the permit number.

7. NOTICE INFORMATION (Instructions, Page 11)

a. Individual Publishing the Notices

Prefix: Click to enter text. Full Name (Last/First Name: Becker, Thomas
Title: Director of Environmental Credential: Click to enter text.
Organization Name: Energy Transfer
Mailing Address: 1300 Main City/State/ZIP Code: Houston, TX 77002
Phone No.: 210-403-6482 E-mail: Thomas.becker@energytransfer.com

b. Method for Receiving Notice of Receipt and Intent (NORI) to Obtain a Water Quality Permit Package (only for the NORI, the second notice package will be sent via regular mail)

☒ E-mail: Thomas.becker@energytransfer.com

³ <https://www.tceq.texas.gov/permitting/netdmr>

☐ Fax: Click to enter text.

☐ Regular Mail (USPS) – Mailing Address (include City/State/Zip): Click to enter text.

c. Contact in the Notice

Prefix: Click to enter text. Full Name (Last/First Name: Becker, Thomas

Title: Director of Environmental Credential: Click to enter text.

Organization Name: Energy Transfer

Phone No.: 210-403-6482 E-mail: Thomas.becker@energytransfer.com

d. Public Place Information

If the facility or outfall is located in more than one county, provide a public viewing place for each county.

Public building name: Jackson County Memorial Library Location within the building: Ask front desk for permit application.

Physical Address of Building: 411 N Wells St

City: Edna, TX 77957 County: Jackson

e. Bilingual Notice Requirements:

This information **is required** for **new, major amendment, minor amendment or minor modification, and renewal applications.**

This section of the application is only used to determine if alternative language notices will be needed. Complete instructions on publishing the alternative language notices will be in your public notice package.

Please call the bilingual/ESL coordinator at the nearest elementary and middle schools and obtain the following information to determine whether an alternative language notices are required.

1. Is a bilingual education program required by the Texas Education Code at the elementary or middle school nearest to the facility or proposed facility?

☒ Yes ☐ No

If **no**, publication of an alternative language notice is not required; **skip to** Item 8 (REGULATED ENTITY AND PERMITTED SITE INFORMATION.)

2. Are the students who attend either the elementary school or the middle school enrolled in a bilingual education program at that school?

☒ Yes ☐ No

3. Do the students at these schools attend a bilingual education program at another location?

☐ Yes ☒ No

4. Would the school be required to provide a bilingual education program but the school has waived out of this requirement under 19 TAC §89.1205(g)?

☐ Yes ☒ No

5. If the answer is yes to question 1, 2, 3, or 4, public notices in an alternative language are required. Which language is required by the bilingual program? Spanish

f. Summary of Application (PLS)

Complete the Summary of Application in Plain Language form ([TCEQ Form-20972](#)) and include as an attachment.

Attachment: A1

g. Public Involvement Plan Form

Complete the Public Involvement Plan Form ([TCEQ Form-20960](#)) for each application for a new permit or major amendment to a permit and include as an attachment.

Attachment: A2

**8. REGULATED ENTITY AND PERMITTED SITE INFORMATION
(Instructions Page 11)**

If the site of your business is part of a larger business site, a Regulated Entity Number (RN) may already be assigned for the larger site. Use the RN assigned for the larger site. [Search the TCEQ's Central Registry](#)⁴ to determine the RN or to see if the larger site may already be registered as a regulated site:

If the site is found, provide the assigned RN and the information for the site to be authorized through this application below. The site information for this authorization may vary from the larger site information.

- a. TCEQ issued Regulated Entity Number (RN): **RN106225436**
- b. Name of project/site/facility (the name known by the community where located): Jackson Gas Plant
- c. Provide an address for the facility or a description of the facility location using the proximity of the facility to the nearest intersection: 676 CR 260 Ganado, Texas 77962
- d. If the facility is located in Bexar, Comal, Hays, Kinney, Medina, Travis, Uvalde, or Williamson County, additional information concerning protection of the Edwards Aquifer may be required.
- e. Ownership of facility: ☐ Public ☒ Private ☐ Both ☐ Federal

9. TDPEs DISCHARGE INFORMATION (Instructions, Page 12)

- a. Is the facility located on or does the treated effluent cross American Indian Land?
☐ Yes ☒ No

⁴ <http://www15.tceq.texas.gov/crpub/index.cfm?fuseaction=regent.RNSearch>

- b. Attach an **original** full size USGS Topographic Map (or an 8.5"×11" **reproduced** portion for renewal or amendment applications) with all required information. Check the box next to each item below to confirm it has been included on the map.
- | | |
|--|--|
| <input checked="" type="checkbox"/> One-mile radius and three-miles downstream information | <input checked="" type="checkbox"/> All wastewater ponds |
| <input checked="" type="checkbox"/> Facility boundaries | <input checked="" type="checkbox"/> New and future construction |
| <input type="checkbox"/> State tract or lease block boundaries | <input type="checkbox"/> Labeled and highlighted parks, playgrounds, and schoolyards |
| <input checked="" type="checkbox"/> Labeled point(s) of discharge and highlighted discharge route(s) | <input checked="" type="checkbox"/> Attachment: <u>F3</u> |
- c. Provide the state tract or lease block number and state tract or lease block name, and well numbers associated with the discharged water: N/A
- d. Provide an accurate description of the point(s) of discharge and the discharge route(s): Outfall 001, 002, 003, 004(new) which discharges into an unnamed ditch located along County Road 260, to unnamed tributary, to Sandy Creek, in Waterbody Segment Code No. 1604C, Lake Texana of the Lavaca Basin.
- e. City nearest the outfall(s): Ganado, TX
- f. County or counties in which the outfalls(s) is/are located: Jackson County
- g. Is or will the treated wastewater discharge to a city, county, or state highway right-of-way, or a flood control district drainage ditch?
- ☒ Yes ☐ No
- If **yes**, indicate by a check mark if: ☒ Authorization granted ☐ Authorization pending
- For **new and amendment** applications, provide copies of letters that show proof of contact and the approval letter upon receipt.
- Attachment:** A3
- h. For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge. N/A

10. MISCELLANEOUS INFORMATION (Instructions, Page 14)

- a. Did any person formerly employed by the TCEQ represent your company and get paid for service regarding this application?

☐ Yes ☒ No

If **yes**, list each person: [Click to enter text.](#)

- b. Do you owe any fees to the TCEQ?

☐ Yes ☒ No

If **yes**, provide the following:

- Acct. No.: [Click to enter text.](#)
- Amt. due: [Click to enter text.](#)

- c. Do you owe any penalties to the TCEQ?

☐ Yes ☒ No

If **yes**, provide the following:

- Enforcement Order No.: [Click to enter text.](#)
- Amt. due: [Click to enter text.](#)

11. SIGNATURE PAGE (Instructions, Page 15)

Applicant Name: ET Jackson Gas Plant

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 there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I further certify that I am authorized under 30 Texas Administrative Code §305.44 to sign and submit this document, and can provide documentation in proof of such authorization upon request.

Signatory name (typed or printed): Thomas Becker

Signatory title: Director of Environmental

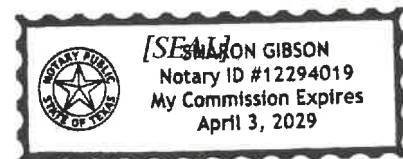
Signature: _____ Date: 8.29.2025
(Use blue ink)

Subscribed and Sworn to before me by the said Thomas Becker

on this 29th day of August, 2025.

My commission expires on the 3rd day of August, 2029.

Sharon Gibson
Notary Public



Bexar
County, Texas

If a co-applicant is necessary, each entity must submit an original, separate signature page.

INDUSTRIAL WASTEWATER PERMIT APPLICATION ADMINISTRATIVE REPORT 1.1 FOR OIL AND GAS EXPLORATION AND PRODUCTION PERMITS ISSUED UNDER TEXAS WATER CODE CH. 26

The following information is required for **new** and **amendment** applications.

1. AFFECTED LANDOWNER INFORMATION (Instructions, Page 16)

a. Landowner Map Components

Attach a landowner map or drawing, with scale, as applicable. Check the box next to each item to confirm it has been provided.

- ☒ The facility's boundaries.
- ☒ The property boundaries of all properties adjacent to the facility's boundaries.
- ☒ The property boundaries of all properties within the facility's boundaries.
- ☒ The property boundaries of all properties overlapping the facility's boundaries.
- ☒ The property boundaries of all properties adjacent to any property overlapping the facility's boundaries.
- ☒ The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream of the discharge point(s).
- ☒ The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the discharge point(s).
- ☐ The property boundaries of the landowners along the watercourse for a one-half mile radius from the discharge point(s) if the discharge is into a lake, bay, estuary, or affected by tides.

Attachment: F1

b. Landowner List

- ☒ that the landowners list has also been provided as mailing labels in electronic format (Avery 5160).

c. Cross-Referenced Landowner List

- ☒ Check this box to confirm a separate list with the landowners' names and mailing addresses cross-referenced to the landowner map has been attached.

d. Landowner Data Source

Check this box to confirm a separate list with the landowners' names and mailing addresses cross-referenced to the landowner's map has been provided.

e. School Fund Land

As required by *TWC* § 5.115, is any permanent school fund land affected by this application?

- ☐ Yes ☒ No

If **yes**, provide the location and foreseeable impacts and effects this application has on the land(s): Click to enter text.

2. ORIGINAL PHOTOGRAPHS (Instructions, Page 18)

Provide original ground-level photographs. Indicate the following information is provided.

- ☒ At least one original photograph of the new or expanded facility location.
- ☒ At least two photographs of the existing/proposed point of discharge and as much area downstream (photo 1) and upstream (photo 2) as can be captured. If the discharge is to an open water body (e.g., lake, bay), the point of discharge should be in the right or left edge of each photograph showing the open water and with as much area on each respective side of the discharge as can be captured.
- ☒ A plot plan or map showing the location and direction of each photograph.

Attachment: A4

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

This form applies to TPDES permit applications only. Complete and attach the Supplemental Permit information Form (SPIF) (TCEQ Form 20971).

Attachment: A5



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

INDUSTRIAL WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

The following information **is required** for all applications for a TLAP or an individual TPDES discharge permit.

For **additional information** or clarification on the requested information, please refer to the [Instructions for Completing the Industrial Wastewater Permit Application](#)¹ available on the TCEQ website. Please contact the Industrial Permits Team at 512-239-4671 with any questions about this form.

If more than one outfall is included in the application, provide applicable information for each individual outfall. **If an item does not apply to the facility, enter N/A** to indicate that the item has been considered. Include separate reports or additional sheets as **clearly cross-referenced attachments** and provide the attachment number in the space provided for the item the attachment addresses.

NOTE: This application is for an industrial wastewater permit only. Additional authorizations from the TCEQ Waste Permits Division or the TCEQ Air Permits Division may be needed.

Item 1. Facility/Site Information (Instructions, Page 39)

- a. Describe the general nature of the business and type(s) of industrial and commercial activities. Include all applicable SIC codes (up to 4).

The Jackson Plant is a natural gas processing facility that receives rich gas via pipeline. The Facility includes associated natural gas compression equipment, a slug catcher, separators, condensate stabilization unit, condensate unloading and natural gas liquid (NGL) loading area, amine units, dehydration units, cryogenic units, condensate storage tanks, heaters, associated piping and a flare. SIC Code 4922

- b. Describe all wastewater-generating processes at the facility.

Water to the facility is provided by the two onsite water wells. Groundwater is obtained from the Gulf Coast Aquifer. This water is treated in the facility's Reverse osmosis (RO) unit and is used to blend with the Amine and the treating process. The RO reject (about 50% of feed water) then flows to the stormwater retention pond located on the plant property. There are no treatments applied to the wastewater to improve its quality. Sanitary wastes are treated on-site by aerobic septic systems.

¹
https://www.tceq.texas.gov/permitting/wastewater/industrial/TPDES_industrial_wastewater_steps.html

- c. Provide a list of raw materials, major intermediates, and final products handled at the facility.

Materials List

Raw Materials	Intermediate Products	Final Products
Raw Natural Gas		Sale-Grade Natural Gas

Attachment: NA

- d. Attach a facility map (drawn to scale) with the following information:

- Production areas, maintenance areas, materials-handling areas, waste-disposal areas, and water intake structures.
- The location of each unit of the WWTP including the location of wastewater collection sumps, impoundments, outfalls, and sampling points, if significantly different from outfall locations.

Attachment: F2

- e. Is this a new permit application for an existing facility?

☐ Yes ☒ No

If **yes**, provide background discussion: [Click to enter text.](#)

- f. Is/will the treatment facility/disposal site be located above the 100-year frequency flood level.

☒ Yes ☐ No

List source(s) used to determine 100-year frequency flood plain: FEMA's National Flood Hazardous Mapping System

If **no**, provide the elevation of the 100-year frequency flood plain and describe what protective measures are used/proposed to prevent flooding (including tail water and rainfall run-on controls) of the treatment facility and disposal area: [Click to enter text.](#)

Attachment: A12

- g. For **new** or **major amendment** permit applications, will any construction operations result in a discharge of fill material into a water in the state?

☐ Yes ☒ No ☐ N/A (renewal only)

h. If **yes** to Item 1.g, has the applicant applied for a USACE CWA Chapter 404 Dredge and Fill permit?

☐ Yes ☐ No

If **yes**, provide the permit number: [Click to enter text.](#)

If **no**, provide an approximate date of application submittal to the USACE: [Click to enter text.](#)

Item 2. Treatment System (Instructions, Page 40)

a. List any physical, chemical, or biological treatment process(es) used/proposed to treat wastewater at this facility. Include a description of each treatment process, starting with initial treatment and finishing with the outfall/point of disposal.

No treatment occurs at this facility.

b. Attach a flow schematic **with a water balance** showing all sources of water and wastewater flow into the facility, wastewater flow into and from each treatment unit, and wastewater flow to each outfall/point of disposal.

Attachment: A7

Item 3. Impoundments (Instructions, Page 40)

Does the facility use or plan to use any wastewater impoundments (e.g., lagoons or ponds?)

☒ Yes ☐ No

If **no**, proceed to Item 4. If **yes**, complete **Item 3.a** for **existing** impoundments and **Items 3.a - 3.e** for **new or proposed** impoundments. **NOTE:** See instructions, Pages 40-42, for additional information on the attachments required by Items 3.a – 3.e.

a. Complete the table with the following information for each existing, new, or proposed impoundment. Attach additional copies of the Impoundment Information table, if needed.

Use Designation: Indicate the use designation for each impoundment as Treatment (T), Disposal (D), Containment (C), or Evaporation (E).

Associated Outfall Number: Provide an outfall number if a discharge occurs or will occur.

Liner Type: Indicate the liner type as Compacted clay liner (C), In-situ clay liner (I), Synthetic/plastic/rubber liner (S), or Alternate liner (A). **NOTE:** See instructions for further detail on liner specifications. If an alternate liner (A) is selected, include an attachment that provides a description of the alternate liner and any additional technical information necessary for an evaluation.

Leak Detection System: If any leak detection systems are in place/planned, enter Y for yes. Otherwise, enter N for no.

Groundwater Monitoring Wells and Data: If groundwater monitoring wells are in place/planned, enter Y for yes. Otherwise, enter N for no. Attach any existing groundwater monitoring data.

Dimensions: Provide the dimensions, freeboard, surface area, storage capacity of the impoundments, and the maximum depth (not including freeboard). For impoundments with irregular shapes, submit surface area instead of length and width.

Compliance with 40 CFR Part 257, Subpart D: If the impoundment is required to be in compliance with 40 CFR Part 257, Subpart D, enter Y for yes. Otherwise, enter N for no.

Date of Construction: Enter the date construction of the impoundment commenced (mm/dd/yy).

Impoundment Information

Parameter	Pond #	Pond #	Pond #	Pond #
Use Designation: (T) (D) (C) or (E)	T			
Associated Outfall Number	001			
Liner Type (C) (I) (S) or (A)	A			
Alt. Liner Attachment Reference	Natural soil			
Leak Detection System, Y/N	N			
Groundwater Monitoring Wells, Y/N	N			
Groundwater Monitoring Data Attachment	N/A			
Pond Bottom Located Above The Seasonal High-Water Table, Y/N	Y			
Length (ft)	See A8			
Width (ft)	See A8			
Max Depth From Water Surface (ft), Not Including Freeboard	See A8			
Freeboard (ft)	See A8			
Surface Area (acres)	See A8			
Storage Capacity (gallons)	18.4 MG			
40 CFR Part 257, Subpart D, Y/N	N			
Date of Construction	02/2012			

Attachment: A8

The following information (**Items 3.b – 3.e**) is required only for **new or proposed** impoundments.

- b. For new or proposed impoundments, attach any available information on the following items. If attached, check **yes** in the appropriate box. Otherwise, check **no** or **not yet designed**.

1. Liner data

☐ Yes ☐ No ☐ Not yet designed

2. Leak detection system or groundwater monitoring data

☐ Yes ☐ No ☐ Not yet designed

3. Groundwater impacts

☐ Yes ☐ No ☐ Not yet designed

NOTE: Item b.3 is required if the bottom of the pond is not above the seasonal high-water table in the shallowest water-bearing zone.

Attachment: [Click to enter text.](#)

For TLAP applications: Items 3.c – 3.e are not required, continue to Item 4.

- c. Attach a USGS map or a color copy of original quality and scale which accurately locates and identifies all known water supply wells and monitor wells within ½-mile of the impoundments.

Attachment: [Click to enter text.](#)

- d. Attach copies of State Water Well Reports (e.g., driller's logs, completion data, etc.), and data on depths to groundwater for all known water supply wells including a description of how the depths to groundwater were obtained.

Attachment: [Click to enter text.](#)

- e. Attach information pertaining to the groundwater, soils, geology, pond liner, etc. used to assess the potential for migration of wastes from the impoundments or the potential for contamination of groundwater or surface water.

Attachment: [Click to enter text.](#)

Item 4. Outfall/Disposal Method Information (Instructions, Page 42)

Complete the following tables to describe the location and wastewater discharge or disposal operations for each outfall for discharge, and for each point of disposal for TLAP operations.

If there are more outfalls/points of disposal at the facility than the spaces provided, copies of pages 6 and/or numbered accordingly (i.e., page 6a, 6b, etc.) may be used to provide information on the additional outfalls.

For TLAP applications: Indicate the disposal method and each individual irrigation area **I**, evaporation pond **E**, or subsurface drainage system **S** by providing the appropriate letter designation for the disposal method followed by a numerical designation for each disposal

area in the space provided for **Outfall** number (e.g. E1 for evaporation pond 1, I2 for irrigation area No. 2, etc.).

Outfall Longitude and Latitude

Outfall No.	Latitude (Decimal Degrees)	Longitude (Decimal Degrees)
001	29.1072	96.5419
002	29.1074	96.5401
003	29.1075	96.5329
004 (new)	29.1074	96.5184

Outfall Location Description

Outfall No.	Location Description
001	Double pipes west of the main entrance in an unnamed ditch located along County Road 260
002	Pipe east of the main entrance in an unnamed ditch located along County Road 260
003	Double Pipes east of the access gate in an unnamed ditch located along County Road 260
004 (new)	Pipe west of the access gate in an unnamed ditch located along County Road 260

Description of Sampling Point(s) (if different from Outfall location)

Outfall No.	Description of sampling point

Outfall Flow Information – Permitted and Proposed

Outfall No.	Permitted Daily Avg Flow (MGD)	Permitted Daily Max Flow (MGD)	Proposed Daily Avg Flow (MGD)	Proposed Daily Max Flow (MGD)	Anticipated Discharge Date (mm/dd/yy)
001	0.179	Report			
002	Estimate	Estimate			
003	Estimate	Estimate			
004 (new)			Estimate	Estimate	45 days after permit received

Outfall Discharge – Method and Measurement

Outfall No.	Pumped Discharge? Y/N	Gravity Discharge? Y/N	Type of Flow Measurement Device Used
001a	Y	N	Pump GPM

Outfall No.	Pumped Discharge? Y/N	Gravity Discharge? Y/N	Type of Flow Measurement Device Used
001b Stormwater	N	Y	estimate
002	N	Y	estimate
003	N	Y	estimate
004 (new)	N	Y	estimate

Outfall Discharge - Flow Characteristics

Outfall No.	Intermittent Discharge? Y/N	Continuous Discharge? Y/N	Seasonal Discharge? Y/N	Discharge Duration (hrs/day)	Discharge Duration (days/mo)	Discharge Duration (mo/yr)
001	Y	N	N			
002	Y	N	N			
003	Y	N	N			
004 (new)	Y	N	N			

Outfall Wastestream Contributions

Outfall No. 001A

Contributing Wastestream	Volume (MGD)	Percent (%) of Total Flow
RO Reject	0.017	4
Stormwater	0.169	94

Outfall No. 001B & 002

Contributing Wastestream	Volume (MGD)	Percent (%) of Total Flow
Stormwater 001B	Variable	100
Stormwater 002	Variable	100

Outfall No. 003 & 004

Contributing Wastestream	Volume (MGD)	Percent (%) of Total Flow
Stormwater Outfall 003	Variable	100
Stormwater Outfall 004 (New)	Variable	100

Attachment: [Click to enter text.](#)

Item 5. Blowdown and Once-Through Cooling Water Discharges (Instructions, Page 43)

a. Indicate if the facility currently or proposes to:

- ☐ Yes ☒ No Use cooling towers that discharge blowdown or other wastestreams
☐ Yes ☒ No Use boilers that discharge blowdown or other wastestreams
☐ Yes ☒ No Discharge once-through cooling water

NOTE: If the facility uses or plans to use cooling towers or once-through cooling water, Item 12 is required.

b. If **yes** to any of the above, attach an SDS with the following information for each chemical additive.

- Manufacturers Product Identification Number
- Product use (e.g., biocide, fungicide, corrosion inhibitor, etc.)
- Chemical composition including CASRN for each ingredient
- Classify product as non-persistent, persistent, or bioaccumulative
- Product or active ingredient half-life
- Frequency of product use (e.g., 2 hours/day once every two weeks)
- Product toxicity data specific to fish and aquatic invertebrate organisms
- Concentration of whole product or active ingredient, as appropriate, in wastestream.

In addition to each SDS, attach a summary of the above information for each specific wastestream and the associated chemical additives. Specify which outfalls are affected.

Attachment: [Click to enter text.](#)

c. Cooling Towers and Boilers

If the facility currently or proposes to use cooling towers or boilers that discharge blowdown or other wastestreams to the outfall(s), complete the following table.

Cooling Towers and Boilers

Type of Unit	Number of Units	Daily Avg Blowdown (gallons/day)	Daily Max Blowdown (gallons/day)
Cooling Towers			
Boilers			

Item 6. Stormwater Management (Instructions, Page 44)

Will any existing/proposed outfalls discharge stormwater associated with industrial activities, as defined at 40 CFR § 122.26(b)(14), commingled with any other wastestream?

☐ Yes ☒ No

If **yes**, briefly describe the industrial processes and activities that occur outdoors or in a manner which may result in exposure of the activities or materials to stormwater: [Click to enter text.](#)

Item 7. Domestic Sewage, Sewage Sludge, and Septage Management and Disposal (Instructions, Page 44)

Domestic Sewage - Waste and wastewater from humans or household operations that is discharged to a wastewater collection system or otherwise enters a treatment works.

a. Check the box next to the appropriate method of domestic sewage and domestic sewage sludge treatment or disposal. Complete Worksheet 5.0 or Item 7.b if directed to do so.

- ☐ Domestic sewage is routed (i.e., connected to or transported to) to a WWTP permitted to receive domestic sewage for treatment, disposal, or both. Complete Item 7.b.
- ☒ Domestic sewage disposed of by an on-site septic tank and drainfield system. Complete Item 7.b.
- ☐ Domestic and industrial treatment sludge ARE commingled prior to use or disposal.
- ☐ Industrial wastewater and domestic sewage are treated separately, and the respective sludge IS NOT commingled prior to sludge use or disposal. Complete Worksheet 5.0.
- ☐ Facility is a POTW. Complete Worksheet 5.0.
- ☐ Domestic sewage is not generated on-site.
- ☐ Other (e.g., portable toilets), specify and Complete Item 7.b: [Click to enter text.](#)

b. Provide the name and TCEQ, NPDES, or TPDES Permit No. of the waste-disposal facility which receives the domestic sewage/septage. If hauled by motorized vehicle, provide the name and TCEQ Registration No. of the hauler.

Domestic Sewage Plant/Hauler Name

Plant/Hauler Name	Permit/Registration No.
Jackson Gas Plant OSSF Permit	2012-1050

Item 8. Improvements or Compliance/Enforcement Requirements (Instructions, Page 45)

- a. Is the permittee currently required to meet any implementation schedule for compliance or enforcement?
- ☐ Yes ☒ No
- b. Has the permittee completed or planned for any improvements or construction projects?
- ☒ Yes ☒ No
- c. If **yes** to either 8.a or 8.b, provide a brief summary of the requirements and a status update: Will regrade drainage for stormwater Outfall 002 to make new stormwater Outfall 004 once permit is received.

Item 9. Toxicity Testing (Instructions, Page 45)

Have any biological tests for acute or chronic toxicity been made on any of the discharges or on a receiving water in relation to the discharge within the last three years?

☐ Yes ☒ No

If **yes**, identify the tests and describe their purposes: [Click to enter text.](#)

Additionally, attach a copy of all tests performed which **have not** been submitted to the TCEQ or EPA. **Attachment:** [Click to enter text.](#)

Item 10. Off-Site/Third Party Wastes (Instructions, Page 45)

- a. Does or will the facility receive wastes from off-site sources for treatment at the facility, disposal on-site via land application, or discharge via a permitted outfall?

☐ Yes ☒ No

If **yes**, provide responses to Items 10.b through 10.d below.

If **no**, proceed to Item 11.

- b. Attach the following information to the application:

- List of wastes received (including volumes, characterization, and capability with on-site wastes).
- Identify the sources of wastes received (including the legal name and addresses of the generators).
- Description of the relationship of waste source(s) with the facility's activities.

Attachment: [Click to enter text.](#)

- c. Is or will wastewater from another TCEQ, NPDES, or TPDES permitted facility commingled with this facility's wastewater after final treatment and prior to discharge via the final outfall/point of disposal?

☐ Yes ☐ No

If **yes**, provide the name, address, and TCEQ, NPDES, or TPDES permit number of the contributing facility and a copy of any agreements or contracts relating to this activity.

Attachment: [Click to enter text.](#)

- d. Is this facility a POTW that accepts/will accept process wastewater from any SIU and has/is required to have an approved pretreatment program under the NPDES/TPDES program?

☐ Yes ☒ No

If **yes**, **Worksheet 6.0** of this application **is required**.

Item 11. Radioactive Materials (Instructions, Page 46)

- a. Are/will radioactive materials be mined, used, stored, or processed at this facility?

☐ Yes ☒ No

If **yes**, use the following table to provide the results of one analysis of the effluent for all radioactive materials that may be present. Provide results in pCi/L.

Radioactive Materials Mined, Used, Stored, or Processed

Radioactive Material Name	Concentration (pCi/L)

- b. Does the applicant or anyone at the facility have any knowledge or reason to believe that radioactive materials may be present in the discharge, including naturally occurring radioactive materials in the source waters or on the facility property?

☐ Yes ☒ No

If **yes**, use the following table to provide the results of one analysis of the effluent for all radioactive materials that may be present. Provide results in pCi/L. Do not include information provided in response to Item 11.a.

Radioactive Materials Present in the Discharge

Radioactive Material Name	Concentration (pCi/L)

Item 12. Cooling Water (Instructions, Page 46)

- a. Does the facility use or propose to use water for cooling purposes?

☐ Yes

☒ No

☐ Decommissioned: [Click to enter text.](#)

☐ To Be Decommissioned: [Click to enter text.](#)

If **yes**, complete Items 12.b thru 12.f. If **no**, stop here.

If **decommissioned**, provide the date operation ceased and stop here.

If to **be decommissioned**, provide the date operation is anticipated to cease and stop here.

- b. Cooling water is/will be obtained from a groundwater source (e.g., on-site well).

☐ Yes

☐ No

If **yes**, stop here. If **no**, continue.

- c. Cooling Water Supplier

1. Provide the name of the owner(s) and operator(s) for the CWIS that supplies or will supply water for cooling purposes to the facility.

Cooling Water Intake Structure(s) Owner(s) and Operator(s)

CWIS ID				
Owner				
Operator				

2. Cooling water is/will be obtained from a Public Water Supplier (PWS)

☐ No

☐ Yes; PWS No.: [Click to enter text.](#)

If **no**, continue. If **yes**, provide the PWS Registration No. and stop here.

3. Cooling water is/will be obtained from a reclaimed water source?

☐ No ☐ Yes; Auth No.: [Click to enter text.](#)

If **no**, continue. If **yes**, provide the Reuse Authorization No. and stop here.

4. Cooling water is/will be obtained from an Independent Supplier

☐ No ☐ Yes; AIF: [Click to enter text.](#)

If **no**, proceed to Item 12.d. If **yes**, provide the actual intake flow of the Independent Supplier's CWIS that is/will be used to provide water for cooling purposes and proceed.

d. 316(b) General Criteria

1. The CWIS(s) used to provide water for cooling purposes to the facility has or will have a cumulative design intake flow of 2 MGD or greater.

☐ Yes ☐ No

2. At least 25% of the total water withdrawn by the CWIS(s) is/will be used at the facility exclusively for cooling purposes on an annual average basis.

☐ Yes ☐ No

3. The CWIS(s) withdraw(s)/propose(s) to withdraw water for cooling purposes from surface waters that meet the definition of Waters of the United States in *40 CFR § 122.2*.

☐ Yes ☐ No. Explanation: [Click to enter text.](#)

If **no**, provide an explanation of how the waterbody does not meet the definition of Waters of the United States in *40 CFR § 122.2*.

If **yes** to all three questions in Item 12.d, the facility **meets** the minimum criteria to be subject to the full requirements of Section 316(b) of the CWA. Proceed to **Item 12.f**.

If **no** to any of the questions in Item 12.d, the facility **does not meet** the minimum criteria to be subject to the full requirements of Section 316(b) of the CWA; however, a determination is required based upon BPJ. Proceed to **Item 12.e**.

- e. The facility does not meet the minimum requirements to be subject to the fill requirements of Section 316(b) **and uses/proposes to use cooling towers**.

☐ Yes ☐ No

If **yes**, stop here. If **no**, complete Worksheet 11.0, Items 1.a, 1.b.1-3 and 6, 2.b.1, and 3.a to allow for a determination based upon BPJ.

f. Oil and Gas Exploration and Production

1. The facility is subject to requirements at 40 CFR Part 435, Subparts A or D.

☐ Yes ☐ No

If **yes**, continue. If **no**, skip to Item 12.g.

2. The facility is an existing facility as defined at 40 CFR § 125.92(k) or a new unit at an existing facility as defined at 40 CFR § 125.92(u).

☐ Yes ☐ No

If **yes**, complete Worksheet 11.0, Items 1.a, 1.b.1-3 and 6, 2.b.1, and 3.a to allow for a determination based upon BPJ. If **no**, skip to Item 12.g.3.

g. Compliance Phase and Track Selection

1. Phase I – New facility subject to 40 CFR Part 125, Subpart I

☐ Yes ☐ No

If **yes**, check the box next to the compliance track selection, attach the requested information, and complete Worksheet 11.0, Items 2 and 3, and Worksheet 11.2.

☐ Track I – AIF greater than 2 MGD, but less than 10 MGD

- Attach information required by 40 CFR §§ 125.86(b)(2)-(4).

☐ Track I – AIF greater than 10 MGD

- Attach information required by 40 CFR § 125.86(b).

☐ Track II

- Attach information required by 40 CFR § 125.86(c).

Attachment: [Click to enter text.](#)

2. Phase II – Existing facility subject to 40 CFR Part 125, Subpart J

☐ Yes ☐ No

If **yes**, complete Worksheets 11.0 through 11.3, as applicable.

3. Phase III – New facility subject to 40 CFR Part 125, Subpart N

☐ Yes ☐ No

If **yes**, check the box next to the compliance track selection and provide the requested information.

☐ Track I – Fixed facility

- Attach information required by 40 CFR § 125.136(b) and complete Worksheet 11.0, Items 2 and 3, and Worksheet 11.2.

☐ Track I – Not a fixed facility

- Attach information required by 40 CFR § 125.136(b) and complete Worksheet 11.0, Item 2 (except CWIS latitude/longitude under Item 2.a).

☐ Track II – Fixed facility

- Attach information required by 40 CFR § 125.136(c) and complete Worksheet 11.0, Items 2 and 3.

Attachment: [Click to enter text.](#)

Item 13. Permit Change Requests (Instructions, Page 48)

This item is only applicable to existing permitted facilities.

a. Is the facility requesting a **major amendment** of an existing permit?

☒ Yes ☐ No

If **yes**, list each request individually and provide the following information: 1) detailed information regarding the scope of each request and 2) a justification for each request. Attach any supplemental information or additional data to support each request.

Requesting to add stormwater Outfall 004 to help prevent standing water on the property at stormwater Outfall 002.

b. Is the facility requesting any **minor amendments** to the permit?

☐ Yes ☒ No

If **yes**, list and describe each change individually.

Click to enter text.

c. Is the facility requesting any **minor modifications** to the permit?

☐ Yes ☒ No

If **yes**, list and describe each change individually.

Click to enter text.

Item 14. Laboratory Accreditation (Instructions, Page 49)

All laboratory tests performed must meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification*, which includes the following general exemptions from National Environmental Laboratory Accreditation Program (NELAP) certification requirements:

- The laboratory is an in-house laboratory and is:
 - periodically inspected by the TCEQ; or
 - located in another state and is accredited or inspected by that state; or
 - performing work for another company with a unit located in the same site; or
 - performing pro bono work for a governmental agency or charitable organization.
- The laboratory is accredited under federal law.
- The data are needed for emergency-response activities, and a laboratory accredited under the Texas Laboratory Accreditation Program is not available.
- The laboratory supplies data for which the TCEQ does not offer accreditation.

The applicant should review *30 TAC Chapter 25* for specific requirements.

The following certification statement shall be signed and submitted with every application. See the *Signature Page* section in the Instructions, for a list of designated representatives who may sign the certification.

CERTIFICATION:


I certify that all laboratory tests submitted with this application meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification*.

Printed Name: Thomas Becker

Title: Director of Environmental

Signature: _____

Date: _____

Handwritten signature of Thomas Becker in blue ink, written over a horizontal dashed line. Below the signature, the date "8-29-2025" is handwritten in blue ink, also over a horizontal dashed line. A vertical blue line is drawn through the signature and date.

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 2.0: POLLUTANT ANALYSIS

Worksheet 2.0 is **required** for all applications submitted for a TPDES permit. Worksheet 2.0 is not required for applications for a permit to dispose of all wastewater by land disposal or for discharges solely of stormwater associated with industrial activities.

Item 1. General Testing Requirements (Instructions, Page 55)

- Provide the date range of all sampling events conducted to obtain the analytical data submitted with this application (e.g., 05/01/2018-05/30/2018): Provision to sample 60 days of initial discharge due to no discharge of Outfall 001 process wastewater except in extreme conditions.
- ☐ Check the box to confirm all samples were collected no more than 12 months prior to the date of application submittal.
- Read the general testing requirements in the instructions for important information about sampling, test methods, and MALs. If a contact laboratory was used, attach a list which includes the name, contact information, and pollutants analyzed for each laboratory/firm.
Attachment: Click to enter text.

Item 2. Specific Testing Requirements (Instructions, Page 56)

Attach correspondence from TCEQ approving submittal of less than the required number of samples, if applicable. **Attachment:** A11

TABLE 1 and TABLE 2 (Instructions, Page 58)

Completion of Tables 1 and 2 is required for all external outfalls for all TPDES permit applications.

Table 1 for Outfall No.: 001

Samples are (check one): ☐ Composite ☒ Grab

Pollutant	Sample 1 (mg/L)	Sample 2 (mg/L)	Sample 3 (mg/L)	Sample 4 (mg/L)
BOD (5-day)				
CBOD (5-day)				
Chemical oxygen demand				
Total organic carbon				
Dissolved oxygen				
Ammonia nitrogen				
Total suspended solids				
Nitrate nitrogen				
Total organic nitrogen				
Total phosphorus				
Oil and grease				

Pollutant	Sample 1 (mg/L)	Sample 2 (mg/L)	Sample 3 (mg/L)	Sample 4 (mg/L)
Total residual chlorine				
Total dissolved solids				
Sulfate				
Chloride				
Fluoride				
Total alkalinity (mg/L as CaCO3)				
Temperature (°F)				
pH (standard units)	6.5			

Table 2 for Outfall No.: **001**

Samples are (check one): ☐ Composite ☐ Grab

Pollutant	Sample 1 (µg/L)	Sample 2 (µg/L)	Sample 3 (µg/L)	Sample 4 (µg/L)	MAL (µg/L)
Aluminum, total					2.5
Antimony, total					5
Arsenic, total					0.5
Barium, total					3
Beryllium, total					0.5
Cadmium, total					1
Chromium, total					3
Chromium, hexavalent					3
Chromium, trivalent					N/A
Copper, total					2
Cyanide, available					2/10
Lead, total					0.5
Mercury, total					0.005/0.0005
Nickel, total					2
Selenium, total					5
Silver, total					0.5
Thallium, total					0.5
Zinc, total					5.0

TABLE 3 (Instructions, Page 58)

Completion of Table 3 is required for all **external outfalls** which discharge process wastewater.

Partial completion of Table 3 is required for all **external outfalls** which discharge non-process wastewater and stormwater associated with industrial activities commingled with other wastestreams (see instructions for additional guidance).

Table 3 for Outfall No.: **001**Samples are (check one): ☒ Composite ☐ Grab

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
Acrylonitrile					50
Anthracene					10
Benzene					10
Benidine					50
Benzo(a)anthracene					5
Benzo(a)pyrene					5
Bis(2-chloroethyl)ether					10
Bis(2-ethylhexyl)phthalate					10
Bromodichloromethane [Dichlorobromomethane]					10
Bromoform					10
Carbon tetrachloride					2
Chlorobenzene					10
Chlorodibromomethane [Dibromochloromethane]					10
Chloroform					10
Chrysene					5
m-Cresol [3-Methylphenol]					10
o-Cresol [2-Methylphenol]					10
p-Cresol [4-Methylphenol]					10
1,2-Dibromoethane					10
m-Dichlorobenzene [1,3-Dichlorobenzene]					10
o-Dichlorobenzene [1,2-Dichlorobenzene]					10
p-Dichlorobenzene [1,4-Dichlorobenzene]					10
3,3'-Dichlorobenzidine					5
1,2-Dichloroethane					10

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
1,1-Dichloroethene [1,1-Dichloroethylene]					10
Dichloromethane [Methylene chloride]					20
1,2-Dichloropropane					10
1,3-Dichloropropene [1,3-Dichloropropylene]					10
2,4-Dimethylphenol					10
Di-n-Butyl phthalate					10
Epichlorohydrin (1-Chloro-2,3-epoxypropane)					---
Ethylbenzene					10
Ethylene Glycol					---
Fluoride					500
Hexachlorobenzene					5
Hexachlorobutadiene					10
Hexachlorocyclopentadiene					10
Hexachloroethane					20
4,4'-Isopropylidenediphenol (bisphenol A)					1
Methyl ethyl ketone					50
Methyl tert-butyl ether (MTBE)					---
Nitrobenzene					10
N-Nitrosodiethylamine					20
N-Nitroso-di-n-butylamine					20
Nonylphenol					333
Pentachlorobenzene					20
Pentachlorophenol					5
Phenanthrene					10
Polychlorinated biphenyls (PCBs) (**)					0.2
Pyridine					20
1,2,4,5-Tetrachlorobenzene					20
1,1,2,2-Tetrachloroethane					10
Tetrachloroethene [Tetrachloroethylene]					10

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
Toluene					10
1,1,1-Trichloroethane					10
1,1,2-Trichloroethane					10
Trichloroethene [Trichloroethylene]					10
2,4,5-Trichlorophenol					50
TTHM (Total trihalomethanes)					10
Vinyl chloride					10

(*) Indicate units if different from µg/L.

(**) Total of detects for PCB-1242, PCB-1254, PCB-1221, PCB-1232, PCB-1248, PCB-1260, and PCB-1016. If all non-detects, enter the highest non-detect preceded by a "<".

TABLE 4 (Instructions, Pages 58-59)

Partial completion of Table 4 **is required** for each **external outfall** based on the conditions below.

a. Tributyltin

Is this facility an industrial/commercial facility which currently or proposes to directly dispose of wastewater from the types of operations listed below or a domestic facility which currently or proposes to receive wastewater from the types of industrial/commercial operations listed below?

☐ Yes ☒ No

If **yes**, check the box next to each of the following criteria which apply and provide the appropriate testing results in Table 4 below (check all that apply).

- ☐ Manufacturers and formulators of tributyltin or related compounds.
- ☐ Painting of ships, boats and marine structures.
- ☐ Ship and boat building and repairing.
- ☐ Ship and boat cleaning, salvage, wrecking and scaling.
- ☐ Operation and maintenance of marine cargo handling facilities and marinas.
- ☐ Facilities engaged in wood preserving.
- ☐ Any other industrial/commercial facility for which tributyltin is known to be present, or for which there is any reason to believe that tributyltin may be present in the effluent.

b. Enterococci (discharge to saltwater)

This facility discharges/proposes to discharge directly into saltwater receiving waters **and** Enterococci bacteria are expected to be present in the discharge based on facility processes.

☐ Yes ☒ No

Domestic wastewater is/will be discharged.

☐ Yes ☒ No

If **yes to either** question, provide the appropriate testing results in Table 4 below.

c. E. coli (discharge to freshwater)

This facility discharges/proposes to discharge directly into freshwater receiving waters **and** *E. coli* bacteria are expected to be present in the discharge based on facility processes.

☐ Yes ☒ No

Domestic wastewater is/will be discharged.

☐ Yes ☒ No

If **yes to either** question, provide the appropriate testing results in Table 4 below.

Table 4 for Outfall No.: N/A

Samples are (check one): ☐ Composite ☐ Grab

Pollutant	Sample 1	Sample 2	Sample 3	Sample 4	MAL
Tributyltin (µg/L)					0.010
Enterococci (cfu or MPN/100 mL)					N/A
<i>E. coli</i> (cfu or MPN/100 mL)					N/A

TABLE 5 (Instructions, Page 59)

Completion of Table 5 **is required** for all **external outfalls** which discharge process wastewater from a facility which manufactures or formulates pesticides or herbicides or other wastewaters which may contain pesticides or herbicides.

If this facility does not/will not manufacture or formulate pesticides or herbicides and does not/will not discharge other wastewaters that may contain pesticides or herbicides, check N/A.

☒ N/A

Table 5 for Outfall No.: [Click to enter text.](#)

Samples are (check one): ☐ Composite ☐ Grab

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
Aldrin					0.01
Carbaryl					5
Chlordane					0.2
Chlorpyrifos					0.05
4,4'-DDD					0.1
4,4'-DDE					0.1
4,4'-DDT					0.02
2,4-D					0.7
Danitol [Fenpropathrin]					—
Demeton					0.20
Diazinon					0.5/0.1

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
Dicofol [Kelthane]					1
Dieldrin					0.02
Diuron					0.090
Endosulfan I (<i>alpha</i>)					0.01
Endosulfan II (<i>beta</i>)					0.02
Endosulfan sulfate					0.1
Endrin					0.02
Guthion [Azinphos methyl]					0.1
Heptachlor					0.01
Heptachlor epoxide					0.01
Hexachlorocyclohexane (<i>alpha</i>)					0.05
Hexachlorocyclohexane (<i>beta</i>)					0.05
Hexachlorocyclohexane (<i>gamma</i>) [Lindane]					0.05
Hexachlorophene					10
Malathion					0.1
Methoxychlor					2.0
Mirex					0.02
Parathion (ethyl)					0.1
Toxaphene					0.3
2,4,5-TP [Silvex]					0.3

* Indicate units if different from µg/L.

TABLE 6 (Instructions, Page 59)

Completion of Table 6 is required for all external outfalls.

Table 6 for Outfall No.: **001**

Samples are (check one): ☒ Composite ☐ Grab

Pollutants	Believed Present	Believed Absent	Sample 1 (mg/L)	Sample 2 (mg/L)	Sample 3 (mg/L)	Sample 4 (mg/L)	MAL (µg/L)*
Bromide	<input type="checkbox"/>	<input checked="" type="checkbox"/>					400
Color (PCU)	<input type="checkbox"/>	<input checked="" type="checkbox"/>					—
Nitrate-Nitrite (as N)	<input type="checkbox"/>	<input checked="" type="checkbox"/>					—
Sulfide (as S)	<input type="checkbox"/>	<input checked="" type="checkbox"/>					—
Sulfite (as SO ₃)	<input type="checkbox"/>	<input checked="" type="checkbox"/>					—
Surfactants	<input type="checkbox"/>	<input checked="" type="checkbox"/>					—
Boron, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					20
Cobalt, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					0.3
Iron, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					7
Magnesium, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					20
Manganese, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					0.5
Molybdenum, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					1
Tin, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					5
Titanium, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					30

TABLE 7 (Instructions, Page 60)

Check the box next to any of the industrial categories applicable to this facility. If no categories are applicable, check N/A. If GC/MS testing is required, check the box provided to confirm the testing results for the appropriate parameters are provided with the application.

☒ N/A

Table 7 for Applicable Industrial Categories

Industrial Category	40 CFR Part	Volatiles Table 8	Acids Table 9	Bases/Neutrals Table 10	Pesticides Table 11
<input type="checkbox"/> Adhesives and Sealants		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Aluminum Forming	467	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Auto and Other Laundries		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Battery Manufacturing	461	<input type="checkbox"/> Yes	No	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Coal Mining	434	No	No	No	No
<input type="checkbox"/> Coil Coating	465	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Copper Forming	468	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Electric and Electronic Components	469	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Electroplating	413	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Explosives Manufacturing	457	No	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Foundries		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Gum and Wood Chemicals - Subparts A,B,C,E	454	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No	No
<input type="checkbox"/> Gum and Wood Chemicals - Subparts D,F	454	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Inorganic Chemicals Manufacturing	415	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Iron and Steel Manufacturing	420	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Leather Tanning and Finishing	425	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Mechanical Products Manufacturing		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Nonferrous Metals Manufacturing	421,471	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Oil and Gas Extraction - Subparts A, D, E, F, G, H	435	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Ore Mining - Subpart B	440	No	<input type="checkbox"/> Yes	No	No
<input type="checkbox"/> Organic Chemicals Manufacturing	414	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Paint and Ink Formulation	446,447	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Pesticides	455	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Petroleum Refining	419	<input type="checkbox"/> Yes	No	No	No
<input type="checkbox"/> Pharmaceutical Preparations	439	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Photographic Equipment and Supplies	459	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Plastic and Synthetic Materials Manufacturing	414	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Plastic Processing	463	<input type="checkbox"/> Yes	No	No	No
<input type="checkbox"/> Porcelain Enameling	466	No	No	No	No
<input type="checkbox"/> Printing and Publishing		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Pulp and Paperboard Mills - Subpart C	430	<input type="checkbox"/> *	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> Yes
<input type="checkbox"/> Pulp and Paperboard Mills - Subparts F, K	430	<input type="checkbox"/> *	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> *
<input type="checkbox"/> Pulp and Paperboard Mills - Subparts A, B, D, G, H	430	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> *
<input type="checkbox"/> Pulp and Paperboard Mills - Subparts I, J, L	430	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> Yes
<input type="checkbox"/> Pulp and Paperboard Mills - Subpart E	430	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> *
<input type="checkbox"/> Rubber Processing	428	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Soap and Detergent Manufacturing	417	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Steam Electric Power Plants	423	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No	No
<input type="checkbox"/> Textile Mills (Not Subpart C)	410	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Timber Products Processing	429	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes

* Test if believed present.

TABLES 8, 9, 10, and 11 (Instructions, Page 60)

Completion of Tables 8, 9, 10, and 11 **is required** as specified in Table 7 for all **external outfalls** that contain process wastewater.

Completion of Tables 8, 9, 10, and 11 **may be required** for types of industry not specified in Table 7 for specific parameters that are believed to be present in the wastewater.

Table 8 for Outfall No.: N/A

Samples are (check one): ☐ Composite ☐ Grab

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Acrolein					50
Acrylonitrile					50
Benzene					10
Bromoform					10
Carbon tetrachloride					2
Chlorobenzene					10
Chlorodibromomethane					10
Chloroethane					50
2-Chloroethylvinyl ether					10
Chloroform					10
Dichlorobromomethane [Bromodichloromethane]					10
1,1-Dichloroethane					10
1,2-Dichloroethane					10
1,1-Dichloroethylene [1,1-Dichloroethene]					10
1,2-Dichloropropane					10
1,3-Dichloropropylene [1,3-Dichloropropene]					10
Ethylbenzene					10
Methyl bromide [Bromomethane]					50
Methyl chloride [Chloromethane]					50
Methylene chloride [Dichloromethane]					20
1,1,2,2-Tetrachloroethane					10
Tetrachloroethylene [Tetrachloroethene]					10
Toluene					10
1,2-Trans-dichloroethylene [1,2-Trans-dichloroethene]					10

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
1,1,1-Trichloroethane					10
1,1,2-Trichloroethane					10
Trichloroethylene [Trichloroethene]					10
Vinyl chloride					10

* Indicate units if different from µg/L.

Table 9 for Outfall No.: N/A

Samples are (check one): ☐ Composite ☐ Grab

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
2-Chlorophenol					10
2,4-Dichlorophenol					10
2,4-Dimethylphenol					10
4,6-Dinitro-o-cresol					50
2,4-Dinitrophenol					50
2-Nitrophenol					20
4-Nitrophenol					50
p-Chloro-m-cresol					10
Pentachlorophenol					5
Phenol					10
2,4,6-Trichlorophenol					10

* Indicate units if different from µg/L.

Table 10 for Outfall No.: N/A

Samples are (check one): ☐ Composite ☐ Grab

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Acenaphthene					10
Acenaphthylene					10
Anthracene					10
Benzidine					50
Benzo(a)anthracene					5
Benzo(a)pyrene					5
3,4-Benzofluoranthene [Benzo(b)fluoranthene]					10
Benzo(ghi)perylene					20
Benzo(k)fluoranthene					5
Bis(2-chloroethoxy)methane					10

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Bis(2-chloroethyl)ether					10
Bis(2-chloroisopropyl)ether					10
Bis(2-ethylhexyl)phthalate					10
4-Bromophenyl phenyl ether					10
Butylbenzyl phthalate					10
2-Chloronaphthalene					10
4-Chlorophenyl phenyl ether					10
Chrysene					5
Dibenzo(a,h)anthracene					5
1,2-Dichlorobenzene [o-Dichlorobenzene]					10
1,3-Dichlorobenzene [m-Dichlorobenzene]					10
1,4-Dichlorobenzene [p-Dichlorobenzene]					10
3,3'-Dichlorobenzidine					5
Diethyl phthalate					10
Dimethyl phthalate					10
Di-n-butyl phthalate					10
2,4-Dinitrotoluene					10
2,6-Dinitrotoluene					10
Di-n-octyl phthalate					10
1,2-Diphenylhydrazine (as Azobenzene)					20
Fluoranthene					10
Fluorene					10
Hexachlorobenzene					5
Hexachlorobutadiene					10
Hexachlorocyclopentadiene					10
Hexachloroethane					20
Indeno(1,2,3-cd)pyrene					5
Isophorone					10
Naphthalene					10
Nitrobenzene					10
N-Nitrosodimethylamine					50

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
N-Nitrosodi-n-propylamine					20
N-Nitrosodiphenylamine					20
Phenanthrene					10
Pyrene					10
1,2,4-Trichlorobenzene					10

* Indicate units if different from µg/L.

Table 11 for Outfall No.: N/A

Samples are (check one): ☐ Composite ☒ Grab

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Aldrin					0.01
alpha-BHC [alpha-Hexachlorocyclohexane]					0.05
beta-BHC [beta-Hexachlorocyclohexane]					0.05
gamma-BHC [gamma-Hexachlorocyclohexane]					0.05
delta-BHC [delta-Hexachlorocyclohexane]					0.05
Chlordane					0.2
4,4'-DDT					0.02
4,4'-DDE					0.1
4,4'-DDD					0.1
Dieldrin					0.02
Endosulfan I (alpha)					0.01
Endosulfan II (beta)					0.02
Endosulfan sulfate					0.1
Endrin					0.02
Endrin aldehyde					0.1
Heptachlor					0.01
Heptachlor epoxide					0.01
PCB 1242					0.2
PCB 1254					0.2
PCB 1221					0.2
PCB 1232					0.2
PCB 1248					0.2

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
PCB 1260					0.2
PCB 1016					0.2
Toxaphene					0.3

* Indicate units if different from µg/L.

Attachment: [Click to enter text.](#)

TABLE 12 (DIOXINS/FURAN COMPOUNDS)

Complete of Table 12 **is required** for **external outfalls**, as directed below. (Instructions, Pages 59-60)

Indicate which compound(s) are manufactured or used at the facility and provide a brief description of the conditions of its/their presence at the facility (check all that apply).

- ☐ 2,4,5-trichlorophenoxy acetic acid (2,4,5-T) CASRN 93-76-5
- ☐ 2-(2,4,5-trichlorophenoxy) propanoic acid (Silvex, 2,4,5-TP) CASRN 93-72-1
- ☐ 2-(2,4,5-trichlorophenoxy) ethyl 2,2-dichloropropionate (Erbon) CASRN 136-25-4
- ☐ 0,0-dimethyl 0-(2,4,5-trichlorophenyl) phosphorothioate (Ronnell) CASRN 299-84-3
- ☐ 2,4,5-trichlorophenol (TCP) CASRN 95-95-4
- ☐ hexachlorophene (HCP) CASRN 70-30-4
- ☒ None of the above

Description: [Click to enter text.](#)

Does the applicant or anyone at the facility know or have any reason to believe that 2,3,7,8-tetrachlorodibenzo-p-dioxin (TCDD) or any congeners of TCDD may be present in the effluent proposed for discharge?

- ☐ Yes ☒ No

Description: [Click to enter text.](#)

If **yes** to either Items a **or** b, complete Table 12 as instructed.

Table 12 for Outfall No.: N/A

Samples are (check one): ☐ Composite ☐ Grab

Compound	Toxicity Equivalent Factors	Wastewater Concentration (ppq)	Wastewater Toxicity Equivalents (ppq)	Sludge Concentration (ppt)	Sludge Toxicity Equivalents (ppt)	MAL (ppq)
2,3,7,8-TCDD	1					10
1,2,3,7,8-PeCDD	1.0					50
2,3,7,8-HxCDDs	0.1					50
1,2,3,4,6,7,8-HpCDD	0.01					50

Compound	Toxicity Equivalent Factors	Wastewater Concentration (ppq)	Wastewater Toxicity Equivalents (ppq)	Sludge Concentration (ppt)	Sludge Toxicity Equivalents (ppt)	MAL (ppq)
2,3,7,8-TCDF	0.1					10
1,2,3,7,8-PeCDF	0.03					50
2,3,4,7,8-PeCDF	0.3					50
2,3,7,8-HxCDFs	0.1					50
2,3,4,7,8-HpCDFs	0.01					50
OCDD	0.0003					100
OCDF	0.0003					100
PCB 77	0.0001					500
PCB 81	0.0003					500
PCB 126	0.1					500
PCB 169	0.03					500
Total						

TABLE 13 (HAZARDOUS SUBSTANCES)

Complete Table 13 **is required** for all **external outfalls** as directed below. (Instructions, Pages 60-61)

Are there any pollutants listed in the instructions (pages 55-62) believed present in the discharge?

☐ Yes ☒ No

Are there pollutants listed in Item 1.c. of Technical Report 1.0 which are believed present in the discharge and have not been analytically quantified elsewhere in this application?

☐ Yes ☒ No

If **yes** to either Items a or b, complete Table 13 as instructed.

Table 13 for Outfall No.: N/A

Samples are (check one): ☐ Composite ☐ Grab

Pollutant	CASRN	Sample 1 (µg/L)	Sample 2 (µg/L)	Sample 3 (µg/L)	Sample 4 (µg/L)	Analytical Method

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 4.0: RECEIVING WATERS

This worksheet **is required** for all TPDES permit applications.

Item 1. Domestic Drinking Water Supply (Instructions, Page 80)

- a. There is a surface water intake for domestic drinking water supply located within 5 (five) miles downstream from the point/proposed point of discharge.

☐ Yes ☒ No

If **no**, stop here and proceed to Item 2. If **yes**, provide the following information:

1. The legal name of the owner of the drinking water supply intake: [Click to enter text.](#)
2. The distance and direction from the outfall to the drinking water supply intake: [Click to enter text.](#)

- b. Locate and identify the intake on the USGS 7.5-minute topographic map provided for Administrative Report 1.0.

☐ Check this box to confirm the above requested information is provided.

Item 2. Discharge Into Tidally Influenced Waters (Instructions, Page 80)

If the discharge is to tidally influenced waters, complete this section. Otherwise, proceed to Item 3.

- a. Width of the receiving water at the outfall: [Click to enter text.](#) feet

- b. Are there oyster reefs in the vicinity of the discharge?

☐ Yes ☐ No

If **yes**, provide the distance and direction from the outfall(s) to the oyster reefs: [Click to enter text.](#)

- c. Are there sea grasses within the vicinity of the point of discharge?

☐ Yes ☐ No

If **yes**, provide the distance and direction from the outfall(s) to the grasses: [Click to enter text.](#)

Item 3. Classified Segment (Instructions, Page 80)

The discharge is/will be directly into (or within 300 feet of) a classified segment.

☐ Yes ☒ No

If **yes**, stop here and do not complete Items 4 and 5 of this worksheet or Worksheet 4.1.

If **no**, complete Items 4 and 5 and Worksheet 4.1 may be required.

Item 4. Description of Immediate Receiving Waters (Instructions, Page 80)

- a. Name of the immediate receiving waters: unnamed ditch
- b. Check the appropriate description of the immediate receiving waters:
- ☐ Lake or Pond
 - Surface area (acres): Click to enter text.
 - Average depth of the entire water body (feet): Click to enter text.
 - Average depth of water body within a 500-foot radius of the discharge point (feet): Click to enter text.
 - ☒ Man-Made Channel or Ditch
 - ☐ Stream or Creek
 - ☐ Freshwater Swamp or Marsh
 - ☐ Tidal Stream, Bayou, or Marsh
 - ☐ Open Bay
 - ☐ Other, specify:

If **Man-Made Channel or Ditch** or **Stream or Creek** were selected above, provide responses to Items 4.c – 4.g below:

- c. For **existing discharges**, check the description below that best characterizes the area **upstream** of the discharge.

For **new discharges**, check the description below that best characterizes the area **downstream** of the discharge.

- ☒ Intermittent (dry for at least one week during most years)
- ☐ Intermittent with Perennial Pools (enduring pools containing habitat to maintain aquatic life uses)
- ☐ Perennial (normally flowing)

Check the source(s) of the information used to characterize the area upstream (existing discharge) or downstream (new discharge):

- ☐ USGS flow records
- ☒ personal observation
- ☐ historical observation by adjacent landowner(s)
- ☐ other, specify: Click to enter text.

- d. List the names of all perennial streams that join the receiving water within three miles downstream of the discharge point: Sandy Creek
- e. The receiving water characteristics change within three miles downstream of the discharge (e.g., natural or man-made dams, ponds, reservoirs, etc.).
- ☒ Yes ☐ No

If **yes**, describe how: The unnamed ditch flows into Sandy Creek, waterbody segment code #1604C, ~ 2 miles from discharge point.

- f. General observations of the water body during normal dry weather conditions: Unnamed ditch normally dry.

Date and time of observation: July 10, 2025

- g. The water body was influenced by stormwater runoff during observations.

☒ Yes ☐ No

If **yes**, describe how: Unnamed ditch held water from recent rains.

Item 5. General Characteristics of Water Body (Instructions, Page 81)

- a. Is the receiving water upstream of the existing discharge or proposed discharge site influenced by any of the following (check all that apply):

<input type="checkbox"/> oil field activities	<input type="checkbox"/> urban runoff
<input checked="" type="checkbox"/> agricultural runoff	<input type="checkbox"/> septic tanks
<input type="checkbox"/> upstream discharges	<input type="checkbox"/> other, specify: <u>Click to enter text.</u>

- b. Uses of water body observed or evidence of such uses (check all that apply):

<input type="checkbox"/> livestock watering	<input type="checkbox"/> industrial water supply
<input type="checkbox"/> non-contact recreation	<input type="checkbox"/> irrigation withdrawal
<input type="checkbox"/> domestic water supply	<input type="checkbox"/> navigation
<input type="checkbox"/> contact recreation	<input type="checkbox"/> picnic/park activities
<input checked="" type="checkbox"/> fishing	<input type="checkbox"/> other, specify: <u>Click to enter text.</u>

- c. Description which best describes the aesthetics of the receiving water and the surrounding area (check only one):

☐ **Wilderness:** outstanding natural beauty; usually wooded or un-pastured area: water clarity exceptional

☒ **Natural Area:** trees or native vegetation common; some development evident (from fields, pastures, dwellings); water clarity discolored

☐ **Common Setting:** not offensive, developed but uncluttered; water may be colored or turbid

☐ **Offensive:** stream does not enhance aesthetics; cluttered; highly developed; dumping areas; water discolored

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 7.0: STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITIES

This worksheet **is required** for all TPDES permit applications requesting individual permit coverage for discharges consisting of **either**: 1) solely of stormwater discharges associated with industrial activities, as defined in *40 CFR § 122.26(b)(14)(i-xi)*, **or** 2) stormwater discharges associated with industrial activities and any of the listed allowable non-stormwater discharges, as defined in the MSGP (TXR05000), Part II, Section A, Item 6.

Discharges of stormwater as defined in *40 CFR § 122.26 (b)(13)* are not required to obtain authorization under a TPDES permit (see exceptions at *40 CFR §§ 122.26(a)(1)* and *(9)*). Authorization for discharge may be required from a local municipal separate storm sewer system.

Item 1. Applicability (Instructions, Page 89)

Do discharges from any of the existing/proposed outfalls consist either 1) solely of stormwater discharges associated with industrial activities **or** 2) stormwater discharges associated with industrial activities and any of the allowable non-stormwater discharges?

☒ Yes ☐ No

If **no**, stop here. If **yes**, proceed as directed.

Item 2. Stormwater Coverage (Instructions, Page 89)

List each existing/proposed stormwater outfall at the facility and indicate which type of authorization covers or is proposed to cover discharges.

Authorization Coverage

Outfall	Authorization under MSGP	Authorized Under Individual Permit
001a/b	<input type="checkbox"/>	<input checked="" type="checkbox"/>
002	<input type="checkbox"/>	<input checked="" type="checkbox"/>
003	<input type="checkbox"/>	<input checked="" type="checkbox"/>
004 (new)	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

If **all** existing/proposed outfalls which discharge stormwater associated with industrial activities (and any of the allowable non-stormwater discharges) are **authorized under the MSGP**, **stop** here.

If **seeking authorization** for any outfalls which discharge stormwater associated with industrial activities (and any of the allowable non-stormwater discharges) **under an individual permit**, **proceed**.

NOTE: The following information is required for each existing/proposed stormwater outfall for which the facility is seeking individual permit authorization under this application

Item 3. Site Map (Instructions, Page 90)

Attach a site map or maps (drawn to scale) of the entire facility with the following information.

- the location of each stormwater outfall to be covered by the permit
- an outline of the drainage area that is within the facility's boundary and that contributes stormwater to each outfall to be covered by the permit
- connections or discharge points to municipal separate storm sewer systems
- locations of all structures (e.g. buildings, garages, storage tanks)
- structural control devices that are designed to reduce pollution in discharges of stormwater associated with industrial activities
- process wastewater treatment units (including ponds)
- bag house and other air treatment units exposed to stormwater (stormwater runoff, snow melt runoff, and surface runoff and drainage)
- landfills; scrapyards; surface water bodies (including wetlands)
- vehicle and equipment maintenance areas
- physical features of the site that may influence discharges of stormwater associated with industrial activities or contribute a dry weather flow
- locations where spills or leaks of reportable quality (as defined in 30 TAC § 327.4) have occurred during the three years before this application was submitted to obtain coverage under an individual permit
- processing areas, storage areas, material loading/unloading areas, and other locations where significant materials are exposed to stormwater (stormwater runoff, snow melt runoff, and surface runoff and drainage)

☒ Check the box to confirm all above information was provided on the facility site map(s).

Attachment: F2

Item 4. Facility/Site Information (Instructions, Page 90)

- a. Provide the area of impervious surface and the total area drained by each stormwater outfall requested for authorization by this permit application.

Impervious Surfaces

Outfall	Area of Impervious Surface (include units)	Total Area Drained (include units)
001a	N/A	63.7 acres (Pond and Stormwater)
001b	N/A	8.3 acres (Stormwater Only)
002	N/A	15 acres
003	N/A	3.2 acres
004 (new)	N/A	8 acres

- b. Provide the following local area rainfall information and the source of the information.

Wettest month: September

Average rainfall for wettest month (total inches): 4.61

25-year, 24-hour rainfall (inches): 10.1

Source: NOAA Atlas 14

- c. Attach an inventory, or list, of materials currently handled at the facility that may be exposed to precipitation. **Attachment:** Spent amine, glycol, and natural gas filters.
- d. Attach narrative descriptions of the industrial processes and activities involving the materials in the above-listed inventory that occur outdoors or in some manner that may result in exposure of the materials to precipitation or runoff (see instructions for guidance). **Attachment:** The filter and drum storage area has spent amine, glycol, and natural gas filters stored in uncovered bins along with empty steel drums that are recycled.
- e. Describe any BMPs and controls the facility uses/proposes to prevent or effectively reduce pollution in stormwater discharges from the facility: The storage area is within secondary containment which gets vacuumed out as needed. If containment area failed, then stormwater would go to the pond.

Item 5. Pollutant Analysis (Instructions, Page 91)

- a. Provide the date range of all sampling events conducted to obtain the analytical data submitted with this application (e.g., 05/01/2018-05/30/2018): No samples were taken due to no rain as of the date of permit submittal.
- b. ☐ Check the box to confirm all samples were collected no more than 12 months prior to the date of application submittal.
- c. Complete Table 17 as directed on page 92 of the Instructions.

Table 17 for Outfall No.: 001

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled	MAL (mg/L)
pH (standard units)	6.5	—	(min)	—		—
Total suspended solids	99.3					—
Chemical oxygen demand	15					—
Total organic carbon	4.07					—
Oil and grease	<1.65					—
Arsenic, total	0.00108					0.0005
Barium, total	0.022					0.003
Cadmium, total	0.00016					0.001
Chromium, total	0.00199					0.003
Chromium, trivalent	<0.0005					—

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled	MAL (mg/L)
Chromium, hexavalent	0.00199					0.003
Copper, total	0.00389					0.002
Lead, total	0.00121					0.0005
Mercury, total	2.39					0.000005
Nickel, total	0.0703					0.002
Selenium, total	0.0007					0.005
Silver, total	<.00013					0.0005
Zinc, total	0.0407					0.005

* Taken during first 30 minutes of storm event

** Flow-weighted composite sample

d. Complete Table 18 as directed on pages 92-94 of the Instructions.

Table 18 for Outfall No.: 001

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled
Benzene	<0.00035				

* Taken during first 30 minutes of storm event

** Flow-weighted composite sample

Attachment: A13 for Outfalls 002 & 003

Item 6. Storm Event Data (Instructions, Page 93)

Provide the following data for the storm event(s) which resulted in the maximum values for the analytical data submitted:

Date of storm event: 8/19/2025

Duration of storm event (minutes): 360

Total rainfall during storm event (inches): 2.60

Number of hours the between beginning of the storm measured and the end of the previous measurable storm event (hours): 1460

Maximum flow rate during rain event (gallons/minute): N/A

Total stormwater flow from rain event (gallons): 0.3177 MGD

Provide a description of the method of flow measurement or estimate: See A9 flow worksheet for estimate of flow.

Attachment 1



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

Summary of Application (in plain language) Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

Applicants should use this template to develop a plain language summary of your facility and application as required by Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H. You may modify the template as necessary to accurately describe your facility as long as the summary includes the following information: (1) the function of the proposed plant or facility; (2) the expected output of the proposed plant or facility; (3) the expected pollutants that may be emitted or discharged by the proposed plant or facility; and (4) how you will control those pollutants, so that the proposed plant will not have an adverse impact on human health or the environment.

Fill in the highlighted areas below to describe your facility and application in plain language. Instructions and examples are provided below. Make any other edits necessary to improve readability or grammar and to comply with the rule requirements. After filling in the information for your facility delete these instructions.

If you are subject to the alternative language notice requirements in 30 TAC Section 39.426, **you must provide a translated copy of the completed plain language summary in the appropriate alternative language as part of your application package.** For your convenience, a Spanish template has been provided below.

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS INDUSTRIAL WASTEWATER/STORMWATER

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and is not a federal enforceable representation of the permit application.

Energy Transfer (CN 606187110) operates Jackson Gas Plant (RN 106225436), a natural gas processing facility. The facility is located at 676 CR 260, in Ganado, Jackson County, Texas 77962. Requesting to renew their TPDES permit with a major amendment to add a stormwater outfall to help prevent standing water on the property.

Discharges from the facility are expected to contain Reject Osmosis Wastewater that is comingled with stormwater. There is no treatment that occurs. **16. Choose from the drop-down menu** treated by not applicable.

PLANTILLA EN ESPAÑOL PARA SOLICITUDES NUEVAS/RENOVACIONES/ENMIENDAS DE TPDES o TLAP

AGUAS RESIDUALES INDUSTRIALES /AGUAS PLUVIALES

El siguiente resumen se proporciona para esta solicitud de permiso de calidad del agua pendiente que está siendo revisada por la Comisión de Calidad Ambiental de Texas según lo requerido por el Capítulo 39 del Código Administrativo de Texas 30. La información proporcionada en este resumen puede cambiar durante la revisión técnica de la solicitud y no es una representación ejecutiva fedérale de la solicitud de permiso.

Energy Transfer (CN 606187110) opera la Planta de Gas Jackson RN 106225436, una facilidad de procesamiento de gas natural. La instalación está ubicada en 676 CR 260, en Ganado, Condado de Jackson, Texas 77962. La compañía solicita renovar su permiso TPDES con una enmienda mayor para agregar un desagüe pluvial que ayude a prevenir el agua estancada en la propiedad.

Se espera que las descargas de la instalación contengan **aguas rechazadas de ósmosis mezcladas con aguas pluviales**. No se realiza ningún tratamiento. 16. Elija del menú desplegable tratado por 17. Introduzca una descripción del tratamiento de aguas residuales utilizado en la instalación aquí.

Attachment 2



Texas Commission on Environmental Quality

Public Involvement Plan Form for Permit and Registration Applications

The Public Involvement Plan is intended to provide applicants and the agency with information about how public outreach will be accomplished for certain types of applications in certain geographical areas of the state. It is intended to apply to new activities; major changes at existing plants, facilities, and processes; and to activities which are likely to have significant interest from the public. This preliminary screening is designed to identify applications that will benefit from an initial assessment of the need for enhanced public outreach.

All applicable sections of this form should be completed and submitted with the permit or registration application. For instructions on how to complete this form, see TCEQ-20960-inst.

Section 1. Preliminary Screening

New Permit or Registration Application

New Activity - modification, registration, amendment, facility, etc. (see instructions)

If neither of the above boxes are checked, completion of the form is not required and does not need to be submitted.

Section 2. Secondary Screening

Requires public notice,

Considered to have significant public interest, and

Located within any of the following geographical locations:

- Austin
- Dallas
- Fort Worth
- Houston
- San Antonio
- West Texas
- Texas Panhandle
- Along the Texas/Mexico Border
- Other geographical locations should be decided on a case-by-case basis

**If all the above boxes are not checked, a Public Involvement Plan is not necessary.
Stop after Section 2 and submit the form.**

Public Involvement Plan not applicable to this application. Provide **brief** explanation.

Section 3. Application Information

Type of Application (check all that apply):

Air Initial Federal Amendment Standard Permit Title V
Waste Municipal Solid Waste Industrial and Hazardous Waste Scrap Tire
Radioactive Material Licensing Underground Injection Control

Water Quality

Texas Pollutant Discharge Elimination System (TPDES)
Texas Land Application Permit (TLAP)
State Only Concentrated Animal Feeding Operation (CAFO)
Water Treatment Plant Residuals Disposal Permit
Class B Biosolids Land Application Permit
Domestic Septage Land Application Registration

Water Rights New Permit

New Appropriation of Water
New or existing reservoir

Amendment to an Existing Water Right

Add a New Appropriation of Water
Add a New or Existing Reservoir
Major Amendment that could affect other water rights or the environment

Section 4. Plain Language Summary

Provide a brief description of planned activities.

Section 5. Community and Demographic Information

Community information can be found using EPA's EJ Screen, U.S. Census Bureau information, or generally available demographic tools.

Information gathered in this section can assist with the determination of whether alternative language notice is necessary. Please provide the following information.

(City)

(County)

(Census Tract)

Please indicate which of these three is the level used for gathering the following information.

City

County

Census Tract

- (a) Percent of people over 25 years of age who at least graduated from high school
- (b) Per capita income for population near the specified location
- (c) Percent of minority population and percent of population by race within the specified location
- (d) Percent of Linguistically Isolated Households by language within the specified location
- (e) Languages commonly spoken in area by percentage
- (f) Community and/or Stakeholder Groups
- (g) Historic public interest or involvement

Section 6. Planned Public Outreach Activities

(a) Is this application subject to the public participation requirements of Title 30 Texas Administrative Code (30 TAC) Chapter 39?

Yes No

(b) If yes, do you intend at this time to provide public outreach other than what is required by rule?

Yes No

If Yes, please describe.

If you answered "yes" that this application is subject to 30 TAC Chapter 39, answering the remaining questions in Section 6 is not required.

(c) Will you provide notice of this application in alternative languages?

Yes No

Please refer to Section 5. If more than 5% of the population potentially affected by your application is Limited English Proficient, then you are required to provide notice in the alternative language.

If yes, how will you provide notice in alternative languages?

Publish in alternative language newspaper

Posted on Commissioner's Integrated Database Website

Mailed by TCEQ's Office of the Chief Clerk

Other (specify)

(d) Is there an opportunity for some type of public meeting, including after notice?

Yes No

(e) If a public meeting is held, will a translator be provided if requested?

Yes No

(f) Hard copies of the application will be available at the following (check all that apply):

TCEQ Regional Office

TCEQ Central Office

Public Place (specify)

Section 7. Voluntary Submittal

For applicants voluntarily providing this Public Involvement Plan, who are not subject to formal public participation requirements.

Will you provide notice of this application, including notice in alternative languages?

Yes No

What types of notice will be provided?

Publish in alternative language newspaper

Posted on Commissioner's Integrated Database Website

Mailed by TCEQ's Office of the Chief Clerk

Other (specify)

Attachment 3

**JACKSON COUNTY, COUNTY WIDE DRAINAGE DISTRICT
2066 STATE HIGHWAY 111 SOUTH
EDNA, TEXAS 77957
PHONE 361-782-5401**

April 15, 2013

Thomas Becker
Energy Transfer Company Texas Processing Inc.
800 E. Sonterra Blvd., Suite 400
San Antonio, TX 78258

Thomas Becker,

Jackson County, County Wide Drainage District Board of Directors have no problem with discharging storm water and waste water into Devers, III-A-3-a. The Board of Directors agreed as long as EPA, Railroad Commission of Texas and Lavaca-Navidad River Authority has no objections to discharging water into Devers Ditch which drains into Lake Texana.

If you have any more questions, please contact Donnie Slatter, Manager at (361)782-5401.

Sincerely,

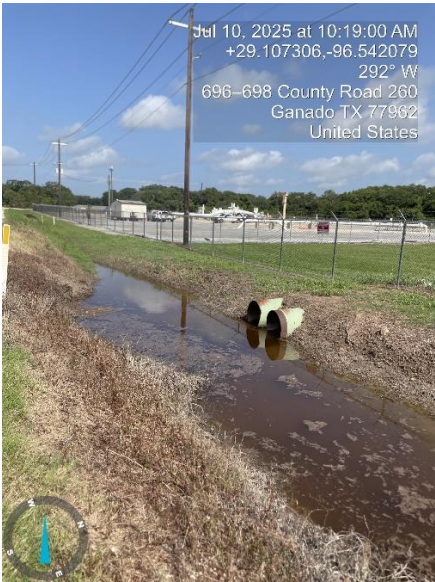
A handwritten signature in cursive script that reads "Donnie Slatter". The signature is written in dark ink and is positioned above the printed name and title.

Donnie Slatter
Manager

Attachment 4

ET Jackson Gas Plant Outfall Photo Log

Outfall 001



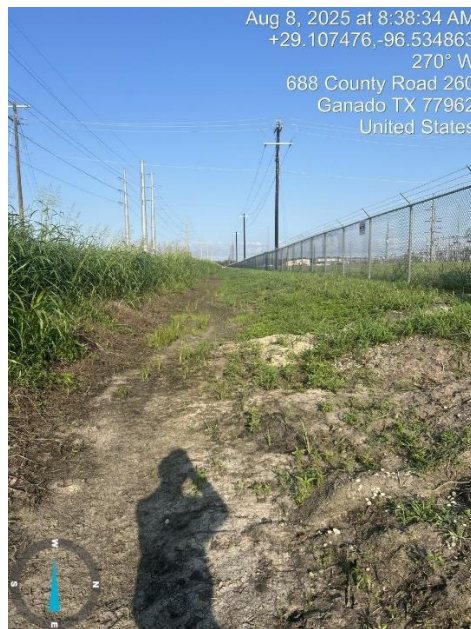
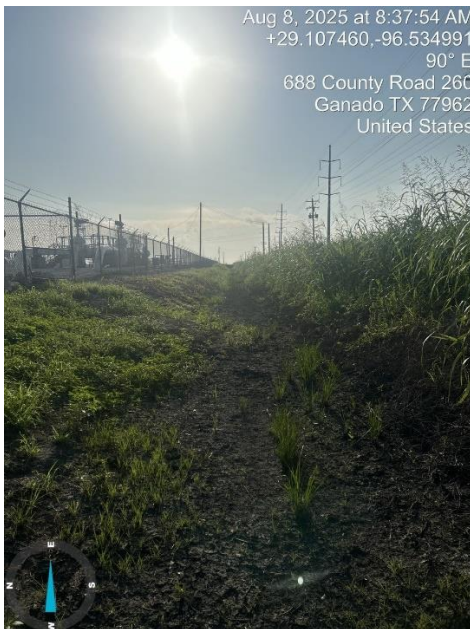
Outfall 002



Outfall 003



Outfall 004 (New)



Attachment 5

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: ____Renewal ____Major Amendment ____Minor Amendment ____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

____ Texas Historical Commission

____ U.S. Fish and Wildlife

____ Texas Parks and Wildlife Department

____ U.S. Army Corps of Engineers

This form applies to TPDES permit applications only. (Instructions, Page 53)

Complete this form as a separate document. TCEQ will mail a copy to each agency as required by our agreement with EPA. If any of the items are not completely addressed or further information is needed, we will contact you to provide the information before issuing the permit. Address each item completely.

Do not refer to your response to any item in the permit application form. Provide each attachment for this form separately from the Administrative Report of the application. The application will not be declared administratively complete without this SPIF form being completed in its entirety including all attachments. Questions or comments concerning this form may be directed to the Water Quality Division's Application Review and Processing Team by email at WQ-ARPTeam@tceq.texas.gov or by phone at (512) 239-4671.

The following applies to all applications:

1. Permittee: Jackson Gas Plant

Permit No. WQ00 0005366000

EPA ID No. TX 133998

Address of the project (or a location description that includes street/highway, city/vicinity, and county):

676 CR 260 Ganado, Texas 77962

Provide the name, address, phone and fax number of an individual that can be contacted to answer specific questions about the property.

Prefix (Mr., Ms., Miss): Mr

First and Last Name: Landon Bippert

Credential (P.E, P.G., Ph.D., etc.):

Title: Sr Specialist- Environmental

Mailing Address: 676 CR 260

City, State, Zip Code: Ganado, Texas 77962

Phone No.: 361-554-1558 Ext.:

Fax No.:

E-mail Address: Landon.Bippert@energytransfer.com

2. List the county in which the facility is located: Jackson
3. If the property is publicly owned and the owner is different than the permittee/applicant, please list the owner of the property.

N/A

4. Provide a description of the effluent discharge route. The discharge route must follow the flow of effluent from the point of discharge to the nearest major watercourse (from the point of discharge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify the classified segment number.

Outfall 001, 002, 003, 004(new) which discharges into an unnamed ditch located along County Road 260, to unnamed tributary, to Sandy Creek, in Waterbody Segment Code No. 1604C, Lake Texana of the Lavaca Basin.

5. Please provide a separate 7.5-minute USGS quadrangle map with the project boundaries plotted and a general location map showing the project area. Please highlight the discharge route from the point of discharge for a distance of one mile downstream. (This map is required in addition to the map in the administrative report).

Provide original photographs of any structures 50 years or older on the property.

Does your project involve any of the following? Check all that apply.

- ☐ Proposed access roads, utility lines, construction easements
- ☐ Visual effects that could damage or detract from a historic property's integrity
- ☐ Vibration effects during construction or as a result of project design
- ☐ Additional phases of development that are planned for the future

☐ Sealing caves, fractures, sinkholes, other karst features

☐ Disturbance of vegetation or wetlands

1. List proposed construction impact (surface acres to be impacted, depth of excavation, sealing of caves, or other karst features):

Install a new outfall to help drain standing water on the property which will include regrading and installing a pipe that will discharge to the ditch along County Road 260.

2. Describe existing disturbances, vegetation, and land use:

The location is currently an existing gas plant.

THE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR AMENDMENTS TO TPDES PERMITS

3. List construction dates of all buildings and structures on the property:

The gas plant was built in February 2012.

4. Provide a brief history of the property, and name of the architect/builder, if known.

The Jackson Plant is a natural gas processing facility. Prior to the construction of the plant, it was used for agriculture.

Attachment 6

Your transaction is complete. Thank you for using TCEQ ePay.

Note: It may take up to 3 working days for this electronic payment to be processed and be reflected in the TCEQ ePay system. Print this receipt and the vouchers for your records. An email receipt has also been sent.

Transaction Information

Trace Number: 582EA000683119

Date: 08/29/2025 10:46 AM

Payment Method: CC - Authorization 0000082112

ePay Actor: THOMAS BECKER

Actor Email: thomas.becker@energytransfer.com

IP: 155.190.8.6

TCEQ Amount: \$1,250.00

Texas.gov Fee: \$28.38

Texas.gov Price: \$1,278.38*

* This service is provided by Texas.gov, the official website of Texas. The price of this service includes funds that support the ongoing operations and enhancements of Texas.gov, which is provided by a third party in partnership with the State.

Payment Contact Information

Name: THOMAS BECKER

Company: ENERGY TRANSFER

Address: 1300 MAIN STREET, HOUSTON, TX 77002

Phone: 713-989-7475

Cart Items

Click on the voucher number to see the voucher details.

Voucher	Fee Description	AR Number	Amount
781460	WW PERMIT - MINOR FACILITY SUBJECT TO 40 CFR 400-471 - MAJOR AMENDMENT		\$1,200.00
781461	30 TAC 305.53B WQ NOTIFICATION FEE		\$50.00
TCEQ Amount:			\$1,250.00

[ePay Again](#)

[Exit ePay](#)

Note: It may take up to 3 working days for this electronic payment to be processed and be reflected in the TCEQ ePay system. Print this receipt for your records.

Print this voucher for your records. If you are sending the TCEQ hardcopy documents related to this payment, include a copy of this voucher.

Transaction Information

Voucher Number:

781460

Trace Number:

582EA000683119

Date:

08/29/2025 10:46 AM

Payment Method:

CC - Authorization 0000082112

Voucher Amount:

\$1,200.00

Fee Type:

WW PERMIT - MINOR FACILITY SUBJECT TO 40 CFR 400-471 - MAJOR AMENDMENT

ePay Actor:

THOMAS BECKER

Actor Email:

thomas.becker@energytransfer.com

IP:

155.190.8.6

Payment Contact Information

Name:

THOMAS BECKER

Company:

ENERGY TRANSFER

Address:

1300 MAIN STREET, HOUSTON, TX 77002

Phone:

713-989-7475

Site Information

RN:

RN106225436

Site Name:

JACKSON COUNTY GAS PLANT

Site Address:

676 CR 260, GANADO, TX 77962

Site Location:

29.10993 -96.53727

Customer Information

CN:

CN606187110

Customer Name:

ET GATHERING & PROCESSING LLC

Customer Address:

1300 MAIN STREET, HOUSTON, TX 77002

Other Information

Program Area ID:

133998

Close

Print this voucher for your records. If you are sending the TCEQ hardcopy documents related to this payment, include a copy of this voucher.

Transaction Information

Voucher Number: 781461

Trace Number: 582EA000683119

Date: 08/29/2025 10:46 AM

Payment Method: CC - Authorization 0000082112

Voucher Amount: \$50.00

Fee Type: 30 TAC 305.53B WQ NOTIFICATION FEE

ePay Actor: THOMAS BECKER

Actor Email: thomas.becker@energytransfer.com

IP: 155.190.8.6

Payment Contact Information

Name: THOMAS BECKER

Company: ENERGY TRANSFER

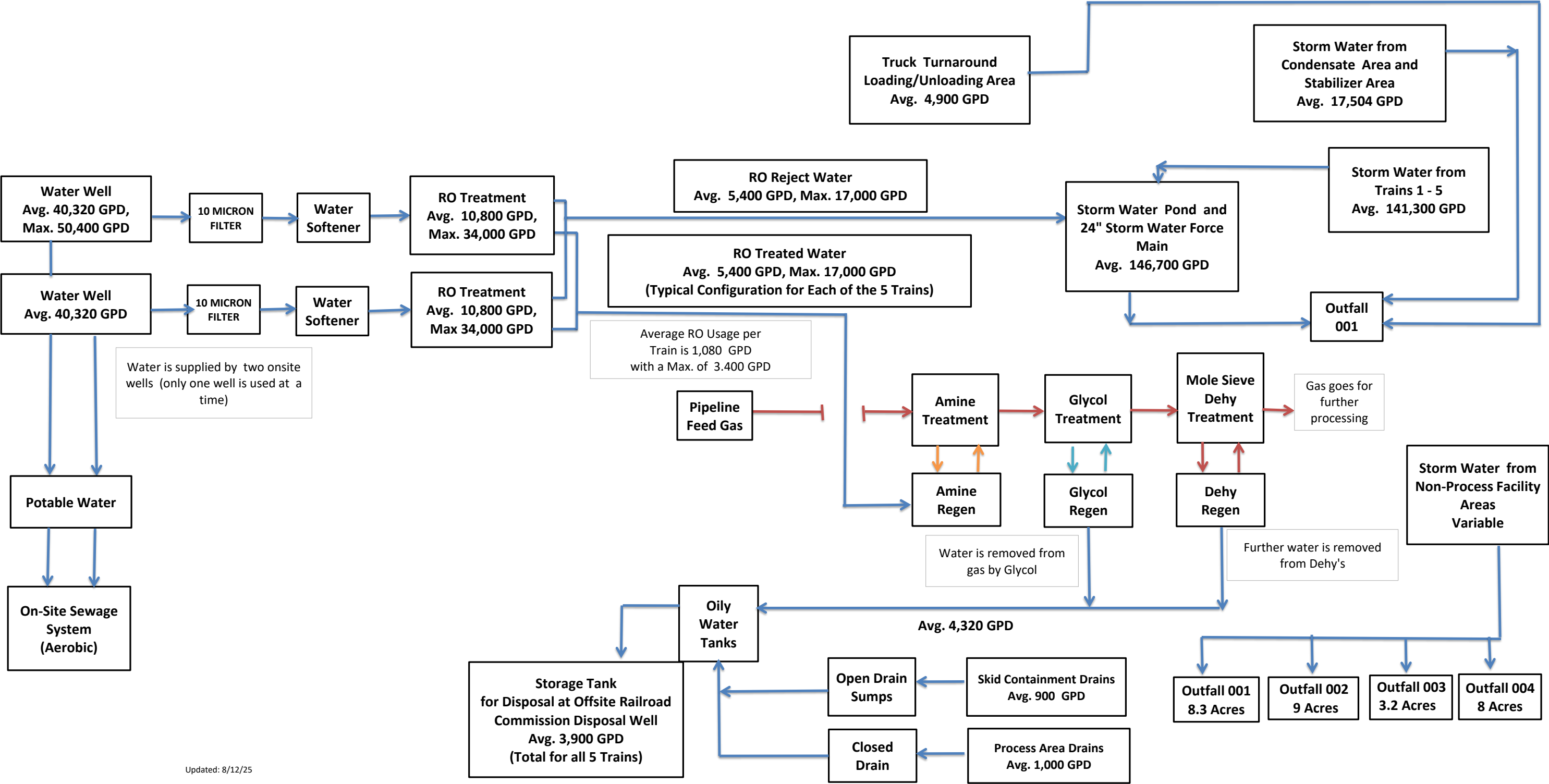
Address: 1300 MAIN STREET, HOUSTON, TX 77002

Phone: 713-989-7475

Close

Attachment 7

Jackson County Gas Plant, Ganado, TX
Process Flow Diagram



Updated: 8/12/25

Attachment 8

Attachment 9

Jackson Gas Plant

Quarter/Year:

				RO & Process Stormwater	Stormwater Run-off			
Date	Rainfall (inches)	Pump run time (hours)	Outfall 001 Pumping (gallons)	Outfall 001 Discharge (MGD)	Outfall 001 Discharge (MGD)	Outfall 002 Discharge (MGD)	Outfall 003 Discharge (MGD)	Outfall 004 Discharge (MGD)
			0	0.000000	0.000000	0.000000	0.000000	0.000000
			0	0.000000	0.000000	0.000000	0.000000	0.000000
			0	0.000000	0.000000	0.000000	0.000000	0.000000
			0	0.000000	0.000000	0.000000	0.000000	0.000000
			0	0.000000				0.000000
			0	0.000000				0.000000
			0	0.000000				0.000000
			0	0.000000	0.000000	0.000000	0.000000	0.000000
			0	0.000000	0.000000	0.000000	0.000000	0.000000
			0	0.000000	0.000000	0.000000	0.000000	0.000000
			0	0.000000	0.000000	0.000000	0.000000	0.000000
			0	0.000000	0.000000	0.000000	0.000000	0.000000
			0	0.000000	0.000000	0.000000	0.000000	0.000000
			0	0.000000	0.000000	0.000000	0.000000	0.000000
			0	0.000000	0.000000	0.000000	0.000000	0.000000
Average:				0.0000	0.0000	0.0000	0.0000	0.0000

Outfall	Acres	Runoff Coefficient	Pumping Rate (GPM)
001 (all)	19.5	0.54	4500
001 SW	9	0.5	NA
002 SW	15	0.5	NA
003 SW	3.2	0.5	NA
004 SW	8	0.5	NA

ND = No Discharge

Acres x 43,560 = Total ft²

Total ft² x (Rainfall Inches / 12) = Total ft³ Water

Total ft³ Water x 7.48 = Total Gallons

Total Gallons x Runoff Coefficient = Discharge Gallons

Discharge Gallons / 1,000,000 = MGD

Outfall 001 pumping gallons added to Discharge Gallons

Outfall 001 drainage area 97.77 acres, 78.27 going to retention pond

Notes

When rainfall volumes are inputted into the discharge calculation a discharge volume is produced for each outfall. However, not all actual flow conditions at each outfall were adequate for collection. (See Rainwater Discharge Log).

Attachment 10



TCEQ Core Data Form

For detailed instructions on completing this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided.)		
<input type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application.)		
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)	<input type="checkbox"/> Other	
2. Customer Reference Number (if issued)	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number (if issued)
CN		RN

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)	
<input type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership <input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)			
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>			
6. Customer Legal Name (If an individual, print last name first: eg: Doe, John)		<i>If new Customer, enter previous Customer below:</i>	
7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number (if applicable)
11. Type of Customer:	<input type="checkbox"/> Corporation	<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other	<input type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Other:
12. Number of Employees		13. Independently Owned and Operated?	
<input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher		<input type="checkbox"/> Yes <input type="checkbox"/> No	
14. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check one of the following			
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator <input type="checkbox"/> Other: <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant			
15. Mailing Address:			
	City	State	ZIP
			ZIP + 4
16. Country Mailing Information (if outside USA)		17. E-Mail Address (if applicable)	

18. Telephone Number	19. Extension or Code	20. Fax Number (if applicable)
() -		() -

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If 'New Regulated Entity' is selected, a new permit application is also required.)								
<input type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information								
<i>The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).</i>								
22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)								
23. Street Address of the Regulated Entity: (No PO Boxes)								
	City		State		ZIP		ZIP + 4	
24. County								

If no Street Address is provided, fields 25-28 are required.

25. Description to Physical Location:										
26. Nearest City					State				Nearest ZIP Code	
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>										
27. Latitude (N) In Decimal:						28. Longitude (W) In Decimal:				
Degrees	Minutes		Seconds		Degrees	Minutes		Seconds		
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)		31. Primary NAICS Code (5 or 6 digits)			32. Secondary NAICS Code (5 or 6 digits)				
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)										
34. Mailing Address:										
	City		State		ZIP		ZIP + 4			
35. E-Mail Address:										
36. Telephone Number	37. Extension or Code				38. Fax Number (if applicable)					
() -					() -					

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance.

<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input type="checkbox"/> PWS
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:

SECTION IV: Preparer Information

40. Name:		41. Title:	
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
() -		() -	

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

Company:		Job Title:	
Name (In Print):		Phone:	() -
Signature:		Date:	

Attachment 11



RE: WQ0005366000 ET Jackson Gas Plant Pre-App Meeting

From Cole Gray <Cole.Gray@tceq.texas.gov>

Date Tue 8/12/2025 11:19 AM

To Shilinga, Cindy <Cindy.Shilinga@wsp.com>

Cc Bippert, Landon <Landon.Bippert@energyTransfer.com>; Boultinghouse, Stacy <Stacy.Boultinghouse@energytransfer.com>; Peter Schaefer <peter.schaefer@tceq.texas.gov>

Hello, Cindy,

I believe the permit will have a provision that requires the permittee to conduct analytical testing within 60 days of an initial discharge. This is standard procedure for permittees who do not have analytical sampling data readily available when applying for a permit. Additionally, after the initial discharge, if discharges are extremely infrequent at a given outfall, then we typically set sampling/monitoring requirements for when discharges occur only. This is likely how the permit will need to be set up unless the information provided in the application indicates anything to the contrary.

Please let me know if you have any other questions.

Thank you,
Cole Gray, DrPH, MPH
Environmental Permit Specialist
Industrial Wastewater Permitting – MC 148
Texas Commission on Environmental Quality
P.O. Box 13087
Austin, Texas 78711-3087
Work #: (512) 239 – 4736

How is our customer service? Fill out our online customer satisfaction survey at www.tceq.texas.gov/customersurvey



From: Shilinga, Cindy <Cindy.Shilinga@wsp.com>

Sent: Tuesday, August 12, 2025 9:13 AM

To: Cole Gray <Cole.Gray@tceq.texas.gov>; Peter Schaefer <peter.schaefer@tceq.texas.gov>

Cc: Bippert, Landon <Landon.Bippert@energyTransfer.com>; Boultinghouse, Stacy <Stacy.Boultinghouse@energytransfer.com>; Shilinga, Cindy <Cindy.Shilinga@wsp.com>

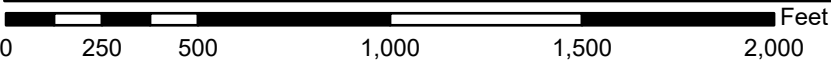
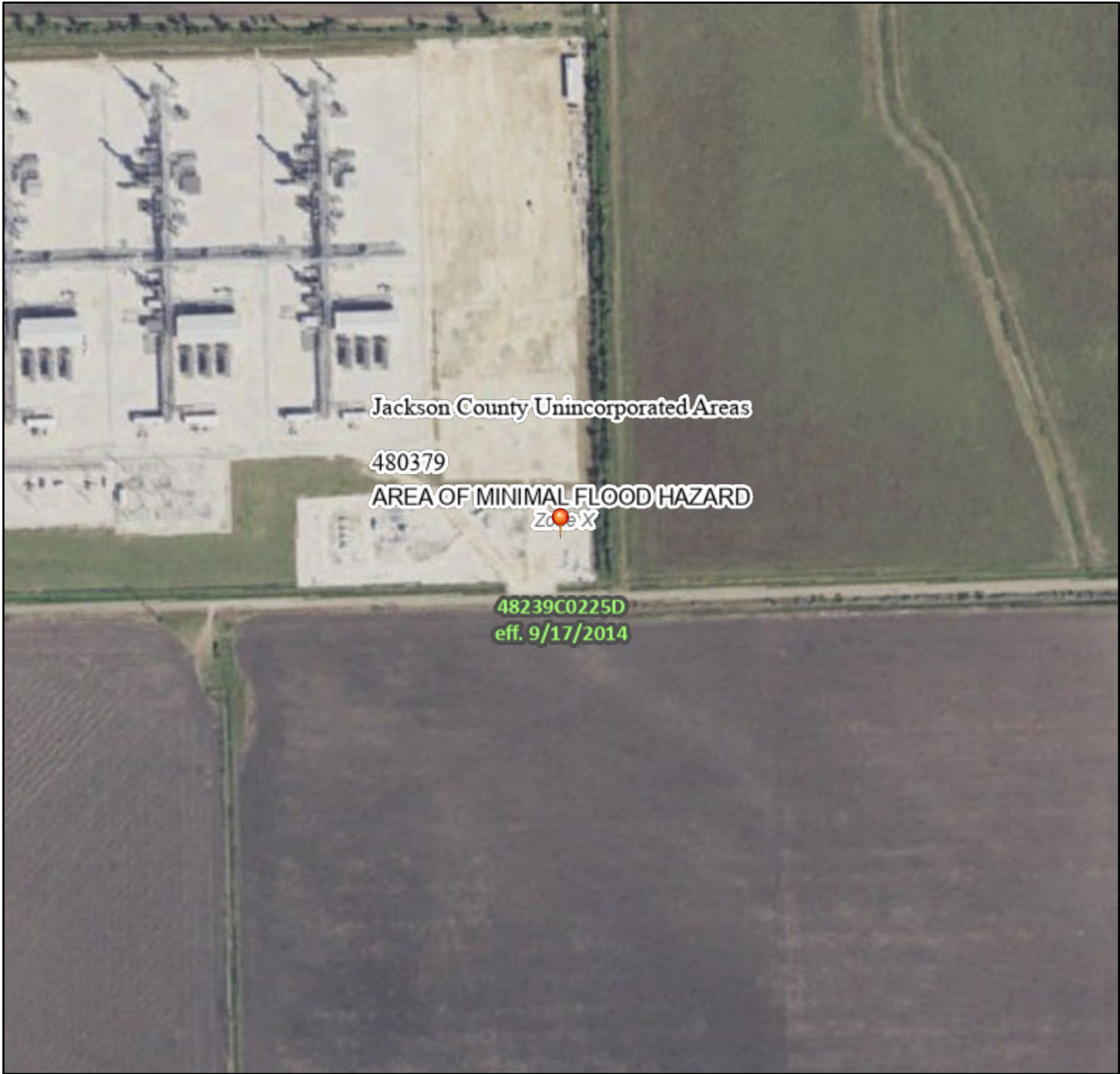
Subject: Re: WQ0005366000 ET Jackson Gas Plant Pre-App Meeting

Attachment 12

National Flood Hazard Layer FIRMMette



96°32'15"W 29°6'44"N



1:6,000

96°31'38"W 29°6'13"N

Basemap Imagery Source: USGS National Map 2023

Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

SPECIAL FLOOD HAZARD AREAS		Without Base Flood Elevation (BFE) Zone A, V, A99
		With BFE or Depth Zone AE, AO, AH, VE, AR
		Regulatory Floodway
OTHER AREAS OF FLOOD HAZARD		0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone X
		Future Conditions 1% Annual Chance Flood Hazard Zone X
		Area with Reduced Flood Risk due to Levee. See Notes. Zone X
		Area with Flood Risk due to Levee Zone D
OTHER AREAS		NO SCREEN Area of Minimal Flood Hazard Zone X
		Effective LOMRs
		Area of Undetermined Flood Hazard Zone D
GENERAL STRUCTURES		Channel, Culvert, or Storm Sewer
		Levee, Dike, or Floodwall
OTHER FEATURES		20.2 Cross Sections with 1% Annual Chance Water Surface Elevation
		17.5
		Coastal Transect
		Base Flood Elevation Line (BFE)
		Limit of Study
		Jurisdiction Boundary
		Coastal Transect Baseline
MAP PANELS		Digital Data Available
		No Digital Data Available
		Unmapped

The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 9/2/2025 at 12:39 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.

Attachment 13

INDUSTRIAL WASTEWATER PERMIT APPLICATION WORKSHEET 7.0: STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITIES

Outfall 002

Pollutant Analysis (Instructions, Page 91)

- a. Provide the date range of all sampling events conducted to obtain the analytical data submitted with this application (e.g., 05/01/2018-05/30/2018): No samples were taken due to no rain as of the date of permit submittal.
- b. ☐ Check the box to confirm all samples were collected no more than 12 months prior to the date of application submittal.
- c. Complete Table 17 as directed on page 92 of the Instructions.

Table 1 for Outfall No.: **002**

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled	MAL (mg/L)
pH (standard units)	6.4	—	(min)	—		—
Total suspended solids	11.6					—
Chemical oxygen demand	58					—
Total organic carbon	20.3					—
Oil and grease	<1.65					—
Arsenic, total	0.00132					0.0005
Barium, total	0.02					0.003
Cadmium, total	0.00004					0.001

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled	MAL (mg/L)
Chromium, total	0.00086					0.003
Chromium, trivalent	<0.0005					—
Chromium, hexavalent	0.0009					0.003
Copper, total	0.0025					0.002
Lead, total	0.00022					0.0005
Mercury, total	3.42					0.000005
Nickel, total	0.0433					0.002
Selenium, total	<0.00031					0.005
Silver, total	<0.00013					0.0005
Zinc, total	0.00867					0.005

* Taken during first 30 minutes of storm event

** Flow-weighted composite sample

d. Complete Table 18 as directed on pages 92-94 of the Instructions.

Table 2 for Outfall No.: 002

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled
Benzene	<0.00035				

* Taken during first 30 minutes of storm event

** Flow-weighted composite sample

Storm Event Data (Instructions, Page 93)

Provide the following data for the storm event(s) which resulted in the maximum values for the analytical data submitted:

Date of storm event: 8/19/2025

Duration of storm event (minutes): 360

Total rainfall during storm event (inches): 2.60

Number of hours the between beginning of the storm measured and the end of the previous measurable storm event (hours): 1460

Maximum flow rate during rain event (gallons/minute): N/A

Total stormwater flow from rain event (gallons): 0.5295 MGD

Provide a description of the method of flow measurement or estimate: See A9 flow worksheet for estimate of flow.

INDUSTRIAL WASTEWATER PERMIT APPLICATION WORKSHEET 7.0: STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITIES

Outfall 003

Pollutant Analysis (Instructions, Page 91)

- e. Provide the date range of all sampling events conducted to obtain the analytical data submitted with this application (e.g., 05/01/2018-05/30/2018): No samples were taken due to no rain as of the date of permit submittal.
- f. ☐ Check the box to confirm all samples were collected no more than 12 months prior to the date of application submittal.
- g. Complete Table 17 as directed on page 92 of the Instructions.

Table 3 for Outfall No.: **003**

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled	MAL (mg/L)
pH (standard units)	6.7	—	(min)	—		—
Total suspended solids	30					—
Chemical oxygen demand	35					—
Total organic carbon	12.8					—
Oil and grease	<1.60					—
Arsenic, total	0.0024					0.0005
Barium, total	0.0446					0.003
Cadmium, total	0.00004					0.001

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled	MAL (mg/L)
Chromium, total	0.00076					0.003
Chromium, trivalent	0.0008					—
Chromium, hexavalent	<0.0005					0.003
Copper, total	0.0118					0.002
Lead, total	0.00102					0.0005
Mercury, total	3.23					0.000005
Nickel, total	0.00307					0.002
Selenium, total	<0.00031					0.005
Silver, total	<0.00013					0.0005
Zinc, total	0.0363					0.005

* Taken during first 30 minutes of storm event

** Flow-weighted composite sample

h. Complete Table 18 as directed on pages 92-94 of the Instructions.

Table 4 for Outfall No.: [Click to enter text.](#)

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled
Benzene	<0.00035				

* Taken during first 30 minutes of storm event

** Flow-weighted composite sample

Storm Event Data (Instructions, Page 93)

Provide the following data for the storm event(s) which resulted in the maximum values for the analytical data submitted:

Date of storm event: 8/19/2025

Duration of storm event (minutes): 360

Total rainfall during storm event (inches): 2.60

Number of hours the between beginning of the storm measured and the end of the previous measurable storm event (hours): 1460

Maximum flow rate during rain event (gallons/minute): N/A

Total stormwater flow from rain event (gallons): 0.1130 MGD

Provide a description of the method of flow measurement or estimate: See A9 flow worksheet for estimate of flow.

Attachment Landowner Labels

Energy Transfer Parcels Property Tax Dept 800 E Sonterra Blvd STE 400 San Antonio, TX 78258	Owner 1
--	---------

Mc Colloch, Robert 608 S Union St Richmond, TX 77406	Owner 2
--	---------

High Cotton Land Company 120 S Third St Ganado, TX 75056	Owner 3
--	---------

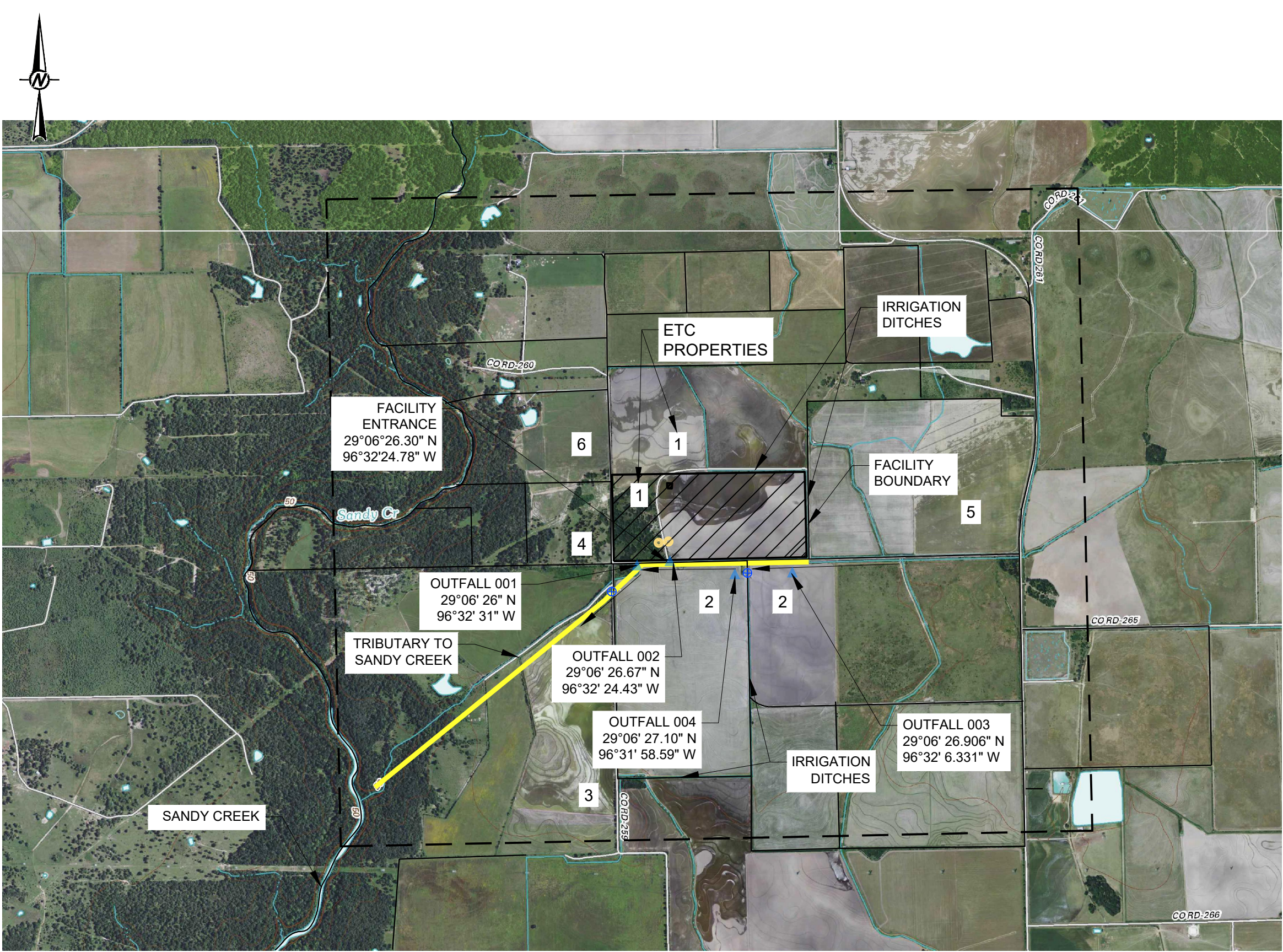
Owaski, John 1808 Chestnut St Sault St Marie, MI 49783	Owner 4
--	---------

Gallow, Leonard 10441 Sawmill Rd Brenham, TX 77833	Owner 5
--	---------

Gallow, Mason 3420 CO RD 259 Ganado, TX 75056	Owner 6
---	---------

Landowner Map

Path: \\wsp-jackson\net\USCentralData\USDA\4001Tasakana\Projects - Vector\A_2025\US0046961_1846 ET Jackson Gas Plant\ | File Name: Landowner Map.dwg | Last Edited By: jmc3868 Date: 2025-08-28 Time: 5:59:55 PM | Printed By: INRC03868 Date: 2025-08-28 Time: 6:00:04 PM



LEGEND


- ← FLOW DIRECTION
- DRINKING WATER WELL
- ⊕ WELL (IRRIGATION) LOCATED WITHIN 1-MILE BOUNDARY
- ▲ OUTFALL
- - - 1-MILE DOWNSTREAM FACILITY BOUNDARIES
- STREAM FLOW
- BOUNDARY LINE
- # LANDOWNER
- ▨ PLANT BOUNDARY



CLIENT
ET GATHERING & PROCESSING LLC

PROJECT
TPDES PERMIT RENEWAL JACKSON GAS PLANT

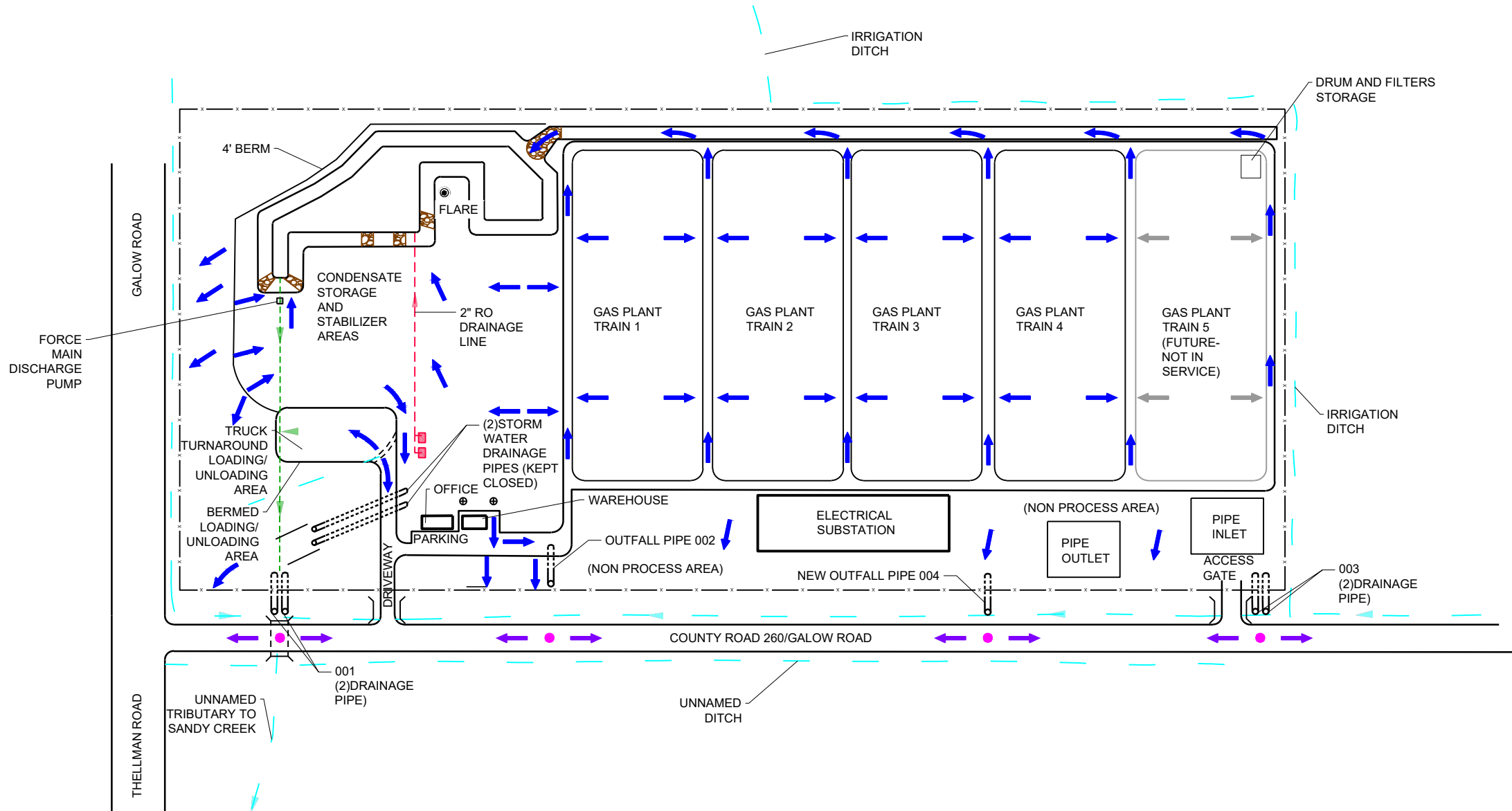
TITLE
LANDOWNER MAP

	CONSULTANT	YYYY-MM-DD	2025-08-28
	DESIGNED	CS	
	PREPARED	RR	
	REVIEWED	CS	
	APPROVED	CS	

1 in IF THIS MEASUREMENT DOES NOT MATCH WHAT IS SHOWN, THE SHEET SIZE HAS BEEN MODIFIED FROM ANSI B

Site Map

Path: \\vamp-pdw\enr\US-Central\Data\USDA\4001\Taskarea\Projects - Victoria_2025\US0046961.1846 ET Jackson Gas Plant\ - Victoria_2025\US0046961.1846 ET Jackson Gas Plant\ | File Name: SITE MAP.dwg | Last Edited By: mfr03888 Date: 2025-08-28 Time: 2:47:14 PM | Printed By: mfr03888 Date: 2025-08-28 Time: 6:04:12 PM



LEGEND

WATER WELLS

RO UNITS AND DISCHARGE LINE

FACILITY FENCE LINE

STORMWATER CULVERTS

DIRECTION OF STORMWATER RUNOFF

COMBINED STORMWATER AND RO REJECT WATER

STORMWATER

RIP RAP (TYP.)

PICTURE LOCATION

FLARE



CLIENT

ET GATHERING & PROCESSING LLC

PROJECT

TPDES PERMIT RENEWAL JACKSON GAS PLANT

TITLE

SITE MAP

CONSULTANT

YYYY-MM-DD

2025-08-28

DESIGNED

CS

PREPARED

RR

REVIEWED

CS

APPROVED

CS

PROJECT NO.

US0046961.1846

REV.

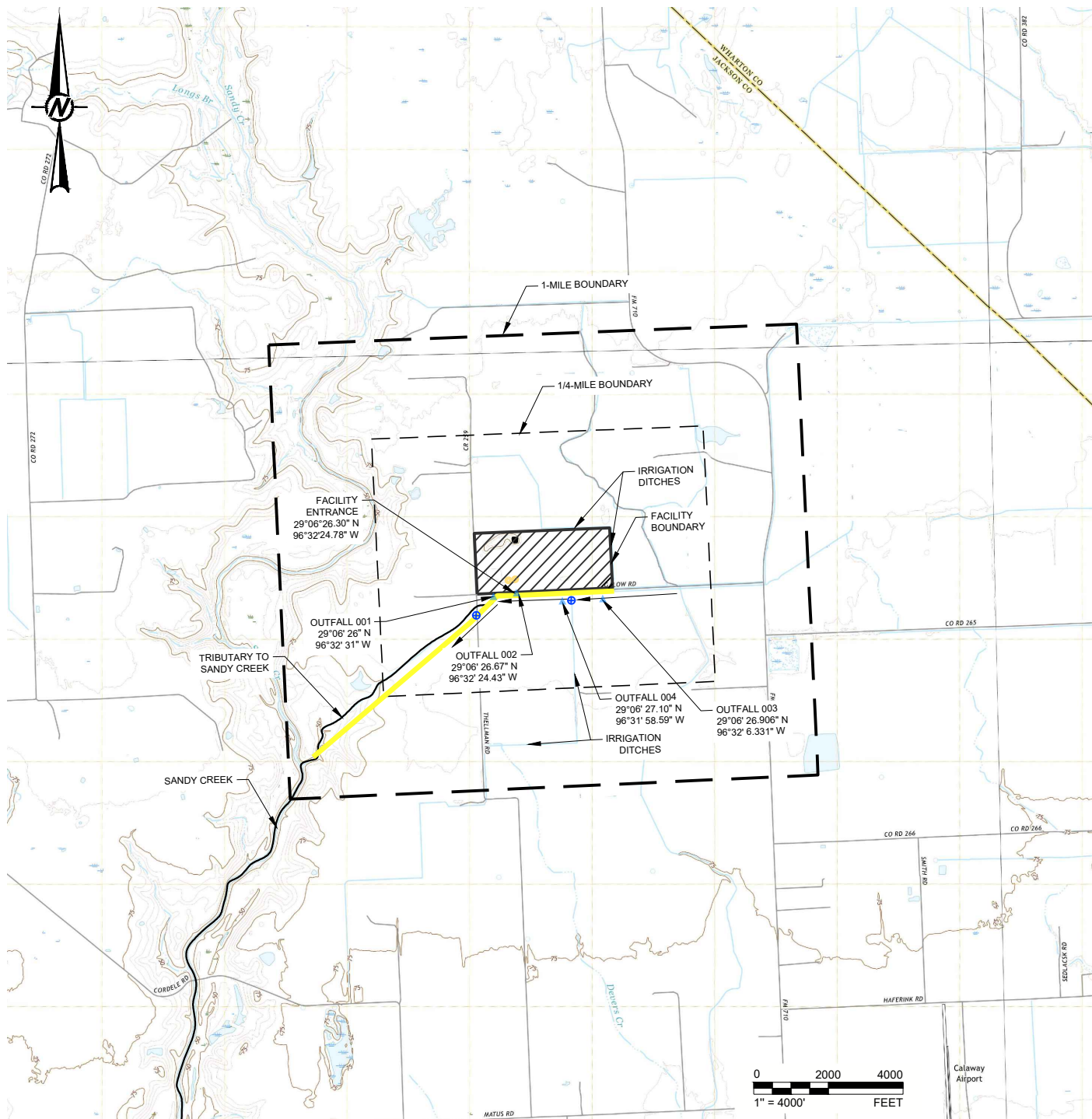
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FIGURE

2







1 in IF THIS MEASUREMENT DOES NOT MATCH WHAT IS SHOWN, THE SHEET SIZE HAS BEEN MODIFIED FROM ANSI B

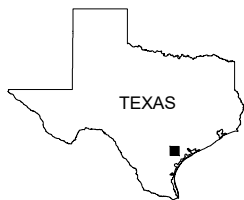
USGS Map



REFERENCE(S)
BASE MAP TAKEN FROM USGS.GOV, GANADO, GANADO NE, GOBBLER CREEK, AND LOUISE, TX 7.5 MIN. USGS QUADRANGLES, DATED 2022.

LEGEND

-  WELL (IRRIGATION) LOCATED WITHIN 1-MILE BOUNDARY
-  STREAM FLOW
-  DRAINAGE ROUTE
-  DRINKING WATER WELL
-  OUTFALL
-  PLANT BOUNDARY



QUADRANGLE LOCATIONS

CLIENT
ET GATHERING & PROCESSING LLC

PROJECT
TPDES PERMIT RENEWAL JACKSON GAS PLANT

TITLE
USGS MAP

CONSULTANT



YYYY-MM-DD	2025-08-28
DESIGNED	CS
PREPARED	RR
REVIEWED	CS
APPROVED	CS

PROJECT NO.
US0046961.1846

REV.
0

FIGURE
3