

## 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



## 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 DOMESTIC 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.

Seventy Seven Land Company LLC (CN604698555) operates Pearsall Development WWTP (RN106476518), a wastewater treatment plant for an oil and gas field services facility. The facility is located at 9021 Interstate 35 Frontage Road, in Pearsall, Frio County, Texas 78057. This application is for the renewal to discharge 24,000 gallons per day of treated domestic wastewater through outfall 001.

Discharges from the facility are expected to contain Carbonaceous Biochemical Oxygen Demand (5-day), Total Suspended Solids (TSS), E. Coli. Domestic wastewater is treated by septic tanks with effluent pumps, recirculation/blend tanks, filter pods, and a UV disinfection unit.

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

## AGUAS RESIDUALES Introduzca 'INDUSTRIALES' o 'DOMÉSTICAS' aquí /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.

1. Introduzca el nombre del solicitante aquí (2. Introduzca el número de cliente aquí (es decir, CN6########).) 3. Elija del menú desplegable 4. Introduzca el nombre de la instalación aquí 5. Introduzca el número de entidad regulada aquí (es decir, RN1######), 6. Elija del menú desplegable 7. Introduzca la descripción de la instalación aquí. La instalación 8. Elija del menú desplegable. ubicada en 9. Introduzca la ubicación aquí, en 10. Introduzca el nombre de la ciudad aquí, Condado de 11. Introduzca el nombre del condado aquí, Texas 12. Introduzca el código postal aquí. 13. Introduzca el resumen de la petición de solicitud aquí. << Para las solicitudes de TLAP incluya la siguiente oración, de lo contrario, elimine:>> Este permiso no autorizará una descarga de contaminantes en el agua en el estado.

Se espera que las descargas de la instalación contengan 14. Liste todos los contaminantes esperados aquí. 15. Introduzca los tipos de aguas residuales descargadas aquí. 16. Elija del menú desplegable tratado por 17. Introduzca una descripción del tratamiento de aguas residuales utilizado en la instalación aquí.

## PLANTILLA EN INGLÉS PARA SOLICITUDES DE NUEVA, RENOVACIÓN O MODIFICACIÓN DE TPDES O TLAP

#### AGUAS RESIDUALES DOMÉSTICAS/PLUVIALES

El siguiente resumen se presenta para esta solicitud de permiso de calidad del agua pendiente que está siendo revisada por la Comisión de Calidad Ambiental de Texas, según lo exige el Título 30 del Código Administrativo de Texas (TAC), Capítulo 39. La información proporcionada en este resumen puede cambiar durante la revisión técnica de la solicitud y no constituye una declaración federal vinculante de la solicitud de permiso.

Seventy Seven Land Company LLC (CN604698555) opera la Planta de Tratamiento de Aguas Residuales (PTAR) de Pearsall Development (RN106476518), una planta de tratamiento de aguas residuales para una instalación de servicios de yacimientos de petróleo y gas. La instalación está ubicada en 9021 Interstate 35 Frontage Road, en Pearsall, Condado de Frio, Texas 78057. Esta solicitud es para la renovación del vertido de 24,000 galones diarios de aguas residuales domésticas tratadas a través del emisario 001.

Se espera que las descargas de la instalación contengan Demanda Bioquímica de Oxígeno Carbonoso (5 días), Sólidos Suspendidos Totales (SST) y E. coli. Las aguas residuales domésticas se tratan mediante fosas sépticas con bombas de efluentes, tanques de recirculación/mezcla, módulos de filtración y una unidad de desinfección UV.

## **TEXAS COMMISSION ON ENVIRONMENTAL QUALITY**



# NOTICE OF RECEIPT OF APPLICATION AND INTENT TO OBTAIN WATER QUALITY PERMIT RENEWAL.

## PERMIT NO. WQ0015043001

**APPLICATION.** Seventy Seven Land Company LLC, 10713 West Sam Houston Parkway North, Suite 800, Houston, Texas 77064, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WO0015043001 (EPA I.D. No. TX0133621) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 24,000 gallons per day. The domestic wastewater treatment facility is located at 9021 North Interstate 35, in Frio County, Texas 78057. The discharge route is from the plant site to an unnamed tributary; thence to Buck Creek; thence to the Frio River Above Choke Canyon Reservoir. TCEQ received this application on March 21, 2025. The permit application will be available for viewing and copying at Pearsall Public Library, 200 East Trinity Street, Pearsall, in Frio 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=-99.060277,29.010833&level=18

ALTERNATIVE LANGUAGE NOTICE. Alternative language notice in Spanish is available at: <a href="https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications">https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications</a>. El aviso de idioma alternativo en español está disponible en <a href="https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications">https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications</a>.

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 countywide 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.

TCEQ may act on an application to renew a permit for discharge of wastewater without providing an opportunity for a contested case hearing if certain criteria are met.

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 <a href="www.tceq.texas.gov/goto/cid">www.tceq.texas.gov/goto/cid</a>. 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 <a href="https://www14.tceq.texas.gov/epic/eComment/">https://www14.tceq.texas.gov/epic/eComment/</a>, 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 <a href="www.tceq.texas.gov/goto/pep">www.tceq.texas.gov/goto/pep</a>. Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from Seventy Seven Land Company LLC at the address stated above or by calling Mr. Les Teague, NexTier Completion Solutions, at 281-731-6469.

Issuance Date: May 16, 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 RENOVACION

#### **PERMISO NO. WQ0015043001**

**SOLICITUD.** Seventy Seven Land Company LLC, 10713 West Sam Houston Parkway North, Suite 800, Houston, Texas 77064 ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQ0015043001 (EPA I.D. No. TX0133621) del Sistema de Eliminación de Descargas de Contaminantes de Texas (TPDES) para autorizar la descarga de aguas residuales tratadas en un volumen que no sobrepasa un flujo promedio diario de 24,000 galones por día. La planta está ubicada 9021 North Interstate 35, en el Condado de Frio, Texas 78057. La ruta de descarga es del sitio de la planta a un afluente sin nombre; de allí al arroyo Buck; de allí al río Frio por encima del embalse de Choke Canyon. La TCEQ recibió esta solicitud el 21 de Marzo de 2025. La solicitud para el permiso estará disponible para leerla y copiarla en Biblioteca Pública de Pearsall, 200 East Trinity Street, Pearsall, condado de Frio, Texas antes de la fecha de publicación de este aviso en el periódico. 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. <a href="https://gisweb.tceq.texas.gov/LocationMapper/?marker=-99.060277,29.010833&level=18">https://gisweb.tceq.texas.gov/LocationMapper/?marker=-99.060277,29.010833&level=18</a>

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. Si ciertos criterios se cumplen, la TCEQ puede actuar sobre una solicitud para renovar un permiso sin proveer una oportunidad de una audiencia administrativa de lo contencioso.

**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. Ademas, puede pedir que la TCEQ ponga su nombre en una or mas de las listas correos siguientes (1) la lista de correo permanente para recibir los avisos de el 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 agrega su nombre en una de las listas designe cual lista(s) y envia por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

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 del Seventy Seven Land Company LLC a la dirección indicada arriba o llamando a Sr. Les Teague, NexTier Complation Solutions al 281-731-6469.

Fecha de emission: 16 de mayo de 2025

Brooke T. Paup, *Chairwoman*Bobby Janecka, *Commissioner*Catarina R. Gonzales, *Commissioner*Kelly Keel, *Executive Director* 



## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

March 21, 2025

Re: Confirmation of Submission of the Renewal without changes for Private Domestic Wastewater Authorization.

Dear Applicant:

This is an acknowledgement that you have successfully completed Renewal without changes for the Private Domestic Wastewater authorization.

ER Account Number: ER103688

Application Reference Number: 751857 Authorization Number: WQ0015043001 Site Name: Pearsall Development WWTP

Regulated Entity: RN106476518 - Pearsall Development WWTP Customer(s): CN604698555 - Seventy Seven Land Company LLC

Please be aware that TCEQ staff may contact your designated contact for any additional information.

If you have any questions, you may contact the Applications Review and Processing Team by email at WQ-ARPTeam@tceq.texas.gov or by telephone at (512) 239-4671.

Sincerely, Applications Review and Processing Team Water Quality Division

## **Texas Commission on Environmental Quality**

Update Domestic or Industrial Individual Permit WQ0015043001

## Site Information (Regulated Entity)

What is the name of the site to be authorized? PEARSALL DEVELOPMENT WWTP

Does the site have a physical address? Yes

**Physical Address** 

Number and Street 9021 N IH 35

City

State TX

ZIP 78057

County

Latitude (N) (##.#####) 29.010833

Longitude (W) (-###.#####) -99.060277

Primary SIC Code 7033

Secondary SIC Code

Primary NAICS Code 721211

Secondary NAICS Code

**Regulated Entity Site Information** 

What is the Regulated Entity's Number (RN)? RN106476518

What is the name of the Regulated Entity (RE)?

PEARSALL DEVELOPMENT WWTP

Does the RE site have a physical address?

**Physical Address** 

Number and Street 9021 N IH 35

City MOORE

State TX

ZIP 78057

County FRIO

Latitude (N) (##.#####) 28.868333

Longitude (W) (-###.#####) -99.1075

Facility NAICS Code

What is the primary business of this entity?

## SEVENTY-Customer (Applicant) Information (Owner)

How is this applicant associated with this site?

Owner

What is the applicant's Customer Number (CN)? CN604698555

Type of Customer Corporation

Full legal name of the applicant:

Legal Name SEVENTY SEVEN LAND COMPANY

LLC

Texas SOS Filing Number 802024092

Federal Tax ID

State Franchise Tax ID 32054565570

State Sales Tax ID

Local Tax ID

**DUNS Number** 

Number of Employees

Independently Owned and Operated?

I certify that the full legal name of the entity applying for this permit

has been provided and is legally authorized to do business in Texas.

**Responsible Authority Contact** 

Organization Name SEVENTY SEVEN LAND COMPANY

LLC

Yes

Prefix MR

First Andrew

Middle

Last Smith

Suffix

Credentials

Title **CFO** 

Responsible Authority Mailing Address

Enter new address or copy one from list:

Address Type **Domestic** 

Mailing Address (include Suite or Bldg. here, if applicable) 10713 W SAM HOUSTON PKWY N

STE 800

Routing (such as Mail Code, Dept., or Attn:)

City HOUSTON

State TX

ZIP 77064

Phone (###-###-###) 7133256000

Extension

Alternate Phone (###-###-####)

Fax (###-###-###)

E-mail info@nextierofs.com

**Billing Contact** 

Responsible contact for receiving billing statements:

Select the permittee that is responsible for payment of the annual fee.

CN604698555, SEVENTY SEVEN

LAND COMPANY LLC

Organization Name

**NexTier Completion Solutions** 

Prefix

MR

First

Les

Middle

Last

Teague

Suffix

Credentials

Title

Enter new address or copy one from list:

**Mailing Address** 

Address Type

Domestic

Mailing Address (include Suite or Bldg. here, if applicable)

10713 W SAM HOUSTON PKWY N

**STE 800** 

Routing (such as Mail Code, Dept., or Attn:)

City

HOUSTON

State

TX

ZIP

77064 2817316469

Phone (###-###-###)

Extension

Alternate Phone (###-###-###)

Fax (###-###-###)

E-mail

Les.Teague@NexTierOFS.com

## **Application Contact**

#### Person TCEQ should contact for questions about this application:

Same as another contact?

Organization Name

Alliance Technical Group

Prefix

MR

First

Hani

Middle

Last

Suffix

Said

Credentials

Title

**Environmental Scientist** 

Enter new address or copy one from list:

**Mailing Address** 

Address Type

Domestic

Mailing Address (include Suite or Bldg. here, if applicable)

6001 SAVOY DR STE 110

Routing (such as Mail Code, Dept., or Attn:)

City

HOUSTON

State

TX

ZIP

77036

Phone (###-###-###)

8323849475

Extension

Alternate Phone (###-###-###)

Fax (###-###-###)

E-mail

hani.said@alliancetg.com

## **Technical Contact**

Person TCEQ should contact for questions about this application:

Same as another contact?

**Application Contact** 

Organization Name

Alliance Technical Group

Prefix

MR

First

Hani

Middle

Last

Said

Suffix

Credentials

Title

**Environmental Scientist** 

Enter new address or copy one from list:

**Mailing Address** 

Address Type

Domestic

Mailing Address (include Suite or Bldg. here, if applicable)

6001 SAVOY DR STE 110

Routing (such as Mail Code, Dept., or Attn:)

City

HOUSTON

State

ZIP

TX 77036

Phone (###-###-####)

8323849475

Extension

Alternate Phone (###-###-####)

Fax (###-###-###)

E-mail

hani.said@alliancetg.com

### **DMR Contact**

Person responsible for submitting Discharge Monitoring Report

Forms:

Same as another contact?

Organization Name

Prefix

First

Middle

Last Suffix

Credentials

Title

Enter new address or copy one from list:

**Mailing Address:** 

Address Type

Mailing Address (include Suite or Bldg. here, if applicable)

Routing (such as Mail Code, Dept., or Attn:)

City

State

ZIP

Phone (###-###-###)

Extension

Alternate Phone (###-###-###)

Fax (###-###-###)

E-mail

15

**Billing Contact** 

**NexTier Completion Solutions** 

MR Les

Teague

Domestic

10713 W SAM HOUSTON PKWY N

Ste. 800

HOUSTON

TX

77064

2817316469

Les.Teague@NexTierOFS.com

### Section 1# Permit Contact

### Permit Contact#: 1

#### Person TCEQ should contact throughout the permit term.

1) Same as another contact?

Came as another contact:

2) Organization Name

Prefix

4) First

5) Middle

6) Last7) Suffix

8) Credentials

9) Title

**Mailing Address** 

10) Enter new address or copy one from list

11) Address Type

CN604698555, SEVENTY SEVEN

LAND COMPANY LLC

NextTier Completion Solutions

MR

Les

Teague

**HSE Manager** 

Domestic

11.1) Mailing Address (include Suite or Bldg. here, if applicable)

10713 W SAM HOUSTON PKWY N

STE 800

11.2) Routing (such as Mail Code, Dept., or Attn:)

11.3) City

HOUSTON

11.4) State

TX

11.5) ZIP

77064

12) Phone (###-###-###)

2817316469

13) Extension

14) Alternate Phone (###-###-####)

15) Fax (###-###-###)

16) E-mail

Les.Teague@NexTierOFS.com

#### Section 2# Permit Contact

#### Permit Contact#: 2

## Person TCEQ should contact throughout the permit term.

1) Same as another contact?

2) Organization Name

**NexTier Completion Solutions** 

3) Prefix

MS

4) First

Pamella

5) Middle

6) Last

Sanchez

7) Suffix

8) Credentials

9) Title

Sr. HSE Manager

#### **Mailing Address**

10) Enter new address or copy one from list

11) Address Type

Domestic

11.1) Mailing Address (include Suite or Bldg. here, if applicable)

4517 W INDUSTRIAL AVE

11.2) Routing (such as Mail Code, Dept., or Attn:)

11.3) City

MIDLAND

11.4) State

TX

11.5) ZIP

79703

12) Phone (###-###-###)

4322032902

13) Extension

14) Alternate Phone (###-###-###)

15) Fax (###-###-###)

16) E-mail

Pamella.Sanchez@NexTierOFS.com

## Owner Information

#### **Owner of Treatment Facility**

- 1) Prefix
- 2) First and Last Name

3) Organization Name

4) Mailing Address

5) City

6) State

7) Zip Code

8) Phone (###-###-###)

9) Extension

10) Email

11) What is ownership of the treatment facility?

Owner of Land (where treatment facility is or will be)

12) Prefix

13) First and Last Name

14) Organization Name

15) Mailing Address

16) City

17) State

18) Zip Code

19) Phone (###-###-###)

20) Extension

21) Email

22) Is the landowner the same person as the facility owner or coapplicant?

Seventy Seven Land Company LLC

10713 W Sam Houston Parkway N.,

Ste. 800

Houston

TX

77064

2817316469

Les.Teague@NexTierOFS.com

Private

Seventy Seven Land Company LLC

10713 W Sam Houston Parkway N.,

Ste. 800

Houston

TX

77064

2817316469

Les.Teague@NexTierOFS.com

Yes

## General Information Renewal-Amendment

1) Current authorization expiration date:

2) Current Facility operational status:

3) Is the facility located on or does the treated effluent cross American Indian Land?

4) What is the application type that you are seeking?

5) Current Authorization type:

5.1) What is the proposed total flow in MGD discharged at the facility?

5.2) Select the applicable fee

6) What is the classification for your authorization?

6.1) What is the EPA Identification Number?

6.2) Is the wastewater treatment facility location in the existing permit

08/10/2025

Active

No

Renewal without changes

Private Domestic Wastewater

0.024

< .05 MGD - Renewal - \$315

**TPDES** 

TX0133621

Yes

accurate?

6.3) Are the point(s) of discharge and the discharge route(s) in the

existing permit correct?

6.4) City nearest the outfall(s):

6.5) County where the outfalls are located:

6.6) Is or will the treated wastewater discharge to a city, county, or state highway right-of-way, or a flood control district drainage ditch?

6.7) Is the daily average discharge at your facility of 5 MGD or more?

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

Yes

Pearsall

**FRIO** 

No

No

No

Yes

## Public Notice Information

#### **Individual Publishing the Notices**

1) Prefix MR

2) First and Last Name Hani Said

3) Credential

4) Title **Environmental Scientist** 

5) Organization Name Alliance Technical Group

6) Mailing Address 6001 SAVOY DR

7) Address Line 2 Ste 110

HOUSTON 8) City

9) State TX

77036 10) Zip Code

11) Phone (###-###-###) 8323746758

12) Extension

13) Fax (###-###-###)

14) Email hani.said@alliancetg.com

Contact person to be listed in the Notices

15) Prefix MR

16) First and Last Name Les Teague

17) Credential

18) Title **HSE Manager** 

19) Organization Name **NexTier Completion Solutions** 

20) Phone (###-###-###) 2817316469

21) Fax (###-###-###)

22) Email Les.Teague@NexTierOFS.com

**Bilingual Notice Requirements** 

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

of 12

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

Yes

23.2) Do the students at these schools attend a bilingual education program at another location?

No

23.3) Would the school be required to provide a bilingual education program but the school has waived out of this requirement under 19

No

TAC 89.1205(g)?

23.4) Which language is required by the bilingual program?

Spanish

## Section 1# Public Viewing Information

## County#: 1

1) County

FRIO

2) Public building name

Pearsall Public Library

3) Location within the building

4) Physical Address of Building

200 E Trinity St 3333

5) City

6) Contact Name

7) Phone (###-###-###)

8303342496

Pearsall

8) Extension

9) Is the location open to the public?

Yes

## Plain Language

1) Plain Language

[File Properties]

File Name

LANG Plain Language Summary.pdf

Hash

A6344AA4341913F0B85CD1B3A2B74B8765A270FEE48F76A3A6F59B08ED3DF465

MIME-Type

application/pdf

## Supplemental Permit Information Form

1) Supplemental Permit Information Form (SPIF)

[File Properties]

File Name

SPIF SPIF.pdf

Hash 6

6163715B644D53826F31A84F09E58068987549FD7BD63255874E8866C9D87182

MIME-Type

application/pdf

### **Domestic Attachments**

1) Attach an 8.5"x11", reproduced portion of the most current and original USGS Topographic Quadrangle Map(s) that

meets the 1:24,000 scale.

[File Properties]

File Name

MAP\_USGS topographic map.pdf

Hash

4C2F17C3BE5B424509042703289959F1770F45BBB4154B466FACEB74D216D9D6

MIME-Type

application/pdf

Yes

Yes

No

No

No

No

2) I confirm that all required sections of Technical Report 1.0 are

complete and will be included in the Technical Attachment.

2.1) I confirm that Worksheet 2.0 (Receiving Waters) is complete and

included in the Technical Attachment.

2.2) Are you planning to include Worksheet 2.1 (Stream Physical

Characteristics) in the Technical Attachment?

2.3) Are you planning to include Worksheet 4.0 (Pollutant Analyses

Requirements) in the Technical Attachment?

2.4) Are you planning to include Worksheet 5.0 (Toxicity Testing

Requirements) in the Technical Attachment?

2.5) Are you planning to include Worksheet 7.0 (Class V Injection Well

Inventory/Authorization Form) in the Technical Attachment?

2.6) Technical Attachment

[File Properties]

File Name

TECH\_Technical Report.pdf

Hash

A4738D6D811E3F83236B47D64BBB16040B0FCB7FCE7A533716EDFD622B2C308C

MIME-Type

application/pdf

3) Buffer Zone Map

4) Flow Diagram

[File Properties]

File Name

FLDIA\_Flow Diagram.pdf

Hash

0170B3A8DC52A7FDACE4B0E0786B93F38107D6CD2CCC67759A3AEC074459C97F

MIME-Type

application/pdf

5) Site Drawing

[File Properties]

File Name

SITEDR\_USGS topographic map.pdf

Hash

4C2F17C3BE5B424509042703289959F1770F45BBB4154B466FACEB74D216D9D6

MIME-Type

application/pdf

6) Design Calculations

[File Properties]

File Name

DES\_CAL\_Not Applicable.pdf

Hash

C69662A33EBBD060A8EA3ACF8CDCF1E90E26C5F2304920904154BFA814A9747F

MIME-Type

application/pdf

7) Solids Management Plan

8) Water Balance

9) Other Attachments

[File Properties]

File Name

OTHER\_Signed lab accreditation page.pdf

Hash

B8DAC91DA06DF8B292C19C98A0611502669EFC1503EFDCB574D4AC9E8C4D1B84

MIME-Type

application/pdf

[File Properties]

File Name

OTHER Signed - Core Data Form.pdf

Hash

831947B8E138DD51D29A7597C6D2A18390E5385B6648F343052F8D42BABB8438

MIME-Type

application/pdf

[File Properties]

File Name

OTHER\_Signed -Signature Page.pdf

Hash

35FCB4CF059F018E30544E4F62ED77208B8BDA2D3A20500FDF9B34248452EB5D

MIME-Type

application/pdf

### Certification

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

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.

- 1. I am Leslie Teague, the owner of the STEERS account ER027835.
- 2. I have the authority to sign this data on behalf of the applicant named above.
- 3. I have personally examined the foregoing and am familiar with its content and the content of any attachments, and based upon my personal knowledge and/or inquiry of any individual responsible for information contained herein, that this information is true, accurate, and complete.
- 4. I further certify that I have not violated any term in my TCEQ STEERS participation agreement and that I have no reason to believe that the confidentiality or use of my password has been compromised at any time.
- 5. I understand that use of my password constitutes an electronic signature legally equivalent to my written signature.
- 6. I also understand that the attestations of fact contained herein pertain to the implementation, oversight and enforcement of a state and/or federal environmental program and must be true and complete to the best of my knowledge.
- 7. I am aware that criminal penalties may be imposed for statements or omissions that I know or have reason to believe are untrue or misleading.
- 8. I am knowingly and intentionally signing Update Domestic or Industrial Individual Permit WQ0015043001.
- 9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

OWNER Signature: Leslie Teague OWNER

Customer Number:

CN604698555

Legal Name:

SEVENTY SEVEN LAND COMPANY LLC

Account Number:

ER027835

Signature IP Address:

12.10.151.53

Signature Date:

2025-03-21

Signature Hash:

EFF000BAA5E0C99125EB4C3C1D6B21042FE1721C2BDF46D473630D1B48237A83

Form Hash Code at time

BC4C15CF9057F4806DAC73FA8D51838DB79629E3150C56DEFF50441D99193339

of Signature:

Fee Payment

Transaction by:

The application fee payment transaction was

made by ER027835/Leslie Teague

Paid by:

The application fee was paid by LESLIE TEAGUE

Fee Amount:

Paid Date: The application fee was paid on 2025-03-21

Transaction/Voucher number: The transaction number is 582EA000660461

and the voucher number is 758681

Submission

Reference Number: The application reference number is 751857

Submitted by: The application was submitted by ER103688/

Hani Said

\$300.00

Submitted Timestamp: The application was submitted on 2025-03-21 at

15:04:05 CDT

Submitted From: The application was submitted from IP address

66.64.45.243

Confirmation Number: The confirmation number is 640791

Steers Version: The STEERS version is 6.89

Permit Number: The permit number is WQ0015043001

Additional Information

Application Creator: This account was created by Hani Said

TCEQ Use Only



# **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 plea |  |  |  |
|--|--|--|--|
| New Permit, Registration or Authorization (Core    | Data Form should be submitted w                    | ith the program application.)                    |  |
| Renewal (Core Data Form should be submitted        | with the renewal form)                             | ☐ Other  |  |
| 2. Customer Reference Number (if issued)           | Follow this link to search for CN or RN numbers in | 3. Regulated Entity Reference Number (if issued) |  |
| CN 604698555                                       | Central Registry**                                 | RN 106476518                                     |  |
| SECTION II: Customer In                            |  |  |  |

| City   County   Cou   | with the l<br>here may<br>ablic Acco | be updated au<br>ounts (CPA).                        | of State or Text<br><b>utomatically</b><br>first: eg: Doe, | as Comp<br>based | ptroller of Pu            |                            | e with the T    | Texas Secre                    |            |
|--|--------------------------------------|--|--|------------------|---------------------------|----------------------------|-----------------|--------------------------------|------------|
| The Customer Name submitted I (SOS) or Texas Comptroller of Put (SoS) or Texas Comptroller of Put (SoS) or Texas Comptroller or Texas  | here may<br>blic Acco                | y be updated au<br>bunts (CPA).<br>print last name j | utomatically<br>first: eg: Doe,                            | based            |                           | current and active         |                 |                                |            |
| SOS) or Texas Comptroller of Put   | blic Acco                            | print last name j                                    | first: eg: Doe,  | John)            | on what is                |                            |                 |                                |            |
| 6. Customer Legal Name (If an inconserventy Seven Land Company LLC 7. TX SOS/CPA Filing Number 802024092  11. Type of Customer:  6. Covernment:  |                                      | print last name j                                    |  |                  |                           | If new Customer            | r, enter previo | ous Custom                     | ner below: |
| TX SOS/CPA Filing Number  302024092  1.1. Type of Customer:  30.20   | dividual, į                          | 8. TX State 1  |  |                  |                           | If new Customer            | r, enter previ  | ous Custon                     | er below:  |
| 7. TX SOS/CPA Filing Number 302024092  11. Type of Customer: Government: City County 12. Number of Employees 13. 0-20 21-100 101-250 14. Customer Role (Proposed or Action County Proposed Or Action Cou |                                      | S CANADO CONTRACTOR OF CONTRACTOR                    | <b>Tax ID</b> (11 di)                                      |                  |                           | T                          |                 |                                |            |
| 11. Type of Customer:  Government:  City County  12. Number of Employees  4. Customer Role (Proposed or Action County Proposed Or Action County Prop |                                      | S CANADO CONTRACTOR OF CONTRACTOR                    | Tax ID (11 di  |                  |                           |                            |                 |                                |            |
| 1.1. Type of Customer:  Government:  |                                      | 3254565570   |  | gits)            |                           | 9. Federal Tax ID 10. DUNS |                 |                                | lumber (if |
| 1.1. Type of Customer:  Government:  |                                      | 3201000  | 254565570  |                  |                           | (9 digits)                 |                 | applicable)                    |            |
| City   County   Cou   |                                      | 1  |  |                  |                           |                            |                 |                                |            |
| Government: City County |                                      |  |  |                  |                           | 47-1174346                 |                 |                                |            |
| 2. Number of Employees  0-20   | Corpora                              | ation  |  |                  | ☐ Individual Part         |                            | Partnershi      | rtnership: 🗌 General 🗎 Limited |            |
| 4. Customer Role (Proposed or Ac Owner Operat Occupational Licensee Responsed  10713 West Sam Hot Mailing  | Federal 🗀                            | Local   State  | Other  |                  | ☐ Sole F                  | Proprietorship             | ☑ Other:        | Limited Lia                    | ibility    |
| 4. Customer Role (Proposed or Ac Owner Operat Occupational Licensee Response  5. Mailing ddress:   |                                      |  |  |                  |                           | 13. Independen             | tly Owned       | and Open                       | ated?      |
| Owner Operat Occupational Licensee Response  5. Mailing ddress:  | <b>251</b>                           | L-500 🗆 501 a  | and higher   |                  |                           | ☐ Yes                      | ⊠ No            |                                |            |
| Occupational Licensee Responses  10713 West Sam Houndaries  Mailing  | :tual) – as                          | it relates to the                                    | Regulated En   | tity list        | ed on this for            | m. Please check on         | e of the follo  | wing                           |            |
| 5. Mailing ddress:   | NEW CO.                              |  | ner & Operato  |                  |                           | ☐ Other:                   | •)              |                                |            |
| 5. Mailing   | onsible Pa                           | arty 🗀 Vo  | CP/BSA Applic  | ant              |                           |                            | F               |                                |            |
| ddress:  | uston Park                           | kway North   |  |                  |                           |                            |                 |                                |            |
|  |                                      |  |  |                  |                           |                            |                 |                                | -          |
| City   nouscon   | Address:                             |  |  | State TX         |                           |                            | ZIP+4           |                                |            |
|  |                                      |  | Jule   | 1^               | ZIP                       | 77064                      |                 | 17                             |            |
| 6. Country Mailing Information (   | ifoutside                            | · USA)   |  | 1                | 7. E-Mail Ad              | ddress (if applicab        | le)             |                                |            |
|  |                                      |  |  |                  | les.teague@nextierofs.com |                            |                 |                                |            |
| B. Telephone Number  |                                      | or Code  | Code 20. Fax Number (if applicable)                        |                  |                           |                            |                 |                                |            |

| ( 281 )731-6469                                       |                    |                      |                       | Lee-way                      |             | (        | ) -              |             |                  |
|---|--------------------|----------------------|-----------------------|------------------------------|-------------|----------|------------------|-------------|------------------|
| SECTION III:  | Regula             | ated Entir           | ty Inforn             | nation                       |             |          |                  | ja .        |                  |
| 21. General Regulated E                               | ntity Informa      | ition (If 'New Regu  | lated Entity" is sele | ected, a new                 | permit app  | lication | is also required | d.)         |                  |
| ☐ New Regulated Entity                                | <b>☑</b> Update to | Regulated Entity N   | ame 🔲 Update          | to Regulated                 | Entity Info | rmation  |                  |             |                  |
| The Regulated Entity No<br>as Inc, LP, or LLC).       | me submitte        | d may be updated     | d, in order to me     | et TCEQ Co                   | re Data St  | andard   | s (removal of c  | organizatio | nal endings such |
| 22. Regulated Entity Na                               | me (Enter nam      | ne of the site where | the regulated acti    | ion is taking <sub>i</sub>   | place.)     |          |                  |             |                  |
| Pearsall Development Was                              | tewater Treatm     | ent Facility         | 0                     |                              |             | 19       |                  |             | è                |
| 23. Street Address of<br>the Regulated Entity:        | 9021 I-35 Fr       | ronatge Rd           |                       |                              |             |          |                  |             |                  |
| (No PO Boxes)   | City               | Moore                | State                 | тх                           | ZIP         | 780      | 57               | ZIP + 4     |                  |
| 24. County  | Frio               |                      |                       |                              |             |          |                  |             |                  |
|   |                    | If no Street         | Address is provid     | led, fields 2                | 5-28 are n  | equired  | L                |             |                  |
| 25. Description to Physical Location:                 |                    |                      |                       |                              |             |          |                  |             |                  |
| 26. Nearest City                                      |                    |                      |                       |                              |             | State    | y                | Nea         | arest ZIP Code   |
| Moore   |                    |                      |                       |                              |             | TX       |                  | 780         | 57               |
| Latitude/Longitude are r<br>used to supply coordinate | 17                 |                      |                       |                              | ata Stando  | ards. (G | ieocoding of th  | he Physical | Address may be   |
| 27. Latitude (N) in Decim                             | al:                | 29.010799            |                       | 28. Lo                       | ngitude (\  | N) In D  | ecimal:          | -99.0601    | .42              |
| Degrees   | Minutes            | Sec                  | conds                 | Degree                       | 25          |          | Minutes          |             | Seconds          |
| 29. Primary SIC Code                                  | 30 5               | econdary SIC Cod     | le .                  |                              |             |          | 32 Seco          | ndary NAI   | CS Code          |
| (4 digits)  | (4 digits)         |                      |                       | 31. Primary<br>(5 or 6 digit |             | de       | (5 or 6 dig      |             | a code           |
| 1389  |                    |                      |                       |                              |             |          |                  |             |                  |
| 33. What is the Primary B                             | usiness of thi     | s entity? (Do no     | t repeat the SIC or   | NAICS descr                  | iption.)    |          |                  |             |                  |
| Wastewater Treatment Facil                            | ity                |                      |                       |                              |             |          |                  |             |                  |

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.

State

37. Extension or Code

TX

77064

)

38. Fax Number (if applicable)

ZIP+4

ZIP

10713 West Sam Houston Parkway North

Houston

les.teague@nextierofs.com

City

34. Mailing Address:

35. E-Mail Address:

(281)731-6469

36. Telephone Number

TCEQ-10400 (11/22) Page 2 of 3

| ☐ Dam Safety          | Districts                      | ☐ Edwards Aqui     | ifer         | ☐ Emissions Inventory Air | ☐ Industrial Hazardous Waste   |
|-----------------------|--------------------------------|--------------------|--------------|---------------------------|--|
| ☐ Municipal Solid     | l Waste Review Air             | rce OSSF           | 1            | ☐ Petroleum Storage Tank  | □ PWS  |
| □ Sludge              | L.J Storm W                    | ater               | ı            | _] Tires                  | ☐ Used Oil   |
| ☐ Voluntary Clear     |                                |                    | griculture [ | ☐ Water Rights            | Other:   |
|                       | WQ0015043                      |                    |              | II                        | · ·  |
| SECTION 1             | V: Preparer                    | <u>Information</u> |              |                           |  |
| 40. Name: Har         | ni Said                        |                    | 41. Title:   | Environmental Scientis    | t  |
| 42. Telephone Nun     | nber 43. Ext./Code             | 44. Fax Number     | 45. E-Mai    | Address                   |  |
| (832)374-6758         |                                | ( ) -              | hani.said@   | Palliancetg.com           |  |
| ECTION V              | : Authorize                    | 1 Signature        |              |                           |  |
| 6. By my signature be | low, I certify, to the best of |                    |              |                           | ete, and that I have signature authority<br>rs identified in field 39. |
| Company:              | Severy Some                    | - Land G LLC       | Job Title:   | CF3                       |  |
| Name (In Print):      | Anny Smit                      | <u>_</u>           |              | Phone:                    | ( ) -  |
| Signature:            | (3)                            | ~~                 |              | Date:                     | 2 10 25  |
|                       |                                |                    |              |                           |  |

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

Permit Number: WQ0015043001

Applicant: Seventy Seven Land Company LLC

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): C. Andrew Jnith                            |
|---|
| Signatory title: LFO  |
| Signature: Date: 3 10/25  |
| (Use blue ink)  |
| Subscribed and Sworn to before me by the said <u>C. Andrew Smith</u>          |
| on this 10th day of March, 2025.  |
| My commission expires on the 12th day of November, 2027.                      |
| Notary Public  ANN RAMINING ANN RAMINING OF TEXT SEAL!  County, Texas  [SEAL] |



## 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 DOMESTIC 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.

Seventy Seven Land Company LLC (CN604698555) operates Pearsall Development WWTP (RN106476518), a wastewater treatment plant for an oil and gas field services facility. The facility is located at 9021 Interstate 35 Frontage Road, in Pearsall, Frio County, Texas 78057. This application is for the renewal to discharge 24,000 gallons per day of treated domestic wastewater through outfall 001.

Discharges from the facility are expected to contain Carbonaceous Biochemical Oxygen Demand (5-day), Total Suspended Solids (TSS), E. Coli. Domestic wastewater is treated by septic tanks with effluent pumps, recirculation/blend tanks, filter pods, and a UV disinfection unit.

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

## AGUAS RESIDUALES Introduzca 'INDUSTRIALES' o 'DOMÉSTICAS' aquí /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.

1. Introduzca el nombre del solicitante aquí (2. Introduzca el número de cliente aquí (es decir, CN6########).) 3. Elija del menú desplegable 4. Introduzca el nombre de la instalación aquí 5. Introduzca el número de entidad regulada aquí (es decir, RN1######), 6. Elija del menú desplegable 7. Introduzca la descripción de la instalación aquí. La instalación 8. Elija del menú desplegable. ubicada en 9. Introduzca la ubicación aquí, en 10. Introduzca el nombre de la ciudad aquí, Condado de 11. Introduzca el nombre del condado aquí, Texas 12. Introduzca el código postal aquí. 13. Introduzca el resumen de la petición de solicitud aquí. << Para las solicitudes de TLAP incluya la siguiente oración, de lo contrario, elimine:>> Este permiso no autorizará una descarga de contaminantes en el agua en el estado.

Se espera que las descargas de la instalación contengan 14. Liste todos los contaminantes esperados aquí. 15. Introduzca los tipos de aguas residuales descargadas aquí. 16. Elija del menú desplegable tratado por 17. Introduzca una descripción del tratamiento de aguas residuales utilizado en la instalación aquí.

## PLANTILLA EN INGLÉS PARA SOLICITUDES DE NUEVA, RENOVACIÓN O MODIFICACIÓN DE TPDES O TLAP

#### AGUAS RESIDUALES DOMÉSTICAS/PLUVIALES

El siguiente resumen se presenta para esta solicitud de permiso de calidad del agua pendiente que está siendo revisada por la Comisión de Calidad Ambiental de Texas, según lo exige el Título 30 del Código Administrativo de Texas (TAC), Capítulo 39. La información proporcionada en este resumen puede cambiar durante la revisión técnica de la solicitud y no constituye una declaración federal vinculante de la solicitud de permiso.

Seventy Seven Land Company LLC (CN604698555) opera la Planta de Tratamiento de Aguas Residuales (PTAR) de Pearsall Development (RN106476518), una planta de tratamiento de aguas residuales para una instalación de servicios de yacimientos de petróleo y gas. La instalación está ubicada en 9021 Interstate 35 Frontage Road, en Pearsall, Condado de Frio, Texas 78057. Esta solicitud es para la renovación del vertido de 24,000 galones diarios de aguas residuales domésticas tratadas a través del emisario 001.

Se espera que las descargas de la instalación contengan Demanda Bioquímica de Oxígeno Carbonoso (5 días), Sólidos Suspendidos Totales (SST) y E. coli. Las aguas residuales domésticas se tratan mediante fosas sépticas con bombas de efluentes, tanques de recirculación/mezcla, módulos de filtración y una unidad de desinfección UV.

#### INSTRUCTIONS

- 1. Enter the name of applicant in this section. The applicant name should match the name associated with the customer number.
- 2. Enter the Customer Number in this section. Each Individual or Organization is issued a unique 11-digit identification number called a CN (e.g. CN123456789).
- 3. Choose "operates" in this section for existing facility applications or choose "proposes to operate" for new facility applications.
- 4. Enter the name of the facility in this section. The facility name should match the name associated with the regulated entity number.
- 5. Enter the Regulated Entity number in this section. Each site location is issued a unique 11-digit identification number called an RN (e.g. RN123456789).
- 6. Choose the appropriate article (a or an) to complete the sentence.
- 7. Enter a description of the facility in this section. For example: steam electric generating facility, nitrogenous fertilizer manufacturing facility, etc.
- 8. Choose "is" for an existing facility or "will be" for a new facility.
- 9. Enter the location of the facility in this section.
- 10. Enter the City nearest the facility in this section.
- 11. Enter the County nearest the facility in this section.
- 12. Enter the zip code for the facility address in this section.
- 13. Enter a summary of the application request in this section. For example: renewal to discharge 25,000 gallons per day of treated domestic wastewater, new application to discharge process wastewater and stormwater on an intermittent and flow-variable basis, or major amendment to reduce monitoring frequency for pH, etc. If more than one outfall is included in the application, provide applicable information for each individual outfall.
- 14. List all pollutants expected in the discharge from this facility in this section. If applicable, refer to the pollutants from any federal numeric effluent limitations that apply to your facility.
- 15. Enter the discharge types from your facility in this section (e.g., stormwater, process wastewater, once through cooling water, etc.)
- 16. Choose the appropriate verb tense to complete the sentence.
- 17. Enter a description of the wastewater treatment used at your facility. Include a description of each process, starting with initial treatment and finishing with the outfall/point of disposal. Use additional lines for individual discharge types if necessary.

Questions or comments concerning this form may be directed to the Water Quality Division's Application Review and Processing Team by email at <u>WQ-ARPTeam@tceq.texas.gov</u> or by phone at (512) 239-4671.

## **Example 1: Industrial Wastewater TPDES Application (ENGLISH)**

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 are not federal enforceable representations of the permit application.

ABC Corporation (CN600000000) operates the Starr Power Station (RN10000000000), a two-unit gas-fired electric generating facility. Unit 1 has a generating capacity of 393 megawatts (MWs) and Unit 2 has a generating capacity of 528 MWs. The facility is located at 1356 Starr Street, near the City of Austin, Travis County, Texas 78753.

This application is for a renewal to discharge 870,000,000 gallons per day of once through cooling water, auxiliary cooling water, and also authorizes the following waste streams monitored inside the facility (internal outfalls) before it is mixed with the other wastewaters authorized for discharge via main Outfall 001, referred to as "previously monitored effluents" (low-volume wastewater, metal-cleaning waste, and stormwater (from diked oil storage area yards and storm drains)) via Outfall 001. Low-volume waste sources, metal-cleaning waste, and stormwater drains on a continuous and flow-variable basis via internal Outfall 101.

The discharge of once through cooling water via Outfall 001 and low-volume waste and metal-cleaning waste via Outfall 101 from this facility is subject to federal effluent limitation guidelines at 40 CFR Part 423. The pollutants expected from these discharges based on 40 CFR Part 423 are: free available chlorine, total residual chlorine, total suspended solids, oil and grease, total iron, total copper, and pH. Temperature is also expected from these discharges. Additional potential pollutants are included in the Industrial Wastewater Application Technical Report, Worksheet 2.0.

Cooling water and boiler make-up water are supplied by Lake Starr Reservoir. The City of Austin municipal water plant (CN600000000, PWS 00000) supplies the facility's potable water and serves as an alternate source of boiler make-up water. Water from the Lake Starr Reservoir is withdrawn at the intake structure and treated with sodium hypochlorite to prevent biofouling and sodium bromide as a chlorine enhancer to improve efficacy and then passed through condensers and auxiliary equipment on a once-through basis to cool equipment and condense exhaust steam.

Low-volume wastewater from blowdown of boiler Units 1 and 2 and metal-cleaning wastes receive no treatment prior to discharge via Outfall 101. Plant floor and equipment drains and stormwater runoff from diked oil storage areas, yards, and storm drains are routed through an oil and water separator prior to discharge via Outfall 101. Domestic wastewater, blowdown, and backwash water from the service water filter, clarifier, and sand filter are routed to the Starr Creek Domestic Sewage Treatment Plant, TPDES Permit No. WQ0010000001, for treatment and disposal. Metal-cleaning waste from equipment cleaning is generally disposed of off-site.

## **Example 2: Domestic Wastewater TPDES Renewal application**

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 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.

The City of Texas (CN000000000) operates the City of Texas wastewater treatment plant (RN00000000), an activated sludge process plant operated in the complete mix mode. The facility is located at 123 Texas Street, near the City of More Texas, Texas County, Texas 71234.

This application is for a renewal to discharge at an annual average flow of 1,200,000 gallons per day of treated domestic wastewater via Outfalls 001 and 002.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand ( $CBOD_5$ ), total suspended solids (TSS), ammonia nitrogen ( $NH_3$ -N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, a grit chamber, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.

## **Example 3: Domestic Wastewater TPDES New Application**

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 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.

The City of Texas (CN000000000) proposes to operate the City of Texas wastewater treatment plant (RN00000000), an activated sludge process plant operated in the extended aeration mode. The facility will be located at 123 Texas Street, in the City of More Texas, Texas County, Texas 71234.

This application is for a new application to discharge at a daily average flow of 200,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand (CBOD<sub>5</sub>), total suspended solids (TSS), ammonia nitrogen (NH<sub>3</sub>-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include a bar screen, a grit chamber, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.

#### **Example 4: Domestic Wastewater TLAP Renewal application**

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 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations

of the permit application.

The City of Texas (CN000000000) operates the City of Texas wastewater treatment plant (RN00000000), an activated sludge process plant operated in the complete mix mode. The facility is located at 123 Texas Street, near the City of More Texas, Texas County, Texas 71234.

This application is for a renewal to dispose a daily average flow not to exceed 76,500 gallons per day of treated domestic wastewater via public access subsurface drip irrigation system with a minimum area of 32 acres. This permit will not authorize a discharge of pollutants into water in the state.

Land application of domestic wastewater from the facility are expected to contain five-day biochemical oxygen demand ( $BOD_5$ ), total suspended solids (TSS), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, an equalization basin, an aeration basin, a final clarifier, an aerobic sludge digester, tertiary filters, and a chlorine contact chamber. In addition, the facility includes a temporary storage that equals to at least three days of the daily average flow.

# SCOMMISSION OF THE PROPERTY OF

## TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

## DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

For any questions about this form, please contact the Domestic Wastewater Permitting Team at 512-239-4671.

The following information is required for all renewal, new, and amendment applications.

## Section 1. Permitted or Proposed Flows (Instructions Page 43)

## A. Existing/Interim I Phase

Design Flow (MGD): Click to enter text.

2-Hr Peak Flow (MGD): Click to enter text.

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

#### **B.** Interim II Phase

Design Flow (MGD): Click to enter text.

2-Hr Peak Flow (MGD): Click to enter text.

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

## C. Final Phase

Design Flow (MGD): 0.024

2-Hr Peak Flow (MGD): 0.050

Estimated construction start date: Click to enter text.

Estimated waste disposal start date: Click to enter text.

#### D. Current Operating Phase

Provide the startup date of the facility: 1/24/2013

## **Section 2.** Treatment Process (Instructions Page 43)

#### A. Current Operating Phase

Provide a detailed description of the treatment process. Include the type of treatment plant, mode of operation, and all treatment units. Start with the plant's head works and

finish with the point of discharge. Include all sludge processing and drying units. If more than one phase exists or is proposed, a description of *each phase* must be provided.

Primary treatment of raw sewage is accomplished through Septic Tanks with Effluent Pumps (STEP). After primary treatment, the wastewater enters an Orenco AdvanTex unit(s) for secondary treatment where incoming flows are mixed in the recirculation/blend tank then sent through a distribution manifold to filter pods. After passing through the filter media, the effluent flows out of the filter pods and then is either discharged or returned back to the recirculation/blend tank. Prior to final discharge, treated effluent passes through a UV disinfection unit. During periods of low flow into the system, 100% of the treated effluent is returned back to the recirculation/blend tank.

#### **B.** Treatment Units

In Table 1.0(1), provide the treatment unit type, the number of units, and dimensions (length, width, depth) of each treatment unit, accounting for *all* phases of operation.

#### Table 1.0(1) - Treatment Units

| Treatment Unit Type                    | Number of Units | Dimensions (L x W x D) |
|--|-----------------|------------------------|
| Septic Tank with Effluent<br>Tank      | 9               | 10,000 gallons each    |
| Orenco, Model Advantex<br>AX-MAX275-42 | 4               | 42'-0" x 7'-6" x 8'0"  |
|  |                 |                        |
| 9                                      |                 |                        |
| 0                                      |                 |                        |

## C. Process Flow Diagram

Provide flow diagrams for the existing facilities and each proposed phase of construction.

Attachment: B

## Section 3. Site Information and Drawing (Instructions Page 44)

Provide the TPDES discharge outfall latitude and longitude. Enter N/A if not applicable.

Latitude: 29°00'42.0"N

Longitude: 99°03'50.0"W

Provide the TLAP disposal site latitude and longitude. Enter N/A if not applicable.

• Latitude: Click to enter text.

• Longitude: Click to enter text.

Provide a site drawing for the facility that shows the following:

- The boundaries of the treatment facility;
- The boundaries of the area served by the treatment facility;
- If land disposal of effluent, the boundaries of the disposal site and all storage/holding ponds; and
- If sludge disposal is authorized in the permit, the boundaries of the land application or

Provide the name **and** a description of the area served by the treatment facility. The wastewater treatment facility treats and discharges sanitary waste from offices and housing facilities located at the Pearsall Development & NexTier Oil Field Solutions Collection System Information for wastewater TPDES permits only: Provide information for each **uniquely owned** collection system, existing and new, served by this facility, including satellite collection systems. Please see the instructions for a detailed explanation and examples. **Collection System Information Collection System Name Population Served Owner Name** Owner Type **Pearsall Development Privately Owned** Seventy Seven 110 **WWTP** Land Company Choose an item. Choose an item. Choose an item. Section 4. Unbuilt Phases (Instructions Page 45) Is the application for a renewal of a permit that contains an unbuilt phase or phases? Yes 🛛 No If yes, does the existing permit contain a phase that has not been constructed within five years of being authorized by the TCEQ? Yes □ No If yes, provide a detailed discussion regarding the continued need for the unbuilt phase. Failure to provide sufficient justification may result in the Executive Director recommending denial of the unbuilt phase or phases. N/A

disposal site.

Attachment: C

| S        | ection 5. Closure Plans (Instructions Page 45)   |
|----------|--|
|          | ave any treatment units been taken out of service permanently, or will any units be taken at of service in the next five years?  |
|          | □ Yes ⊠ No   |
| Ií       | yes, was a closure plan submitted to the TCEQ?   |
|          | □ Yes □ No   |
|          | yes, provide a brief description of the closure and the date of plan approval.   |
|          | I/A  |
|          |  |
|          |  |
|          |  |
|          |  |
|          |  |
|          |  |
| C        | ction 6. Permit Specific Requirements (Instructions Page 45)   |
| A PARAME |  |
|          | r applicants with an existing permit, check the Other Requirements or Special ovisions of the permit.  |
| A        | Summary transmittal  |
|          | Have plans and specifications been approved for the existing facilities and each proposed phase?   |
|          | ⊠ Yes □ No   |
|          | If yes, provide the date(s) of approval for each phase: Click to enter text.   |
|          | Provide information, including dates, on any actions taken to meet a <i>requirement or provision</i> pertaining to the submission of a summary transmittal letter. <b>Provide a copy of</b> an approval letter from the TCEQ, if applicable. |
|          | Click to enter text.   |
|          |  |
|          |  |
|          |  |
| B.       | Buffer zones   |
|          | Have the buffer zone requirements been met?  |
|          | ⊠ Yes □ No   |
|          | Provide information below, including dates, on any actions taken to meet the conditions of the buffer zone. If available, provide any new documentation relevant to maintaining the buffer zones.  |

|         | N/A   |
|---------|---|
|         |   |
|         |   |
| i.      |   |
| C. O    | ther actions required by the current permit   |
| D<br>sı | oes the <i>Other Requirements</i> or <i>Special Provisions</i> section in the existing permit require abmission of any other information or other required actions? Examples include  |
| 11      | otification of Completion, progress reports, soil monitoring data, etc. $\square$ Yes $\boxtimes$ No  |
|         | yes, provide information below on the status of any actions taken to meet the onditions of an <i>Other Requirement</i> or <i>Special Provision</i> .  |
| (       | Click to enter text.  |
|         |   |
|         |   |
|         |   |
|         |   |
|         |   |
| D. G    | rit and grease treatment  |
| 1.      | Acceptance of grit and grease waste   |
|         | Does the facility have a grit and/or grease processing facility onsite that treats and decants or accepts transported loads of grit and grease waste that are discharged directly to the wastewater treatment plant prior to any treatment?   |
|         | □ Yes ⊠ No  |
|         | If No, stop here and continue with Subsection E. Stormwater Management.   |
| 2.      | Grit and grease processing  |
|         | Describe below how the grit and grease waste is treated at the facility. In your description, include how and where the grit and grease is introduced to the treatment works and how it is separated or processed. Provide a flow diagram showing how grit and grease is processed at the facility. |
|         | N/A   |
|         |   |
|         |   |
|         |   |
|         |   |
|         |   |
|         |   |

# 3. Grit disposal

D.

Does the facility have a Municipal Solid Waste (MSW) registration or permit for grit disposal?

|      | □ Yes ⊠ No  |                               |
|------|---|-------------------------------|
|      | If No, contact the TCEQ Municipal Solid Waste team at 512-239-2335. Note registration or permit is required for grit disposal. Grit shall not be combit treatment plant sludge. See the instruction booklet for additional informatisposal requirements and restrictions.   | ned with                      |
|      | Describe the method of grit disposal.   |                               |
|      | N/A   |                               |
|      |   |                               |
|      |   |                               |
|      |   |                               |
|      |   |                               |
| 4    | Grease and decanted liquid disposal   |                               |
|      | Note: A registration or permit is required for grease disposal. Grease shall combined with treatment plant sludge. For more information, contact the Municipal Solid Waste team at 512-239-2335.  |                               |
|      | Describe how the decant and grease are treated and disposed of after grit   | separation.                   |
|      | N/A   |                               |
|      |   |                               |
|      |   |                               |
|      |   |                               |
|      |   |                               |
|      |   |                               |
| E. S | ormwater management   |                               |
|      |   |                               |
|      | Applicability   |                               |
|      | Applicability  Does the facility have a design flow of 1.0 MGD or greater in any phase?   |                               |
|      | <ul> <li>Applicability</li> <li>Does the facility have a design flow of 1.0 MGD or greater in any phase?</li> <li>□ Yes ⋈ No</li> </ul>   | art 403?                      |
|      | <ul> <li>Applicability</li> <li>Does the facility have a design flow of 1.0 MGD or greater in any phase?</li> <li>□ Yes ⋈ No</li> <li>Does the facility have an approved pretreatment program, under 40 CFR Parameters.</li> </ul>  | art 403?                      |
|      | <ul> <li>Applicability</li> <li>Does the facility have a design flow of 1.0 MGD or greater in any phase?</li> <li>□ Yes ⋈ No</li> <li>Does the facility have an approved pretreatment program, under 40 CFR Parallel Yes ⋈ No</li> </ul>  |                               |
| 1    | <ul> <li>Applicability</li> <li>Does the facility have a design flow of 1.0 MGD or greater in any phase?</li> <li>□ Yes ⋈ No</li> <li>Does the facility have an approved pretreatment program, under 40 CFR Pa</li> <li>□ Yes ⋈ No</li> <li>If no to both of the above, then skip to Subsection F, Other Wastes Received</li> </ul>   |                               |
| 1    | <ul> <li>Applicability</li> <li>Does the facility have a design flow of 1.0 MGD or greater in any phase?</li> <li>□ Yes ⋈ No</li> <li>Does the facility have an approved pretreatment program, under 40 CFR Parallel Yes ⋈ No</li> <li>If no to both of the above, then skip to Subsection F, Other Wastes Received MSGP coverage</li> </ul>  | ed.                           |
| 1    | <ul> <li>Applicability</li> <li>Does the facility have a design flow of 1.0 MGD or greater in any phase?</li> <li>□ Yes ⋈ No</li> <li>Does the facility have an approved pretreatment program, under 40 CFR Pa</li> <li>□ Yes ⋈ No</li> <li>If no to both of the above, then skip to Subsection F, Other Wastes Received</li> </ul>   | ed.<br>Iisposal               |
| 1    | <ul> <li>Applicability</li> <li>Does the facility have a design flow of 1.0 MGD or greater in any phase?</li> <li>□ Yes ⋈ No</li> <li>Does the facility have an approved pretreatment program, under 40 CFR Parallel Yes ⋈ No</li> <li>If no to both of the above, then skip to Subsection F, Other Wastes Received MSGP coverage</li> <li>Is the stormwater runoff from the WWTP and dedicated lands for sewage design.</li> </ul>   | ed.<br>Iisposal               |
| 1    | Applicability  Does the facility have a design flow of 1.0 MGD or greater in any phase?  ☐ Yes ☒ No  Does the facility have an approved pretreatment program, under 40 CFR Pa ☐ Yes ☒ No  If no to both of the above, then skip to Subsection F, Other Wastes Receive MSGP coverage  Is the stormwater runoff from the WWTP and dedicated lands for sewage of currently permitted under the TPDES Multi-Sector General Permit (MSGP), Telephone Tel           | ed.<br>lisposal<br>'XR050000? |
| 1    | <ul> <li>Applicability</li> <li>Does the facility have a design flow of 1.0 MGD or greater in any phase?</li> <li>□ Yes ⋈ No</li> <li>Does the facility have an approved pretreatment program, under 40 CFR Paulo Yes ⋈ No</li> <li>If no to both of the above, then skip to Subsection F, Other Wastes Receive MSGP coverage</li> <li>Is the stormwater runoff from the WWTP and dedicated lands for sewage of currently permitted under the TPDES Multi-Sector General Permit (MSGP), The Section of the Section o</li></ul> | ed.<br>lisposal<br>'XR050000? |
| 1    | <ul> <li>Applicability</li> <li>Does the facility have a design flow of 1.0 MGD or greater in any phase?</li> <li>□ Yes ⋈ No</li> <li>Does the facility have an approved pretreatment program, under 40 CFR Paulo Yes ⋈ No</li> <li>If no to both of the above, then skip to Subsection F, Other Wastes Receive MSGP coverage</li> <li>Is the stormwater runoff from the WWTP and dedicated lands for sewage of currently permitted under the TPDES Multi-Sector General Permit (MSGP), The Yes ⋈ No</li> <li>If yes, please provide MSGP Authorization Number and skip to Subsection Wastes Received:</li> </ul>   | ed.<br>lisposal<br>'XR050000? |

| 3. | Conditional exclusion   |
|----|---|
|    | Alternatively, do you intend to apply for a conditional exclusion from permitting based TXR050000 (Multi Sector General Permit) Part II B.2 or TXR050000 (Multi Sector General Permit) Part V, Sector T 3(b)? |
|    | □ Yes ⊠ No  |
|    | If yes, please explain below then proceed to Subsection F, Other Wastes Received:   |
|    | N/A   |
|    |   |
| 4. | Existing coverage in individual permit  |
|    | Is your stormwater discharge currently permitted through this individual TPDES or TLAP permit?  |
|    | □ Yes ⊠ No  |
|    | <b>If yes,</b> provide a description of stormwater runoff management practices at the site that are authorized in the wastewater permit then skip to Subsection F, Other Wastes Received.                     |
|    | N/A   |
| 5. | Zero stormwater discharge   |
| 99 | Do you intend to have no discharge of stormwater via use of evaporation or other means?   |
|    | □ Yes □ No  |
|    | If yes, explain below then skip to Subsection F. Other Wastes Received.   |
|    | N/A   |
|    |   |
|    |   |
|    |   |
| Ļ  | Victor If there is a notantial to discharge any starregulator to surface victor in the state of   |
|    | Note: If there is a potential to discharge any stormwater to surface water in the state as the result of any storm event, then permit coverage is required under the MSGP or an                               |
|    |   |

Note: If there is a potential to discharge any stormwater to surface water in the state as the result of any storm event, then permit coverage is required under the MSGP or an individual discharge permit. This requirement applies to all areas of facilities with treatment plants or systems that treat, store, recycle, or reclaim domestic sewage, wastewater or sewage sludge (including dedicated lands for sewage sludge disposal located within the onsite property boundaries) that meet the applicability criteria of above. You have the option of obtaining coverage under the MSGP for direct discharges, (recommended), or obtaining coverage under this individual permit.

### 6. Request for coverage in individual permit

Are you requesting coverage of stormwater discharges associated with your treatment plant under this individual permit?

|    |             | □ Yes ⊠ No  |
|----|-------------|---|
|    |             | If yes, provide a description of stormwater runoff management practices at the site for which you are requesting authorization in this individual wastewater permit and describe whether you intend to comingle this discharge with your treated effluent or discharge it via a separate dedicated stormwater outfall. Please also indicate if you intend to divert stormwater to the treatment plant headworks and indirectly discharge it to water in the state.  |
|    |             | N/A   |
|    |             |   |
|    |             |   |
|    |             | Note: Direct stormwater discharges to waters in the state authorized through this individual permit will require the development and implementation of a stormwater pollution prevention plan (SWPPP) and will be subject to additional monitoring and reporting requirements. Indirect discharges of stormwater via headworks recycling will require compliance with all individual permit requirements including 2-hour peak flow limitations. All stormwater discharge authorization requests will require additional information during the technical review of your application. |
| F. | Di          | scharges to the Lake Houston Watershed  |
|    | Do          | oes the facility discharge in the Lake Houston watershed?   |
|    |             | □ Yes ⊠ No  |
|    | THE RESERVE | yes, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions. ick to enter text.   |
| G. | Ot          | her wastes received including sludge from other WWTPs and septic waste  |
|    | 1.          | Acceptance of sludge from other WWTPs   |
|    |             | Does or will the facility accept sludge from other treatment plants at the facility site?   |
|    |             | □ Yes ⊠ No  |
|    |             | If yes, attach sewage sludge solids management plan. See Example 5 of instructions.   |
|    |             | In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an  |
|    |             | estimate of the BOD5 concentration of the sludge, and the design BOD5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.  |
|    |             | N/A   |
|    |             |   |
|    |             | Note: Develte that accept all dee from ather westernate treatment plants may be   |
|    |             | Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.   |
|    | 2.          | Acceptance of septic waste  |
|    |             | Is the facility accepting or will it accept septic waste?   |
|    |             | □ Yes ⊠ No  |

| <b>If yes</b> , does the facility have a Type V processing unit?   |
|--|
| □ Yes □ No   |
| If yes, does the unit have a Municipal Solid Waste permit?   |
| □ Yes □ No   |
| If yes to any of the above, provide the date the plant started or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the $BOD_5$ concentration of the septic waste, and the design $BOD_5$ concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action. |
| N/A  |
| Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.  |
| <ol> <li>Acceptance of other wastes (not including septic, grease, grit, or RCRA, CERCLA or<br/>as discharged by IUs listed in Worksheet 6)</li> </ol>   |
| Is or will the facility accept wastes that are not domestic in nature excluding the categories listed above?   |
| □ Yes ⊠ No   |
| If yes, provide the date that the plant started accepting the waste, an estimate how much waste is accepted on a monthly basis (gallons or millions of gallons), a description of the entities generating the waste, and any distinguishing chemical or other physical characteristic of the waste. Also note if this information has or has not changed since the last permit action.   |
| Click to enter text.   |
|  |
| Section 7. Pollutant Analysis of Treated Effluent (Instructions Page 50)   |
| Is the facility in operation?  |
| ⊠ Yes □ No   |
| If no, this section is not applicable. Proceed to Section 8.   |

If yes, provide effluent analysis data for the listed pollutants. *Wastewater treatment facilities* complete Table 1.0(2). *Water treatment facilities* discharging filter backwash water, complete Table 1.0(3). Provide copies of the laboratory results sheets. **These tables are not applicable for a minor amendment without renewal.** See the instructions for guidance.

Note: The sample date must be within 1 year of application submission.

Table 1.0(2) - Pollutant Analysis for Wastewater Treatment Facilities

| Pollutant                               | Average<br>Conc. | Max<br>Conc. | No. of<br>Samples | Sample<br>Type | Sample<br>Date/Time |
|---|------------------|--------------|-------------------|----------------|---------------------|
| CBOD <sub>5</sub> , mg/l                | <3               |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| Total Suspended Solids, mg/l            | 2                |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| Ammonia Nitrogen, mg/l                  | 1.8              |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| Nitrate Nitrogen, mg/l                  | 101.9            |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| Total Kjeldahl Nitrogen, mg/l           | 4                |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| Sulfate, mg/l                           | 69               |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| Chloride, mg/l                          | 138              |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| Total Phosphorus, mg/l                  | 27.9             |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| pH, standard units                      | 5.3              |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| Dissolved Oxygen*, mg/l                 | 3.8              |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| Chlorine Residual, mg/l                 | 7.4              |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| E.coli (CFU/100ml) freshwater           | 0                |              | 1                 | Grab           | 3/7/2025<br>7:25    |
| Entercocci (CFU/100ml)<br>saltwater     | N/A              | N/A          | N/A               | N/A            | N/A                 |
| Total Dissolved Solids, mg/l            | 776              | _            | 1                 | Grab           | 3/7/2025<br>6:30    |
| Electrical Conductivity,<br>µmohs/cm, † | N/A              | N/A          | N/A               | N/A            | N/A                 |
| Oil & Grease, mg/l                      | Pending          |              | 1                 | Grab           | 3/7/2025<br>6:30    |
| Alkalinity (CaCO <sub>3</sub> )*, mg/l  | Pending          |              | 1                 | Grab           | 3/7/2025<br>6:30    |

<sup>\*</sup>TPDES permits only †TLAP permits only

Table 1.0(3) - Pollutant Analysis for Water Treatment Facilities

| Pollutant                             | Average<br>Conc. | Max<br>Conc. | No. of<br>Samples | Sample<br>Type | Sample<br>Date/Time |
|---------------------------------------|------------------|--------------|-------------------|----------------|---------------------|
| Total Suspended Solids, mg/l          |                  |              |                   |                |                     |
| Total Dissolved Solids, mg/l          |                  |              |                   |                |                     |
| pH, standard units                    |                  |              |                   |                |                     |
| Fluoride, mg/l                        |                  |              |                   |                |                     |
| Aluminum, mg/l                        |                  | 7            |                   |                |                     |
| Alkalinity (CaCO <sub>3</sub> ), mg/l |                  |              |                   |                |                     |

# Section 8. Facility Operator (Instructions Page 50)

Facility Operator Name: Jason Smith

Facility Operator's License Classification and Level: Class C

Facility Operator's License Number: WW0033076

# Section 9. Sludge and Biosolids Management and Disposal (Instructions Page 51)

| A. | ww   | TP's Biosolids Management Facility Type           |  |  |  |  |
|----|--|---|--|--|--|--|
|    | Che  | ck all that apply. See instructions for guidance  |  |  |  |  |
|    |  | Design flow>= 1 MGD                               |  |  |  |  |
|    |  | Serves >= 10,000 people                           |  |  |  |  |
|    | Class I Sludge Management Facility (per 40 CFR § 503.9 |   |  |  |  |  |
|    | □ Biosolids generator                                  |   |  |  |  |  |
|    |  | Biosolids end user – land application (onsite)    |  |  |  |  |
|    |  | Biosolids end user – surface disposal (onsite)    |  |  |  |  |
|    |  | Biosolids end user - incinerator (onsite)         |  |  |  |  |
| B. | ww   | TP's Biosolids Treatment Process                  |  |  |  |  |
|    | Che  | ck all that apply. See instructions for guidance. |  |  |  |  |
|    |  | Aerobic Digestion                                 |  |  |  |  |
|    |  | Air Drying (or sludge drying beds)                |  |  |  |  |
|    |  | Lower Temperature Composting                      |  |  |  |  |
|    |  | Lime Stabilization                                |  |  |  |  |
|    |  | Higher Temperature Composting                     |  |  |  |  |
|    |  | Heat Drying                                       |  |  |  |  |
|    |  | Thermophilic Aerobic Digestion                    |  |  |  |  |
|    |  | Beta Ray Irradiation                              |  |  |  |  |

|                | Gamma Ray Irradiation   |
|----------------|---|
|                | Pasteurization  |
|                | Preliminary Operation (e.g. grinding, de-gritting, blending)  |
|                | Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)   |
|                | Sludge Lagoon   |
|                | Temporary Storage (< 2 years)   |
|                | Long Term Storage (>= 2 years)  |
|                | Methane or Biogas Recovery  |
| $\boxtimes$    | Other Treatment Process: Sent to another WWTP   |
| Bios           | olids Management  |
| mana<br>all bi | ide information on the <i>intended</i> biosolids management practice. Do not enter every agement practice that you want authorized in the permit, as the permit will authorize osolids management practices listed in the instructions. Rather indicate the agement practice the facility plans to use. |

## **Biosolids Management**

C.

| Management<br>Practice | Handler or<br>Preparer<br>Type | Bulk or Bag<br>Container | Amount (dry<br>metric tons) | Pathogen<br>Reduction<br>Options | Vector<br>Attraction<br>Reduction<br>Option |
|------------------------|--------------------------------|--------------------------|-----------------------------|----------------------------------|---|
| Other                  | Choose an item.                | Choose an item.          |                             | Choose an item.                  | Choose an item.                             |
| Choose an item.        | Choose an item.                | Choose an item.          |                             | Choose an item.                  | Choose an item.                             |
| Choose an item.        | Choose an item.                | Choose an item.          |                             | Choose an item.                  | Choose an item.                             |

If "Other" is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): <u>transported to another WWTP</u>

semi-solid □

solid

### D. Disposal site

Disposal site name: <u>La Salle Oilfield Services & Eagle Ford Wastewater</u>
TCEQ permit or registration number: <u>WQ0015084001 & WQ0010142001</u>

County where disposal site is located: La Salle & Atascosa

| 17 | T    |        | 4   |       | ]            |
|----|------|--------|-----|-------|--------------|
| E. | Tran | sporta | uon | metho | $\mathbf{a}$ |

Liquid ⊠

| Method of transportation (t  | ruck, train,  | pipe, | other): | <b>Truck</b> |
|--|---------------|-------|---------|--------------|
| Name of the hauler: Chavera  | <u>Septic</u> |       |         |              |
| Hauler registration number:  | 24486         |       |         |              |
| Sludge is transported as a:  |               |       |         |              |
| and the second s |               |       |         |              |

semi-liquid □

# Section 10. Permit Authorization for Sewage Sludge Disposal (Instructions Page 53)

| A.  | Bene   | ficial                    | use a       | uthorizatio                  | n                  |             |          |             |             |                 |
|-----|--|---------------------------|-------------|------------------------------|--------------------|-------------|----------|-------------|-------------|-----------------|
|     | Does the existing permit include authorization for land application of sewage sludge for beneficial use?   |                           |             |                              |                    |             |          |             |             |                 |
|     |  | Yes                       | $\boxtimes$ | No                           |                    |             |          |             |             |                 |
|     |  | <b>s,</b> are<br>ficial ι |             | equesting to                 | continue this a    | authoriza   | tion to  | land ap     | ply sewa    | age sludge for  |
|     |  | Yes                       |             | No                           |                    |             |          |             |             |                 |
|     | If yes, is the completed Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451) attached to this permit application (see the instructions for details)?   |                           |             |                              |                    |             |          |             |             |                 |
|     |  | Yes                       |             | No                           |                    |             |          |             |             |                 |
| B.  | Slud   | ge pro                    | cessiı      | ng authoriz                  | ation              |             |          |             |             |                 |
|     |  |                           |             | g permit ind<br>sal options? | clude authorizat   | ion for a   | ny of t  | he follov   | ving slu    | lge processing, |
|     | Sl   | udge (                    | Comp        | osting                       |                    |             | Yes      | $\boxtimes$ | No          |                 |
|     | M  | arketi                    | ng and      | d Distributi                 | on of sludge       |             | Yes      | $\boxtimes$ | No          |                 |
|     | Sl   | udge S                    | Surfac      | e Disposal                   | or Sludge Mono     | fill 🗆      | Yes      | $\boxtimes$ | No          |                 |
|     | Te   | empor                     | ary st      | orage in slu                 | ıdge lagoons       |             | Yes      | $\boxtimes$ | No          |                 |
|     | If yes to any of the above sludge options and the applicant is requesting to continue this authorization, is the completed <b>Domestic Wastewater Permit Application: Sewage Sludge Technical Report (TCEQ Form No. 10056)</b> attached to this permit application?  |                           |             |                              |                    |             |          |             |             |                 |
|     |  | Yes                       | $\boxtimes$ | No                           |                    |             |          |             |             |                 |
| Sec | ction  | 111.                      | Sev         | vage Sluc                    | lge Lagoons        | (Instru     | ction    | is Page     | 53)         | A STATE OF      |
|     |  |                           |             |                              | e sludge lagoon    |             |          | 0           |             |                 |
|     | and the same of th | es ⊠                      |             | Ü                            | gg                 |             |          |             |             |                 |
|     | SOLAN  |                           |             |                              | of this section. I | f no, pro   | ceed to  | Section     | 12.         |                 |
|     |  | ion in                    |             |                              |                    |             |          |             |             |                 |
|     |  |                           |             |                              | ired to be subm    | nitted as i | part of  | the ann     | lication    | For each man    |
|     |  |                           |             | hment Nun                    |                    | ntted do j  | , m ( 01 | the upp     | iicu (1011i | Tor each map,   |
|     | •  | Origi                     | nal Ge      | eneral High                  | way (County) Ma    | ap:         |          |             |             |                 |
|     |  | Attac                     | hmer        | nt: Click to                 | enter text.        |             |          |             |             |                 |
|     | •  | USDA                      | Natu        | ral Resour                   | es Conservation    | n Service   | Soil M   | ap:         |             |                 |
|     |  | Attac                     | hmen        | t: Click to                  | enter text.        |             |          |             |             |                 |
|     | •  | Feder                     | al Em       | ergency Ma                   | nagement Map:      |             |          |             |             |                 |

Attachment: Click to enter text. Site map: Attachment: Click to enter text. Discuss in a description if any of the following exist within the lagoon area. Check all that apply. Overlap a designated 100-year frequency flood plain Soils with flooding classification 8 Overlap an unstable area Wetlands Located less than 60 meters from a fault None of the above Attachment: Click to enter text. If a portion of the lagoon(s) is located within the 100-year frequency flood plain, provide the protective measures to be utilized including type and size of protective structures: N/A

### B. Temporary storage information

Provide the results for the pollutant screening of sludge lagoons. These results are in addition to pollutant results in *Section 7 of Technical Report 1.0.* 

Nitrate Nitrogen, mg/kg: Click to enter text.

Total Kjeldahl Nitrogen, mg/kg: Click to enter text.

Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: Click to enter text.

Phosphorus, mg/kg: Click to enter text.

Potassium, mg/kg: Click to enter text.

pH, standard units: Click to enter text.

Ammonia Nitrogen mg/kg: Click to enter text.

Arsenic: Click to enter text.

Cadmium: Click to enter text.

Chromium: Click to enter text.

Copper: Click to enter text.

Lead: Click to enter text.

Mercury: Click to enter text.

Molybdenum: Click to enter text.

Nickel: <u>Click to enter text.</u> Selenium: <u>Click to enter text.</u> Zinc: Click to enter text.

Total PCBs: Click to enter text.

Provide the following information:

Volume and frequency of sludge to the lagoon(s): Click to enter text.

Total dry tons stored in the lagoons(s) per 365-day period: Click to enter text.

Total dry tons stored in the lagoons(s) over the life of the unit: Click to enter text.

#### C. Liner information

| Does the active/proposed sludge lagoon(s   | s) have a line | er with a maxin | num hydraulic |
|--|----------------|-----------------|---------------|
| conductivity of 1x10 <sup>-7</sup> cm/sec? |                | *               |               |

Yes 🖾 No

If yes, describe the liner below. Please note that a liner is required.

| N/A |  |
|-----|--|
|     |  |
|     |  |
|     |  |
|     |  |
|     |  |

### D. Site development plan

Provide a detailed description of the methods used to deposit sludge in the lagoon(s):

| N/A |  |  |                |
|-----|--|--|----------------|
|     |  |  |                |
| L.  |  |  |                |
|     |  |  |                |
|     |  |  |                |
|     |  |  | 10.7 m y 7.4 m |

Attach the following documents to the application.

Plan view and cross-section of the sludge lagoon(s)

Attachment: Click to enter text.

Copy of the closure plan

Attachment: Click to enter text.

Copy of deed recordation for the site

Attachment: Click to enter text.

Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons

Attachment: Click to enter text.

Description of the method of controlling infiltration of groundwater and surface water from entering the site

Attachment: Click to enter text.

Procedures to prevent the occurrence of nuisance conditions

| E.          | Groundwater monitoring  |
|-------------|---|
|             | Is groundwater monitoring currently conducted at this site, or are any wells available for groundwater monitoring, or are groundwater monitoring data otherwise available for the sludge lagoon(s)?           |
|             | □ Yes □ No  |
|             | If groundwater monitoring data are available, provide a copy. Provide a profile of soil types encountered down to the groundwater table and the depth to the shallowest groundwater as a separate attachment. |
|             | Attachment: Click to enter text.  |
| Se          | ction 12. Authorizations/Compliance/Enforcement (Instructions<br>Page 55)   |
| A.          | Additional authorizations   |
|             | Does the permittee have additional authorizations for this facility, such as reuse authorization, sludge permit, etc?   |
|             | □ Yes ⊠ No  |
|             | If yes, provide the TCEQ authorization number and description of the authorization:   |
| Cl          | ick to enter text.  |
| <b>B.</b> 1 | Permittee enforcement status  |
| ]           | Is the permittee currently under enforcement for this facility?   |
|             | □ Yes ⊠ No  |
|             | Is the permittee required to meet an implementation schedule for compliance or enforcement?   |
|             | □ Yes ⊠ No  |
|             | If yes to either question, provide a brief summary of the enforcement, the implementation schedule, and the current status:   |

Attachment: Click to enter text.

| Click to enter text. |  |  |
|----------------------|--|--|
|                      |  |  |
|                      |  |  |
|                      |  |  |
|                      |  |  |

# **Section 13. RCRA/CERCLA Wastes (Instructions Page 55)**

#### A. RCRA hazardous wastes

Has the facility received in the past three years, does it currently receive, or will it receive RCRA hazardous waste?

□ Yes ⊠ No

### B. Remediation activity wastewater

Has the facility received in the past three years, does it currently receive, or will it receive CERCLA wastewater, RCRA remediation/corrective action wastewater or other remediation activity wastewater?

□ Yes ⊠ No

#### C. Details about wastes received

**If yes** to either Subsection A or B above, provide detailed information concerning these wastes with the application.

Attachment: Click to enter text.

# Section 14. Laboratory Accreditation (Instructions Page 56)

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:
  - o periodically inspected by the TCEQ; or
  - o located in another state and is accredited or inspected by that state; or
  - o 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: Seth D. Wexler

Title: Senior VP, General Counsel and Secretary

| Signature: |  |
|------------|--|
| Date:      |  |

# DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

| Is there a surface water intake for domestic drinking water supply located within 5 in downstream from the point or proposed point of discharge?  ☐ Yes ☑ No  If no, proceed it Section 2. If yes, provide the following:  Owner of the drinking water supply: Click to enter text.  Distance and direction to the intake: Click to enter text.  Attach a USGS map that identifies the location of the intake.  Attachment: Click to enter text.  Section 2. Discharge into Tidally Affected Waters (Instructions 64)  Does the facility discharge into tidally affected waters?  ☐ Yes ☑ No |             |
|--|-------------|
| If no, proceed it Section 2. If yes, provide the following:  Owner of the drinking water supply: Click to enter text.  Distance and direction to the intake: Click to enter text.  Attach a USGS map that identifies the location of the intake.  Attachment: Click to enter text.  Section 2. Discharge into Tidally Affected Waters (Instructions 64)  Does the facility discharge into tidally affected waters?   | <b>Page</b> |
| Owner of the drinking water supply: Click to enter text.  Distance and direction to the intake: Click to enter text.  Attach a USGS map that identifies the location of the intake.  Attachment: Click to enter text.  Section 2. Discharge into Tidally Affected Waters (Instructions 64)  Does the facility discharge into tidally affected waters?  | Page        |
| Distance and direction to the intake: Click to enter text.  Attach a USGS map that identifies the location of the intake.  Attachment: Click to enter text.  Section 2. Discharge into Tidally Affected Waters (Instructions 64)  Does the facility discharge into tidally affected waters?  | . Page      |
| Attach a USGS map that identifies the location of the intake.  Attachment: Click to enter text.  Section 2. Discharge into Tidally Affected Waters (Instructions 64)  Does the facility discharge into tidally affected waters?  | : Page      |
| Attachment: Click to enter text.  Section 2. Discharge into Tidally Affected Waters (Instructions 64)  Does the facility discharge into tidally affected waters?   | Page        |
| Section 2. Discharge into Tidally Affected Waters (Instructions 64)  Does the facility discharge into tidally affected waters?   | : Page      |
| Does the facility discharge into tidally affected waters?  | Page        |
| Does the facility discharge into tidally affected waters?  |             |
| SOUTH SOUTH  |             |
| □ Yes ⊠ No   |             |
|  |             |
| If <b>no</b> , proceed to Section 3. <b>If</b> yes, complete the remainder of this section. If no, proceed section 3.  | eed to      |
| A. Receiving water outfall   |             |
| Width of the receiving water at the outfall, in feet: Click to enter text.   |             |
| B. Oyster waters   |             |
| Are there oyster waters in the vicinity of the discharge?  |             |
| □ Yes ⊠ No   |             |
| If yes, provide the distance and direction from outfall(s).  |             |
| Click to enter text.   |             |
|  |             |
| C. Sea grasses   |             |
| Are there any sea grasses within the vicinity of the point of discharge?   |             |
| □ Yes □ No   |             |
|  |             |
| If yes, provide the distance and direction from the outfall(s).  Click to enter text.  |             |

# Section 3. Classified Segments (Instructions Page 64) Is the discharge directly into (or within 300 feet of) a classified segment? Yes 🛛 No If yes, this Worksheet is complete. **If no**, complete Sections 4 and 5 of this Worksheet. Section 4. Description of Immediate Receiving Waters (Instructions Page 65) Name of the immediate receiving waters: Unnamed tributary: thence to Buck Creek thence to Frio River Above Choke Canyon Reservoir in Segment No.2117 of Nueces River Basin A. Receiving water type Identify the appropriate description of the receiving waters. X Stream Freshwater Swamp or Marsh Lake or Pond Surface area, in acres: Click to enter text. Average depth of the entire water body, in feet: Click to enter text. Average depth of water body within a 500-foot radius of discharge point, in feet: Click to enter text. Man-made Channel or Ditch Open Bay Tidal Stream, Bayou, or Marsh Other, specify: Click to enter text. B. Flow characteristics If a stream, man-made channel or ditch was checked above, provide the following. For existing discharges, check one of the following that best characterizes the area upstream of the discharge. For new discharges, characterize the area *downstream* of the discharge (check one). Intermittent - dry for at least one week during most years Intermittent with Perennial Pools - enduring pools with sufficient habitat to maintain significant aquatic life uses Perennial - normally flowing Check the method used to characterize the area upstream (or downstream for new dischargers). USGS flow records

Historical observation by adjacent landowners

Personal observation

 $\boxtimes$ 

 $\boxtimes$ 

|     |   | Other, specify: Click to enter text.                                      |        |  |  |  |
|-----|---|---|--------|--|--|--|
| C.  | Downs   | stream perennial confluences  |        |  |  |  |
|     |   | e names of all perennial streams th<br>tream of the discharge point.      | at jo  | in the receiving water within three miles                    |  |  |
|     | B <u>uck</u> (  | Creek   |        |  |  |  |
|     |   |   |        |  |  |  |
|     |   |   |        |  |  |  |
|     |   |   |        |  |  |  |
| D.  |   | stream characteristics  |        |  |  |  |
|     |   | receiving water characteristics cha<br>rge (e.g., natural or man-made dam |        | within three miles downstream of the nds, reservoirs, etc.)? |  |  |
|     | □ Yes ⊠ No  |   |        |  |  |  |
|     | If yes,   | discuss how.  |        |  |  |  |
|     | Click t   | o enter text.   |        |  |  |  |
|     |   |   |        |  |  |  |
|     |   |   |        |  |  |  |
|     |   |   |        |  |  |  |
| E.  | Norma   | l dry weather characteristics   |        |  |  |  |
|     | Provide   | general observations of the water   | body   | during normal dry weather conditions.                        |  |  |
|     | Dry wi  | th intermittent pools   |        |  |  |  |
|     |   |   |        |  |  |  |
|     |   |   |        |  |  |  |
|     |   |   |        |  |  |  |
|     | Date and time of observation: <u>Click to enter text.</u> |   |        |  |  |  |
|     | Was the   | e water body influenced by stormw   | ater : | runoff during observations?                                  |  |  |
|     |   | Yes ⊠ No  |        |  |  |  |
| Sec | ction !   | 5. General Characteristics<br>Page 66)                                    | s of   | the Waterbody (Instructions                                  |  |  |
| Α.  | Upstrea   | ım influences   |        |  |  |  |
|     | s the in  |   |        | he discharge or proposed discharge site nat apply.           |  |  |
|     |   | Oil field activities  |        | Urban runoff   |  |  |
|     |   | Upstream discharges   |        | Agricultural runoff  |  |  |
|     |   | Septic tanks  |        | Other(s), specify: Click to enter text.                      |  |  |

| B. | Waterl  | rbody uses   |             |  |  |  |
|----|---|--|-------------|--|--|--|
|    | Observ  | ved or evidences of the following use  | es. Cl      | heck all that apply.                     |  |  |
|    |   | Livestock watering   |             | Contact recreation                       |  |  |
|    |   | Irrigation withdrawal  |             | Non-contact recreation                   |  |  |
|    |   | Fishing  |             | Navigation                               |  |  |
|    |   | Domestic water supply  |             | Industrial water supply                  |  |  |
|    |   | Park activities  | $\boxtimes$ | Other(s), specify: Click to enter text.  |  |  |
| C. | 2. Waterbody aesthetics   |  |             |  |  |  |
|    | Check one of the following that best describes the aesthetics of the receiving water and the surrounding area.                      |  |             |  |  |  |
|    |   | ☐ Wilderness: outstanding natural beauty; usually wooded or unpastured area; water clarity exceptional |             |  |  |  |
|    | Natural Area: trees and/or native vegetation; some development evident (from fields, pastures, dwellings); water clarity discolored |  |             |  |  |  |
|    | and the second  | Common Setting: not offensive; devor turbid  | elop        | ed but uncluttered; water may be colored |  |  |
|    |   | Offensive: stream does not enhance dumping areas; water discolored                                     | e aes       | thetics; cluttered; highly developed;    |  |  |

# Section 14. Laboratory Accreditation (Instructions Page 56)

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:
  - o periodically inspected by the TCEQ; or
  - o located in another state and is accredited or inspected by that state; or
  - o performing work for another company with a unit located in the same site; or
  - o 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.

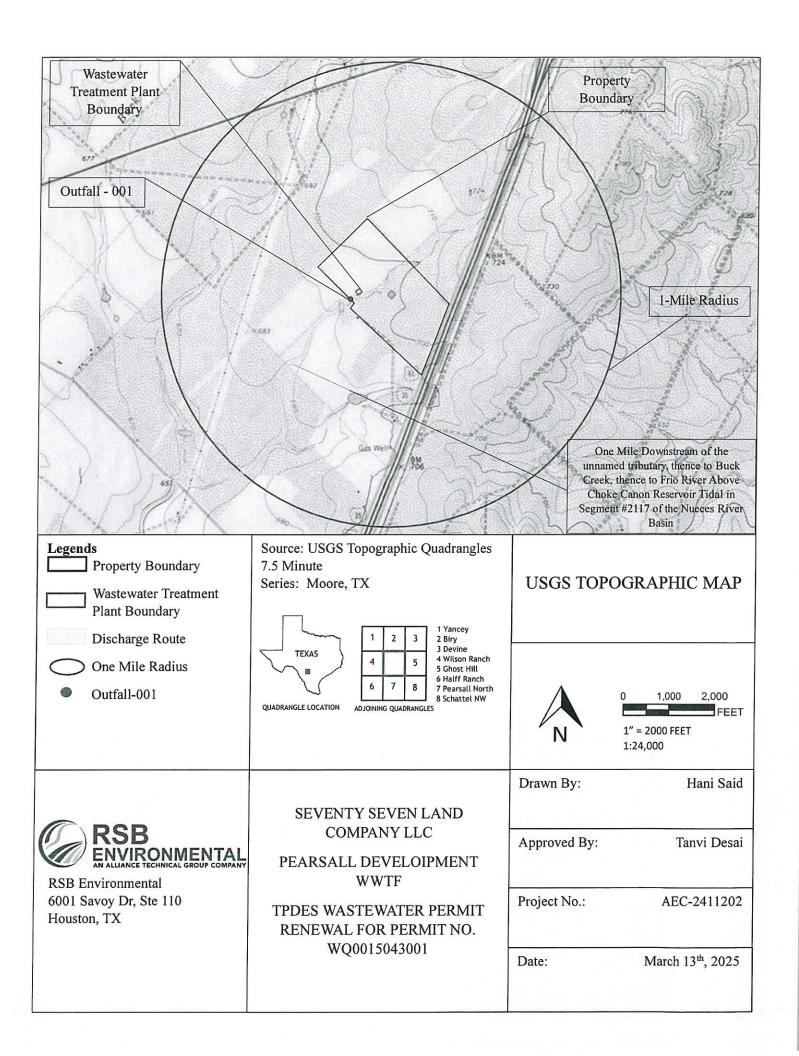
The following certification statement shall be signed and submitted with every application. See the Signature Page section in the Instructions, for a list of designated representatives who may sign the certification.

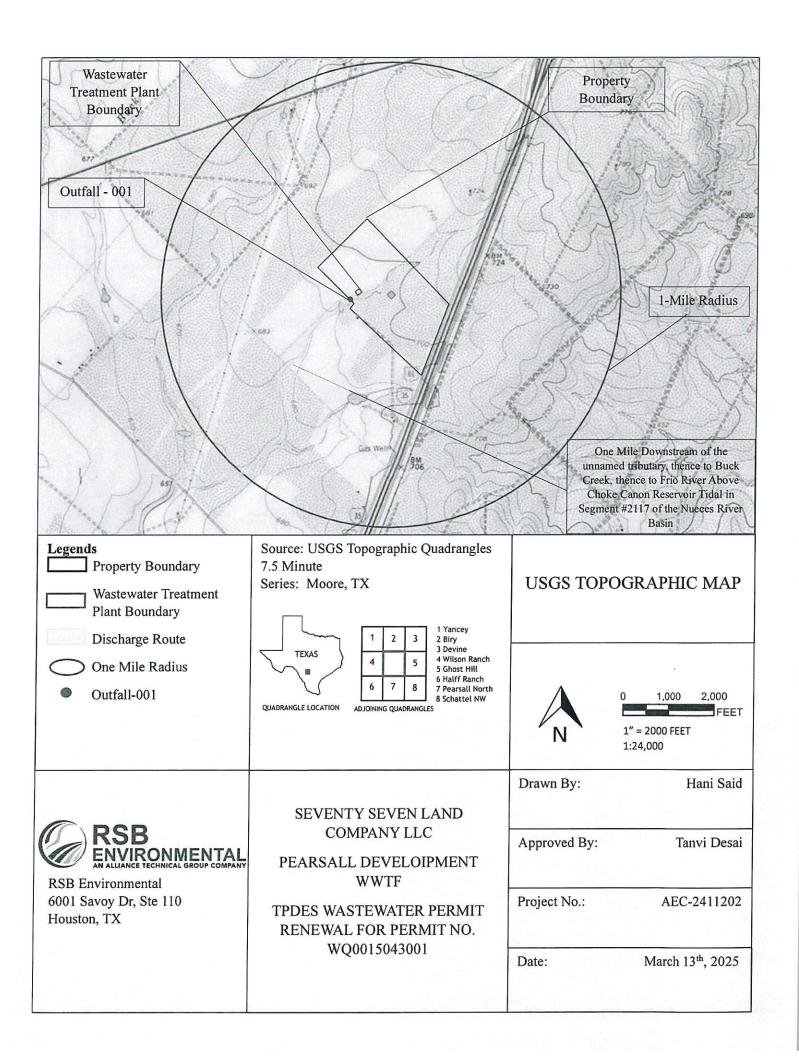
#### CERTIFICATION:

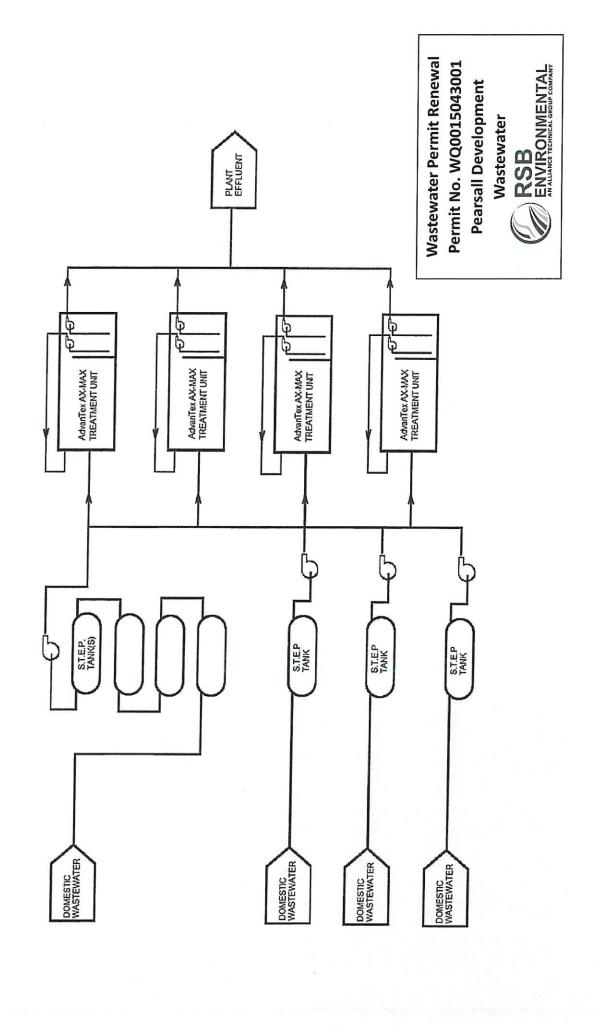
I certify that all laboratory tests submitted with this application meet the requirements of 30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification. Printed Name: Charles Wallquer Env. Sewice Tre.
Title: fresident/CEO- Wallque Los Labratoria

Signature:

Date: \_\_\_\_\_







# 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:Rer  | iewalMajor Am   | nendmentMinor AmendmentNew   |
| County:   |   | _ Segment Number:  |
| Admin Complete Date:  |   |  |
| Agency Receiving SPIF:  |   |  |
| Texas Historical Co   | mmission  | U.S. Fish and Wildlife   |
| Texas Parks and W   | ildlife Department  | U.S. Army Corps of Engineers   |
|   | 100   | s only. (Instructions, Page 53)  |
| our agreement with EPA. If a  | any of the items are  | EQ will mail a copy to each agency as required by not completely addressed or further information ormation before issuing the permit. Address  |
| attachment for this form se<br>application will not be decla<br>completed in its entirety inc | parately from the Ad<br>red administratively<br>rluding all attachmen<br>r Quality Division's A | ne permit application form. Provide each lministrative Report of the application. The complete without this SPIF form being ats. Questions or comments concerning this form Application Review and Processing Team by one at (512) 239-4671. |
| The following applies to all  | applications:   |  |
| 1. Permittee: <u>Seventy Seven</u>  | Land Company LLC  |  |
| Permit No. WQ00 <u>150430</u>   | <u>)01</u>  | EPA ID No. TX <u>0133621</u>   |
| and county):  |   | ion that includes street/highway, city/vicinity,   |
| 9021 Interstate 35 Fron   | tage Road, Pearsall, I  | Frio County, TX 78057  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |

|      | answ   | er specific questions about the property.   |  |  |  |  |  |  |
|------|--|---|--|--|--|--|--|--|
|      | Prefix   | z (Mr., Ms., Miss): <u>Mr.</u>  |  |  |  |  |  |  |
|      | First and Last Name: <u>Les Teague</u>   |   |  |  |  |  |  |  |
|      | Crede  | ential (P.E, P.G., Ph.D., etc.):  |  |  |  |  |  |  |
|      | Title: <u>HSE Manager</u>  |   |  |  |  |  |  |  |
|      | Mailir   | ng Address: <u>3990 Rogerdale,</u>  |  |  |  |  |  |  |
|      | City, State, Zip Code: <u>Houston, TX 77042</u>  |   |  |  |  |  |  |  |
|      | Phone No.: <u>281-731-6469</u> Ext.: Fax No.:  |   |  |  |  |  |  |  |
|      | E-mai  | l Address: <u>Les.Teague@NexTierOFS.com</u>   |  |  |  |  |  |  |
| 2.   | List th  | ne county in which the facility is located: <u>Frio</u>   |  |  |  |  |  |  |
| 3.   | please   | property is publicly owned and the owner is different than the permittee/applicant, e list the owner of the property.                           |  |  |  |  |  |  |
|      | N/A  |   |  |  |  |  |  |  |
|      |  |   |  |  |  |  |  |  |
|      |  |   |  |  |  |  |  |  |
| 4.   | Provid   | le a description of the effluent discharge route. The discharge route must follow the flow  |  |  |  |  |  |  |
| 4.   | of effluent from the point of discharge to the nearest major watercourse (from the point of  |   |  |  |  |  |  |  |
|      |  | arge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify   |  |  |  |  |  |  |
|      |  | assified segment number.  |  |  |  |  |  |  |
|      |  | outfall to unnamed tributary; thence to Buck Creek; thence to Frio River Above Choke on Reservoir in Segment No. 2117 of the Nueces River 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). |   |  |  |  |  |  |  |
|      | Provid   | e original photographs of any structures 50 years or older on the property.   |  |  |  |  |  |  |
|      | Does y   | our 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   |  |  |  |  |  |  |
| TCE  |  |   |  |  |  |  |  |  |
| Wast | Page 2 of 3 Wastewater Individual Permit Application, Supplemental Permit Information Form (SPIF)  |   |  |  |  |  |  |  |

Provide the name, address, phone and fax number of an individual that can be contacted to

| 1. List proposed construction impact (surface acres to be impacted, depth of excavation, sea of caves, or other karst features):    N/A   |    | ☐ Disturbance of vegetation or wetlands   |
|---|----|---|
| 2. Describe existing disturbances, vegetation, and land use:  N/A  THE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJO AMENDMENTS TO TPDES PERMITS  3. List construction dates of all buildings and structures on the property: | 1. |   |
| 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:   |    | N/A   |
| 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:   | 2. | Describe existing disturbances, vegetation, and land use:                             |
| AMENDMENTS TO TPDES PERMITS  3. List construction dates of all buildings and structures on the property:  |    |   |
|   |    |   |
| 4. Provide a brief history of the property, and name of the architect/builder, if known.  | 3. | List construction dates of all buildings and structures on the property:              |
| 4. Provide a brief history of the property, and name of the architect/builder, if known.  |    |   |
|   | 4. | Provide a brief history of the property, and name of the architect/builder, if known. |
|   |    |   |

This attachment is not applicable for this wastewater renewal application.

WATER QUALITY DIVISION MAR 2 4 2025

CER HEIED WA

45 TZE4 2TE2 0225 0T20 6856

TCEQ

P.O. Box 13087 Application and Review Processing Team (mc 1418) water Quality Division

Austin, TX 78711-3087

RECEIVED

TCEQ MAIL CENTER

Water Quality Applications Team

RECEIVED

### **Erwin Madrid**

From: Erwin Madrid

**Sent:** Friday, April 25, 2025 2:52 PM **To:** hani.said@alliancetg.com

**Cc:** Candice Calhoun

**Subject:** Application for Permit No. WQ0015043001 – Notice of Deficiency 30-Day Will Return

Letter

Attachments: WQ0015043001\_Will Return Ltr.pdf

**Importance:** High

Dear applicant,

The attached Notice of Deficiency 30-Day Will Return Letter was mailed on <u>April 25, 2025</u>, requesting additional information needed to declare the application administratively complete. Please mail an original and two copies (with a cover letter) of the complete response by <u>May 25, 2025</u>.

Regards,

Erwin Madrid
Team Lead
ARP Team | Water Quality Division
512-239-2191
Texas Commission on Environmental Quality



Please consider whether it is necessary to print this e-mail.

### **Candice Calhoun**

From: Hani Said <Hani.Said@AllianceTG.com>
Sent: Thursday, May 8, 2025 12:24 PM

**To:** Candice Calhoun

Subject: Re: Application to Renew Permit No. WQ0015043001 - Notice of Deficiency

**Attachments:** Municipal Discharge Renewal Spanish NORI.docx

Good day Candice,

I sincerely apologize for the delay in getting back to you.

The portion of the NORI is approved. Kindly find attached the Spanish NORI.

Thank you, **Hani Said**Environmental Scientist II



Corporate Office: 6001 Savoy Dr., Ste. 110

Houston, Texas 77036 Office: 832.384.9475 Cell: 832.374.6758

From: Candice Calhoun < Candice. Calhoun@tceq.texas.gov>

**Sent:** Thursday, April 17, 2025 3:26 PM **To:** Hani Said < Hani.Said@AllianceTG.com>

Subject: RE: Application to Renew Permit No. WQ0015043001 - Notice of Deficiency

EXTERNAL EMAIL - This email was sent by a person from outside your organization. Exercise caution when clicking links, opening attachments or taking further action, before validating its authenticity.

**Secured by Check Point** 

Good afternoon, Hani,

The following information is still needed in order for me to declare the application administratively complete.

1. The following is a portion of the NORI which contains information relevant to your application. Please read it carefully and indicate if it contains any errors or omissions.

The complete notice will be sent to you once the application is declared administratively complete.

APPLICATION. Seventy Seven Land Company LLC. 10713 West Sam Houston Parkway North, Suite 800, Houston, Texas 77064, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0015043001 (EPA I.D. No. TX0133621) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 24,000 gallons per day. The domestic wastewater treatment facility is located at 9021 North Interstate 35, in Frio County, Texas 78057. The discharge route is from the plant site to an unnamed tributary; thence to Buck Creek; thence to the Frio River Above Choke Canyon Reservoir. TCEQ received this application on March 21, 2025. The permit application will be available for viewing and copying at Pearsall Public Library, 200 East Trinity Street, Pearsall, in Frio 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/pendi ng-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=-99.060277,29.010833&level=18

Further information may also be obtained from Seventy Seven Land Company LLC at the address stated above or by calling Mr. Les Teague, NexTier Completion Solutions, at 281-731-6469.

2. The application indicates that public notices in Spanish are required. After confirming the portion of the NORI above does not contain any errors or omissions, please use the attached template to translate the NORI into Spanish. Only the first and last paragraphs

are unique to this application and require translation. Please provide the translated Spanish NORI in a Microsoft Word document.

Please provide a complete response no later than April 24, 2025. Also, please let me know if you have any questions.

## Regards,



### Candice Courville

License & Permit Specialist ARP Team | Water Quality Division Texas Commission on Environmental Quality 512-239-4312

candice.calhoun@tceq.texas.gov

How is our customer service? Fill out our online customer satisfaction survey at <a href="https://www.tceq.texas.gov/customersurvey">www.tceq.texas.gov/customersurvey</a>

From: Candice Calhoun

**Sent:** Tuesday, March 25, 2025 2:59 PM **To:** Hani Said Hani.Said@AllianceTG.com

Subject: Application to Renew Permit No. WQ0015043001 - Notice of Deficiency

Importance: High

Good afternoon, Mr. Said.

The attached Notice of Deficiency (NOD) letter dated <u>March 25, 2025</u>, requests additional information needed to declare the application administratively complete. Please send complete response no later than <u>April 8, 2025</u>.

Please let me know if you have any questions.

# Regards,



### Candice Courville

License & Permit Specialist ARP Team | Water Quality Division Texas Commission on Environmental Quality 512-239-4312

candice.calhoun@tceq.texas.gov

How is our customer service? Fill out our online customer satisfaction survey at <a href="https://www.tceq.texas.gov/customersurvey">www.tceq.texas.gov/customersurvey</a>

# 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:RenewalMajor Amenda  | ment Minor Amendment New   |
| County: Seg   |  |
| 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 on   | <u>ly.</u> (Instructions, Page 53)   |
| Complete this form as a separate document. TCEQ wour agreement with EPA. If any of the items are not one is needed, we will contact you to provide the informate.   | completely addressed or further information  |
| Do not refer to your response to any item in the post<br>attachment for this form separately from the Admin<br>application will not be declared administratively con<br>completed in its entirety including all attachments. Of<br>may be directed to the Water Quality Division's Appl<br>email at WO-ARPTeam@tceq.texas.gov or by phone a | istrative Report of the application. The application. The applete without this SPIF form being Questions or comments concerning this form lication Review and Processing Team by |
| The following applies to all applications:  |  |
| 1. Permittee: <u>Seventy Seven Land Company LLC</u>   |  |
| Permit No. WQ00 <u>15043001</u>   | EPA ID No. TX <u>0133621</u>   |
| Address of the project (or a location description and county):  | that includes street/highway, city/vicinity,   |
| 9021 Interstate 35 Frontage Road, Pearsall, Frio  | County, TX 78057   |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |

|                 | le the name, address, phone and fax number of an individual that can be contacted to er specific questions about the property.  |
|-----------------|---|
| Prefix          | (Mr., Ms., Miss): <u>Mr.</u>  |
| First a         | and Last Name: <u>Les Teague</u>  |
| Crede           | ntial (P.E, P.G., Ph.D., etc.):   |
| Title: 1        | HSE Manager   |
| Mailin          | g Address: <u>3990 Rogerdale,</u>   |
| City, S         | State, Zip Code: <u>Houston, TX 77042</u>   |
| Phone           | No.: <u>281-731-6469</u> Ext.: Fax No.:   |
| E-mail          | Address: <u>Les.Teague@NexTierOFS.com</u>   |
| List th         | ne county in which the facility is located: <u>Frio</u>   |
|                 | property is publicly owned and the owner is different than the permittee/applicant,   |
| N/A             | e list the owner of the property.   |
|                 |   |
|                 |   |
|                 |   |
|                 | le a description of the effluent discharge route. The discharge route must follow the flow  |
|                 | uent from the point of discharge to the nearest major watercourse (from the point of<br>arge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify   |
|                 | assified segment number.  |
|                 | outfall to unnamed tributary; thence to Buck Creek; thence to Frio River Above Choke  |
| Cany            | on Reservoir in Segment No. 2117 of the Nueces River Basin  |
|                 |   |
|                 |   |
| plotte<br>route | e provide a separate 7.5-minute USGS quadrangle map with the project boundaries d and a general location map showing the project area. Please highlight the discharge from the point of discharge for a distance of one mile downstream. (This map is red in addition to the map in the administrative report). |
| Provid          | le 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   |
|                 | beaming caves, inactares, simulations, other harst reactares  |

2.3.

4.

5.

|    | ☐ 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): |
|    | N/A   |
|    |   |
| 2. | Describe existing disturbances, vegetation, and land use:   |
|    | N/A   |
|    |   |
|    |   |
|    |   |
|    | IE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR MENDMENTS TO TPDES PERMITS                          |
| 3. | List construction dates of all buildings and structures on the property:  |
|    | Click here to enter text.   |
|    |   |
| 4. | Provide a brief history of the property, and name of the architect/builder, if known.   |
|    |   |
|    |   |
|    |   |

