



AIR NSR_RN 106614472
Permit 108409 PA_2013-03-25
Application_Project 189475

Regulatory Department

February 21, 2013

VIA Email to airog@tceq.texas.gov

VIA CERTIFIED MAIL# 7190 10084 2180 0008 4719

Texas Commission on Environmental Quality
Mr. Michael Partee, MC 163
P. O. Box 13087
Austin, Texas 78711-3087

Re: Chesapeake Operating, Inc.
CN600514004
Permit by Rule §106.352 and §106.492 Registration
Kinsel Las D Pad

RECEIVED

FEB 25 2013

PERMITS DIVISION

Proj # 189475
Per # 108409

RECEIVED

FEB 25 2015

TCEQ
CENTRAL FILE ROOM

Dear Mr. Partee:

Chesapeake Operating, Inc. (COI) is registering the Kinsel Las D Pad in La Salle County, Texas, under Texas Commission on Environmental Quality (TCEQ) Permit by Rule (PBR) §106.352 and §106.492. This registration is for a dual scenario site. COI constructed the Facility after February 27, 2011, and is not waiting for a response from the TCEQ prior to implementing this project. COI has prepared a PI-7-CERT submittal to register and certify the site-wide emissions.

This registration submittal consists of the following:

- PI-7-CERT - "Certification and Registration for Permits By Rule"
- Core Data Form
- Chapter 106.4 - "Permit by Rule Applicability Checklist"
- Chapter 106.352 - PBR Checklist - "Oil and Gas Production Facilities"
- Chapter 106.492 - PBR Checklist - "Smokeless Gas Flares"
- Process Description
- Table 1a
- Emission Calculations

A check for \$450, a copy of the Core Data Form, and a copy of the PI-7-CERT Form have been submitted under separate cover to the TCEQ Revenue Section. The check number is 1975159. A copy of this registration has also been sent to the TCEQ Region 16 office in Laredo.

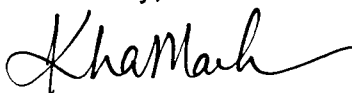
The original signature copies of the PI-7-CERT Form and the Core Data Form have been mailed, via certified mail, to your attention.

Please add the following second technical contact for this site:

Name: Rita Zebian, Project Manager
Company: SAIC Energy, Environment & Infrastructure, LLC
Address: 1200 East Copeland Road, Suite 510, Arlington, Texas 76011
Phone: (817) 640-6407
Email: rita.m.zebian@saic.com

If you have any questions concerning the requested registration, or wish to discuss the information provided with this letter, please contact me at (405) 935-7908.

Sincerely,



Kha Mach, PE
Corporate Air Engineer, COI

cc: Air Section Manager, TCEQ Laredo
707 E. Calton Rd., Ste. 304
Laredo, TX 78041-3887
VIA CERTIFIED MAIL# 7190 10084 2180 0008 4696



Texas Commission on Environmental Quality
Form PI-7-CERT
Certification and Registration for Permits by Rule

The TCEQ requires that a complete Core Data Form bearing an original signature be submitted on all incoming applications unless a Regulated Entity and Customer Reference Number have been issued by the TCEQ and no core data information has changed. For more information regarding the Core Data Form, call (512) 239-5175 or go to the TCEQ Web site at www.tceq.texas.gov/permitting/central_registry/guidance.html.

I. Registrant Information			
A. Company or Other Legal Customer Name: Chesapeake Operating, Inc.			
Company Official Contact Name: Joseph W. Ketzner			
Title: District Manager			
Mailing Address: P. O. Box 18496			
City: Oklahoma City		State: OK	ZIP Code: 73154-0496
Phone: (405) 935-7908	Fax: (405) 849-7908	E-mail: kha.mach@chk.com	
B. Technical Contact Name: Kha Mach, PE			
Title: Corporate Air Engineer, COI			
Company: Chesapeake Operating, Inc			
Mailing Address: P. O. Box 18496			
City: Oklahoma City		State: OK	ZIP Code: 73154-0496
Phone: (405) 935-7908	Fax: (405) 849-7908	E-mail: kha.mach@chk.com	
C. Facility Location Information - Street Address:			
If "NO," street address, provide written driving directions to the site: (attach description if additional space is needed)			
From I-35 east frontage road & Los Alamos Road, go E on Los Alamos Road 1.3 mi. Road turns NE for 0.5 mi. Road turns SE for 0.1 mile to gate on left (N). Take immediate left thru gate & go 0.4 mi. Turn right and travel for 0.8 mile to location.			
City: Cotulla		County: La Salle	ZIP Code: 78001
D. Is the Core Data Form (TCEQ Form 10400) attached?			<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
If "No," provide customer reference number and regulated entity number below:			
Customer Reference Number (CN): 600514004			
Regulated Entity Number (RN):			
II. Facility and Site Information			
A. Name & Type of Facility: Kinsel Las D Pad / Oil & natural gas gathering			<input checked="" type="checkbox"/> Permanent <input type="checkbox"/> Portable
B. PBR claimed under 30 TAC 106 (List all):			
106. 352 Oil and Gas Production Facilities		106.	
106. 492 Flares		106.	



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II. Facility and Site Information (continued))			
Are you claiming a historical standard exemption or PBR ?			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<i>"YES," enter effective date(s) and rule number(s) in the spaces provided below.</i>			
Effective Date		Rule Number	
C. Is there a previous Standard Exemption or PBR for the facility in this registration?			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<i>If "YES," enter registration number(s), rule number(s) and effective dates in the spaces provided below.</i>			
Registration Number	Effective Date	Rule Number	
D. Are there any other facilities at this site which are authorized by an Air Standard Exemption or PBR?			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<i>If "YES," enter registration number(s), rule number(s) and effective dates in the spaces provided below.</i>			
Registration Number	Effective Date	Rule Number	
E. Are there any other air preconstruction permits at this site?			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<i>If "YES," enter permit number(s) in the spaces provided below.</i>			
Are there any other air preconstruction permits at this site that would be directly associated with this project?			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<i>If "YES," enter permit number(s) in the spaces provided below.</i>			
F. Is this facility located at a site which is required to obtain a Federal Operating Permit (FOP) pursuant to 30 TAC Chapter 122?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> To be determined	
If the site currently has an existing federal operating permit, enter the permit number.			
Check the requirements of 30 TAC Chapter 122 that will be triggered if this certification is accepted.			
<input type="checkbox"/> Initial Application for an FOP		<input type="checkbox"/> Significant Revision for an SOP	
<input type="checkbox"/> Operational Flexibility/off Permit Notification for an SOP		<input type="checkbox"/> Minor Revision for an SOP	
<input type="checkbox"/> To be Determined		<input checked="" type="checkbox"/> None	



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II. Facility and Site Information (continued)	
Identify the type(s) issued and/or FOP application(s) submitted/pending for the site. <i>(Check all that apply)</i>	
<input type="checkbox"/> SOP	<input type="checkbox"/> GOP <input type="checkbox"/> GOP application/revision application: Submitted or under APD review.
<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> SOP application/revision application: submitted or under APD review.
G. TCEQ Account Identification Number (if known):	
III. Fee Information	
See Section VIII. for address to send fee or go to www6.tceq.texas.gov/epayto to pay online.	
A. Is this certification to solely establish a federally enforceable emission limit and not authorize any new facilities? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If "YES," then no fee is required.	
If "NO," then go to Section III.B.	
B. If "YES," to any of the following three questions, a \$100 fee is required. Otherwise, a \$450 fee is required.	
Does this business have less than 100 employees?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Does this business have less than 6 million dollars in annual gross receipts?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Is this registration submitted by a governmental entity with a population of less than 10,000?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
C. Enter the check, money order, or transaction number.	1975159
Enter the individual or company name printed on the check. <i>(below)</i>	
Chesapeake Operating, Inc.	
Fee amount <i>(spell out)</i> : Four hundred fifty dollars	\$ 450.00
Was fee Paid online?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
IV. Selected Facility Reviews Only—Technical Information	
<i>Note: If claiming one of the following PBRs, complete this section, then skip to Section VI., "Submitting your registration" below:</i>	
Animal Feeding Operations 30 TAC 106.161, Livestock Auction Facilities 30 TAC 106.162, Saw Mills 30 TAC 106.223, Grain Handling, Storage and Drying 30 TAC 106.283, Auto Body Refinishing Facilities 30 TAC 106.436, and Air Curtain Incinerator 30 TAC 106.496	
A. Is the applicable PBR checklist attached which shows the facility meets all general and specific requirements of the PBR(s) being claimed?	<input type="checkbox"/> YES <input type="checkbox"/> NO
B. Distance from this facility's emission release point to the nearest property line:	feet
Distance from this facility's emission release point to the nearest off-property structure:	feet



Texas Commission on Environmental Quality
Form PI-7-CERT
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V. TECHNICAL INFORMATION - The following information must be submitted with Form PI-7CERT. Place a check next to the appropriate box to verify you have included it in the submittal.

<input checked="" type="checkbox"/> Process Flow Diagram and Process Description	<input checked="" type="checkbox"/> Emissions data and calculations
<input checked="" type="checkbox"/> Table 1(a) (Form 10153) Emission Point Summary	
<input type="checkbox"/> Confidential Information (All pages properly marked "CONFIDENTIAL")	
Has the company implemented the project or waiting on a response from TCEQ?	<input checked="" type="checkbox"/> Implemented <input type="checkbox"/> Waiting
Projected Start of Construction Date: 02/2013	
Is this an annual certification under 30 TAC Chapter 106.261 and/or 106.262? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<input checked="" type="checkbox"/> Information on meeting the specific PBR requirements (PBR checklists maybe used and are optional.)	<input checked="" type="checkbox"/> Information on meeting the general PBR requirements 30 TAC 106.4. (PBR checklists maybe used and are optional.)

Note: Please be reminded that if the facilities listed in this registration are subject to the Mass Emissions Cap & Trade program under 30 TAC Chapter 101, Subchapter H, Division 3, the owner/operator of these facilities must possess NO_x allowances equivalent to the actual NO_x emissions from these facilities.

Distance from this facility's emission release point to the nearest property line:	1,360	feet
Distance from this facility's emission release point to the nearest off-property structure:	> 5,280	feet

Note: In limited cases, a map or drawing of the site and surrounding land use may be requested during the technical review or at the request of the TCEQ Regional Office or local air pollution control program during an investigation.

VI. DELINQUENT FEES

This form will not be processed until all delinquent fees and/or penalties owed to the TCEQ or the Office of the Attorney General on behalf of the TCEQ is paid in accordance with the Delinquent Fee and Penalty Protocol. For more information regarding Delinquent Fees and Penalties, go to the TCEQ Web site at: www.tceq.texas.gov/agency/delin/index.html.



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VII. SIGNATURE FOR CERTIFICATION AND REGISTRATION

The signature below indicates that the Responsible Official has knowledge of the facts herein set forth and that the same are true, accurate, and complete to the best of my knowledge and belief. By this signature, the maximum emission rates listed on this certification reflect the maximum anticipated emissions due to the operation of this facility and all representations in this certification of emissions are conditions upon which the facilities and sources will operate. It is understood that it is unlawful to vary from these representations unless the certification is first revised. The signature certifies that to the best of the Responsible Official's knowledge and belief, the project will satisfy the conditions and limitations of the indicated exemption or permit by rule and the facility will operate in compliance with all regulations of the Texas Commission on Environmental Quality and with Federal U.S. Environmental Protection Agency regulations governing air pollution. The signature below certifies that, based on information and belief formed after reasonable inquiry, the statements and information above and contained in the attached document(s) are true, accurate, and complete. **If you questions on how to fill out this form or about air quality permits. Please call (512) 239-1250.** Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, call (512) 239-3282.

SIGNATURE: _____


(ORIGINAL SIGNATURE REQUIRED)

2/22/13
DATE



**Texas Commission on Environmental Quality
Form PI-7-CERT
Certification and Registration for Permits by Rule**

VIII. SUBMITTING COPIES OF THE CERTIFICATION AND REGISTRATION

Copies must be sent as listed below:

Processing delays may occur if copies are not sent as noted.

Who	Where	What
Air Permits Initial Review Team (APIRT)	Regular, Certified, Priority Mail MC161, P.O. Box 13087 Austin, Texas 78711-3087 Hand Delivery, Overnight Mail MC 161, 12100 Park 35 Circle, Building C, Third Floor Austin, Texas 78753 Fax: (512) 239-2123 <i>(do not follow fax with paper copies)</i>	Originals Form PI-7, Core Data Form and all attachments
Revenue Section, TCEQ	Regular, Certified, Priority Mail MC 214, P.O. Box 13088 Austin, Texas 78711-3088 Hand Delivery, Overnight Mail MC 214, 12100 Park 35 Circle, Building A, Third Floor Austin, Texas 78753	Original Money Order or Check Copy of Form PI-7 and Core Data Form
Appropriate TCEQ Regional Office	To find your Regional Office address, go to the TCEQ Web site at www.tceq.texas.gov.us/ , or call (512) 239-1250.	Copy of Form PI-7, Core Data Form, and all attachments.
Appropriate Local Air Pollution Control Program(s)	To Find your local or Regional Air Pollution Control Programs go to the TCEQ, APD Website at www.tceq.texas.gov/nav/permits/air_permits.html or call (512) 239-1250	Copy of Form PI-7, Core Data Form, and all attachments.



TCEQ Use Only

TCEQ Core Data Form

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

SECTION I: General Information

1. Reason for Submission (If other is checked please describe in space provided)			
<input checked="" type="checkbox"/> New Permit, Registration or Authorization (Core Data Form should be submitted with the program application)			
<input type="checkbox"/> Renewal (Core Data Form should be submitted with the renewal form)		<input type="checkbox"/> Other	
2. Attachments Describe Any Attachments: (ex. Title V Application, Waste Transporter Application, etc.)			
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 106.352 and 106.492 PBR Registration & Certification			
3. Customer Reference Number (if issued)		4. Regulated Entity Reference Number (if issued)	
CN 600514004		RN	

SECTION II: Customer Information

5. Effective Date for Customer Information Updates (mm/dd/yyyy)			
6. Customer Role (Proposed or Actual) – as it relates to the Regulated Entity listed on this form. Please check only one of the following:			
<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input checked="" type="checkbox"/> Owner & Operator			
<input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> Voluntary Cleanup Applicant <input type="checkbox"/> Other: _____			
7. General Customer Information			
<input type="checkbox"/> New Customer <input type="checkbox"/> Update to Customer Information <input type="checkbox"/> Change in Regulated Entity Ownership			
<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State) <input checked="" type="checkbox"/> No Change**			
**If "No Change" and Section I is complete, skip to Section III – Regulated Entity Information.			
8. Type of Customer:			
<input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship- D.B.A			
<input type="checkbox"/> City Government <input type="checkbox"/> County Government <input type="checkbox"/> Federal Government <input type="checkbox"/> State Government			
<input type="checkbox"/> Other Government <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Other: _____			
9. Customer Legal Name (If an individual, print last name first: ex: Doe, John) If new Customer, enter previous Customer below End Date:			
10. Mailing Address:			
City State ZIP ZIP + 4			
11. Country Mailing Information (if outside USA) 12. E-Mail Address (if applicable)			
13. Telephone Number 14. Extension or Code 15. Fax Number (if applicable)			
() - () -			
16. Federal Tax ID (9 digits) 17. TX State Franchise Tax ID (11 digits) 18. DUNS Number (if applicable) 19. TX SOS Filing Number (if applicable)			
20. Number of Employees 21. Independently Owned and Operated?			
<input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher <input type="checkbox"/> Yes <input type="checkbox"/> No			

SECTION III: Regulated Entity Information

22. General Regulated Entity Information (If 'New Regulated Entity' is selected below this form should be accompanied by a permit application)	
<input checked="" type="checkbox"/> New Regulated Entity <input type="checkbox"/> Update to Regulated Entity Name <input type="checkbox"/> Update to Regulated Entity Information <input type="checkbox"/> No Change** (See below)	
**If "NO CHANGE" is checked and Section I is complete, skip to Section IV, Preparer Information.	
23. Regulated Entity Name (name of the site where the regulated action is taking place)	
Kinsel Las D Pad	

24. Street Address of the Regulated Entity: (No P.O. Boxes)							
	City		State		ZIP		ZIP + 4
25. Mailing Address:	Chesapeake Operating, Inc.						
	P.O. Box 18496						
	City	Oklahoma City	State	OK	ZIP	73154	ZIP + 4
26. E-Mail Address:	kha.mach@chk.com						
27. Telephone Number	28. Extension or Code		29. Fax Number (if applicable)				
(405) 935-7908			(405) 849-7908				
30. Primary SIC Code (4 digits)	31. Secondary SIC Code (4 digits)		32. Primary NAICS Code (5 or 6 digits)		33. Secondary NAICS Code (5 or 6 digits)		
1311			211111				
34. What is the Primary Business of this entity? (Please do not repeat the SIC or NAICS description.)							
Oil and natural gas gathering							

Questions 34 - 37 address geographic location. Please refer to the instructions for applicability.

35. Description to Physical Location:	From I-35 east frontage road & Los Alamos Road, go E on Los Alamos Road 1.3 mi. Road turns NE for 0.5 mi. Road turns SE for 0.1 mile to gate on left (N). Take immediate left thru gate & go 0.4 mi. Turn right and travel for 0.8 mile to location.					
36. Nearest City	County		State		Nearest ZIP Code	
Cotulla	La Salle		TX		78001	
37. Latitude (N) In Decimal:	28.564243		38. Longitude (W) In Decimal:	-99.178112		
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
28	33	51.3	99	10	41.2	

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 or the updates may not be made. If your Program is not listed, check other and write it in. See the Core Data Form instructions for additional guidance.

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

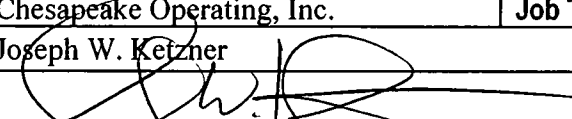
SECTION IV: Preparer Information

40. Name:	Rita Zebian	41. Title:	Project Manager, Air Quality
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address
(817) 640-6407		(817) 640-6447	rita.m.zebian@saic.com

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 9 and/or as required for the updates to the ID numbers identified in field 39.

(See the Core Data Form instructions for more information on who should sign this form.)

Company:	Chesapeake Operating, Inc.	Job Title:	District Manager
Name (In Print):	Joseph W. Ketzner	Phone:	(405) 935-8000
Signature:		Date:	2/20/13