



STATE OF WYOMING
 Department of Environmental Quality - Air Quality Division
 Oil and Gas Production Facilities C6 S2 Permit Application
Application Cover Sheet



submit (1) one signed original copy AND (1) one electronic copy of the application OR (3) paper copies, one w/ original signature

Company Name _____

Facility Name _____

API Number _____

For more than one well, list additional wells & associated API numbers on Form AQD-OG8.

OFFICIAL CONTACT PERSON

Name _____ Title _____

Address _____

Telephone _____ Fax _____ E-mail _____

LOCATION

County _____

Legal Description 1/4 1/4 _____ Section _____ T _____ R _____

Latitude _____ Longitude _____

FACILITY INFORMATION

Type of Facility: Single Well _____ PAD _____ Central Tank Battery _____

Type of Application: New Construction _____ Modified Facility _____

First Date of Production _____ Date of Modification _____

Producing Field Name _____

Producing Formation(s) _____

Existing Air Quality Permit / Waiver Numbers _____

Pending Air Quality Permit Application Numbers _____

I, _____

Responsible Official

Title

state that I have knowledge of the facts herein set forth and that the same are true and correct to the best of my knowledge and belief. I further certify that the emission rates listed on this certification reflect the anticipated emissions due to the operation of this facility. The facility will operate in compliance with all Wyoming Air Quality Standards and Regulations.

Signature _____ Date _____

Signature Required

FORM AQD-OG1

Application Coversheet March 2010