FIELD OPERATIONS DIVISION
ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

COALBED METHANE TEMPORARY PIT WASTEWATER LAND APPLICATION CERTIFICATION REPORT

Please Type or Print in Ink

COMPANY NAME _____

FACILITY NAME _____

NPDES/SID PERMIT _____

COUNTY _____

WELL PAD NAME & NUMBER _____

LATITUDE _____ LONGITUDE _____
(In degrees, minutes, & seconds)

TOWNSHIP, RANGE, SECTION _____
(To nearest 1/4 section)

NAME OF NEAREST SURFACE RECEIVING STREAM _____

DISTANCE TO NEAREST SURFACE RECEIVING STREAM _____

AMOUNT (gal) _____ pH (s.u.) _____ TDS (mg/l) _____

ADEM NOTIFIED:_____ _____
Date & Time ADEM Inspector Notified

Based upon the inspection of (Date & Time)_____ performed prior to and during land application of pit wastewater from the pit(s) located at the site referenced above, which I or personnel under my direct supervision conducted

(list:_____), I certify that each land application site and all application equipment was in accordance with the land application procedures plan filed with the Department, that the pumped pit wastewater did not contain visible, floating material or oil & grease, and that all application procedures and operations were conducted in accordance with the above referenced NPDES permit and ADEM regulations.

I further certify that no unauthorized discharge to surface or ground waters has occurred as a result of these activities.

_____ _____ _____
RCO Name (Please Print) Signature Date

_____ _____ _____
PE Name (Please print) Signature Date

_____
PE Registration # and Seal