

Texas Commission on Environmental Quality
OGS New Project Notification for New Registration

Site Information (Regulated Entity)

What is the name of the site to be authorized?	GIST UNIT TANK BATTERY
Does the site have a physical address?	No
Because there is no physical address, describe how to locate this site:	FROM INTX OF US 385 & W YUKON PROCEED W 1.6 MI TO LEASE RD THEN GO 0.1 MI S AND 0.5 MI SE TO LOCATION
City	ODESSA
State	TX
ZIP	79763
County	ECTOR
Latitude (N) (##.#####)	
Longitude (W) (-###.#####)	
Primary SIC Code	
Secondary SIC Code	
Primary NAICS Code	211111
Secondary NAICS Code	
Regulated Entity Site Information	
What is the Regulated Entity's Number (RN)?	RN102600657
What is the name of the Regulated Entity (RE)?	GIST UNIT TANK BATTERY
Does the RE site have a physical address?	No
Because there is no physical address, describe how to locate this site:	FROM INTX OF US 385 & W YUKON PROCEED W 1.6 MI TO LEASE RD THEN GO 0.1 MI S AND 0.5 MI SE TO LOCATION
City	ODESSA
State	TX
ZIP	79763
County	ECTOR
Latitude (N) (##.#####)	
Longitude (W) (-###.#####)	
Facility NAICS Code	211111
What is the primary business of this entity?	CRUDE OIL PRODUCTION

Customer (Applicant) Information

How is this applicant associated with this site?	Owner Operator
What is the applicant's Customer Number (CN)?	CN601691165
Type of Customer	Corporation
Full legal name of the applicant:	
Legal Name	Aghorn Operating, Inc.
Texas SOS Filing Number	141786600
Federal Tax ID	
State Franchise Tax ID	17526761808
State Sales Tax ID	
Local Tax ID	
DUNS Number	
Number of Employees	
Independently Owned and Operated?	Yes
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.	Yes
Responsible Authority Contact	
Organization Name	Aghorn Operating, Inc.

Prefix	MR
First	Frosty
Middle	
Last	Gilliam
Suffix	JR
Credentials	
Title	President
Responsible Authority Mailing Address	
Enter new address or copy one from list:	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	PO BOX 14350
Routing (such as Mail Code, Dept., or Attn:)	
City	ODESSA
State	TX
ZIP	79768
Phone (###-###-####)	4325500804
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	fg-aghorn@sbcglobal.net

Responsible Official Contact

Person TCEQ should contact for questions about this application:

Same as another contact?	CN601691165, Aghorn Operating, Inc.
Organization Name	Aghorn Operating, Inc.
Prefix	MR
First	Frosty
Middle	
Last	Gilliam
Suffix	JR
Credentials	
Title	President
Enter new address or copy one from list:	
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	PO BOX 14350
Routing (such as Mail Code, Dept., or Attn:)	
City	ODESSA
State	TX
ZIP	79768
Phone (###-###-####)	4325500804
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	fg-aghorn@sbcglobal.net

Technical Contact

Person TCEQ should contact for questions about this application:

Same as another contact?	
Organization Name	Sport Environmental A Terracon Company

Prefix	MR
First	Jacare
Middle	
Last	Smith
Suffix	
Credentials	
Title	Senior Staff Scientist
Enter new address or copy one from list:	
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	502 N BIG SPRING ST
Routing (such as Mail Code, Dept., or Attn:)	
City	MIDLAND
State	TX
ZIP	79701
Phone (###-###-####)	4326831100
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	air@sportenv.com

OGS New Project Notification

1) Select the authorization this site or changes to this site will most likely be authorized under based on expected worst-case operations (including planned MSS activities if MSS emissions are being registered with this project).	106.352 2012-NOV-22 LEVEL 2
2) What is the lease name submitted to the Railroad Commission (RRC)? If there are well(s) co-located with the site, include the well number(s) assigned by the RRC.	19373
3) Provide a brief process description for this site or description of changes to this site.	Tank battery is fed by multiple oil wells. Produced fluids are separated. Oil & Water Sent to Storage Tanks controlled by VRU. Oil is sent to Pipeline and Water is sent off-site. VRU sends emissions to Flare along with Produced Gas.
4) What is the site's latitude? (North)	31.902630
5) What is the site's longitude? (West)	-102.412320
6) What method was used to determine the site's latitude and longitude?	GPS
7) Does this business qualify as a small business, non-profit organization, or small government entity?	Yes

Certification

The signature below indicates to the best of my knowledge that the information submitted is true and complete, and that I have signature authority to submit this application on behalf of the regulated entity.

1. I am Jacare Smith, the owner of the STEERS account ER060537.
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 OGS New Project Notification for New Registration.

9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

OWNER OPERATOR Signature: Jacare Smith OWNER OPERATOR

Customer Number:	CN601691165
Legal Name:	Aghorn Operating, Inc.
Account Number:	ER060537
Signature IP Address:	32.142.105.94
Signature Date:	2024-07-05
Signature Hash:	77442ACBF46D410B39E26531898612CCAC125CA 09C44A934B38651EB89CDC9FE
Form Hash Code at time of Signature:	988BC2C1F3B071C461EEA600E2E4715166C3D37 64A7FD03FE5E539004CE5100C

Fee Payment

Transaction by:	The application fee payment transaction was made by ER060537/Jacare Smith
Paid by:	The application fee was paid by JACARE SMITH
Fee Amount:	\$25.00
Paid Date:	The application fee was paid on 2024-07-05
Transaction/Voucher number:	The transaction number is 582EA000616611 and the voucher number is 712066

Submission

Reference Number:	The application reference number is 665588
Submitted by:	The application was submitted by ER060537/Jacare Smith
Submitted Timestamp:	The application was submitted on 2024-07-05 at 10:03:11 CDT
Submitted From:	The application was submitted from IP address 32.142.105.94
Confirmation Number:	The confirmation number is 549520
Steers Version:	The STEERS version is 6.78

Additional Information

Application Creator: This account was created by Jacare Smith