



HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST GENERAL PERMIT GENERAL PERMIT MSG13 <u>0</u> <u>5</u> <u>0</u> <u>3</u>

(Number to be assigned by MDEQ)

INSTRUCTIONS

The Hydrostatic Test Notice of Intent (HTNOI) is for coverage under the Hydrostatic Test General Permit to discharge hydrostatic test water and storm water associated with land disturbing activities of one (1) acre or greater; or for land disturbing activities, which are part of a larger common plan of development or sale that are initially less than one (1) acre but will ultimately disturb one (1) or more acres. Applicant must be the owner or operator. The coverage recipient is responsible for compliance with the conditions of the general permit.

Completed HTNOIs should be filed at least thirty (30) days prior to the commencement of regulated activity. <u>Discharge of hydrostatic test</u> water or storm water from regulated construction activities without written notification of coverage is a violation of state law.

A USGS quadrangle map or copy is a required submittal. The map shall extend at least one-half of a mile beyond the facility/ project property boundary. In the case of linear pipeline projects the map shall extend at least one-half of a mile beyond the pipeline right-of-way. The site location and outfalls must be outlined and labeled. Quad maps can be obtained from the Office of Geology (601-961-5523). If a copy is submitted, provide the name of the quadrangle map that is found in upper right hand corner.

Additional submittals may include the following:

- A site-specific Storm Water Pollution Prevention Plan (SWPPP) developed in accordance with ACT8 of the General Permit, if the project includes regulated construction activity disturbing five (5) acres or more
- · A description of proposed water treatment additives as outlined in ACT4, S-4 of the General Permit
- Appropriate Section 404 documentation from U.S. Army Corps of Engineers
- Written authorization from the MDEQ, Office of Land and Water, if water withdrawal from surface waters or ground waters is to be used for the testing. For information call the Office of Land and Water at 601/961-5202

ALL REQUESTED INFORMATION MUST BE PROVIDED (Answer "NA" if not applicable)

APPLICANT IS THE:	✓ OWNER	✓ OPERATOR	(Must check	one or both)
	OWN	VER INFORMATION	li til.	
OWNER CONTACT NAME &	& POSITION: Kevin	Beville		
OWNER COMPANY NAME:	Southcross Energy	LP		
OWNER STREET (P.O. BOX): 1717 Main Stree	t Suite 5200		
OWNER CITY: Dallas	T - [H []		STATE: Texas	zip: 75201
OWNER PHONE # (INCLUD	E AREA CODE): (2	14) 979-3748		

	OPERATOR INFORMATION
OPERATOR CONTACT NAME & POS	SITION: John D. Trull, Area Manager
OPERATOR COMPANY: Southcross	
OPERATOR STREET (P.O. BOX): 17	
OPERATOR CITY: Dallas	STATE: Texas ZIP: 75201
OPERATOR PHONE # (INCLUDE AR)	EA CODE): (601) 922-0551
	FACILITY/PROJECT INFORMATION
FACILITY/PROJECT NAME: Treeto	p Withdrawal and Discharge SIC Code: 4 9 2 2
PIPELINE, STORAGE TANK OR FLO	WLINE BEING TESTED IS: V NEW USED
IF USED, LIST PRIOR MATERIAL SE	CRVICE OF EQUIPMENT: NA
(NOTE: A construction SWPPP must be PHYSICAL SITE ADDRESS (If not available)	ACTIVITIES ARE TO OCCUR, LIST ACRES DISTURBED: NA e attached with this HTNOI, if disturbing five (5) acres or more). cilable, indicate nearest named road. Linear projects indicate beginning of project):
STREET: Oilfield Rd.	CITY: Baxterville
COUNTY: Lamar	ZIP: 39455
TYPE OF TREATMENT (IF PROVIDE	ED): N/A
system designed to assure that qualified personn person or persons who manage the system, or th	2/1/17
Benjamin Day	Vice President of Engineering
Printed Name	Title
 For a corporation, by a responsible co For a partnership, by a general partne For a sole proprietorship, by the prop 	er.
HTNOI forms must be submitted to:	Chief, Environmental Permits Division MS Dept of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, Mississippi 39225 Revised: 06/01/11

OUTFALL INFORMATION

(To be submitted with HTNOI and Major Modification Forms)

INSTRUCTIONS:

- 1. For each outfall, complete the information in the table below (NOTE: Complete the last column of this form, only if it is being submitted with a Major Modification Form).
- 2. All outfalls must be spotted and labeled on a USGS quadrangle map.

OUTALL NO:		LONGITUDE ¹ (deg/min/sec)	SOURCE OF FILL WATER	NEAREST RECEIVING STREAM ²					STATUS OF TANK,			INDICATE	
	LATITUDE ¹ (deg/min/sec)			NAME		MDEQ B(D) T? 3	H. TMI Yes	AS DL? ³	EST. TOTAL DISCHARGE (MIL GAL)	PIPE FLOV	LINE, VLINE FC.	EXPECTED TEST DATE(S) (mm/dd/yr)	WHETHER OUTFALL IS NEW OF EXISTING
001	31°04'9.90"	89°39'11.48	Clear Creek	Clear Creek	1		1		0.057675	✓		03/2/17	
002													
003													
004	AND												
005													
006			1- 7-31										
007	(P) (A) (A) (A)												
008													
009	(2) (1) (1)												
010													
011													
012													

Revised: 06/01/11

¹ List the latitude and longitude of its location to the nearest 15 seconds.

² Name of the nearest named receiving stream as listed on a USGS Quad Map.

³ MDEQ's 303(d) List of Impaired Water Bodies and approved TMDLs can be found at: http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section