



**Permit to Use Reclaimed Water from Department of Environmental
 Quality Authorized Facilities in Oil and Gas Operations**

OAC 165:10-7-34

Operator			Phone No.
Address			Fax
City	State	Zip	Operator Number
Point of Contact		E-Mail Address	

Water Source

Municipality	Water Source	<input type="checkbox"/> Public Water Supply Treatment Plant <input type="checkbox"/> Municipal Wastewater Treatment <input type="checkbox"/> Rural Water Systems	Phone No.			
Address		County	FAX No.			
Legal	Sec	Twp	Rng	State	Zip	Operator Number
1/4	1/4	1/4				
Point of Contact					E-Mail Address	

Receiving Pits and Tanks

Legal	Sec	Twp	Rng	County
1/4	1/4	1/4		
Tank Pit	Name	Date Authorized	Permit Number	Volume, BBLS

I declare that I have knowledge of the contents of this application and am authorized by my organization to make this application which was prepared by me or under my supervision and direction, with the data and facts stated herein to be true, correct and complete to the best of my knowledge and belief.

 Signature of Operator/Agent TITLE (PRINT OR TYPE) DATE PHONE NUMBER

██████████ **FOR OCC USE ONLY** ██████████

THIS APPLICATION TO USE RECLAIMED WATER FROM A DEPARTMENT OF ENVIRONMENTAL QUALITY APPROVED FACILITY IN OIL & GAS OPERATIONS IS HEREBY

- APPROVED**
 DISAPPROVED

 Manager of Pollution Abatement/Field Operations Date Permit No.

Duration of Permit: From To Mo/Day/Year Mo/Day/Year

Expires when the holding pit permit expires or a maximum of 5 years for other storage systems.

The operator must submit the completed Form 1014RW to the Commission's Manager of Field Operations. The following information must be attached for 1014RW:

1. Only operators authorize to operate wells may apply for a permit pursuant to (c) of this subsection.
2. All transferred water must come from Department of Environmental Quality facilities authorized to treat municipal wastewater or a public water supply treatment plant for the intent being used in a beneficial manner pursuant to (a) of this subsection.
3. Documents to be submitted to the Manager of Field Operations with the 1014RW form, pursuant to (d) of this subsection:
 - Total Dissolved Solids or Total Soluble Salts analysis with chain of custody
 - Topographic map and most recent aerial photograph (minimum scale 1:600)
4. If the conditions of this permit are violated notify the appropriate Field Operains Office, pursuant to (f) of this subsection.
5. Failure to comply with either the terms of this permit or applicable rules could result in cessation of application, revocation of this permit, and /or remedial work.

DISTRICT I	DISTRICT II	DISTRICT III	DISTRICT IV
115 West 6th Street	101 South 6th Street	1111 W. Willow, Suite 100	1318 Craddock Rd.
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