OMB 2040-NEW

(approval expiration date):

2008 COALBED METHANE INDUSTRY SCREENER



DUE DATE:

YOUR RESPONSE IS REQUIRED BY LAW. Title 33, United States
Code, requires businesses and other organizations that receive this questionnaire to answer the questions

and return the report to the U.S. Environmental Protection Agency.

By the same law, **you may claim confidentiality**. See Instruction Guide.

[ADDRESS LA	ABEL]
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INSTRUCTIONS:

- Please refer to the accompanying Instruction Guide for help in answering specific questions.
- More information is available from EPA's contractor support at cbmscreener.help@pgenv.com or XXX-XXX

Item A ESTABLISHMENT NAME

Is the establishment name shown above in the	nailing address correct?
□ Yes	
□ No – Enter establishment name	

Item B CONTACT INFORMATION

If we have any questions about your response, who may we contact?

Name: ______
Street Address: _____

City, State, ZIP:

e 2		Screener ID:_{	}}
Phone: _			
e-Mail:			
e-iviaii.			
m C OPERA	ATING STATUS IN 2008		
any time in 2	2008, did your establishment own or operate	e any coalbed methane w	vells?
□ Y	Tes → Go to Item D		
□ N	$0 \rightarrow \mathbf{C}$ the box, and return the survey to	o the address in the Instru	ction
	Guide.		
m D BUSIN	ESS SIZE AND FINANCIAL DATA AVA	AILABILITY	
In 2008. was	your highest level of corporate ownership	· ·	commo
		additional assistance.)	
	elow or contact the helpline xxx-xxx-xxxx for		
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Item E NUMBER OF CBM PROJECTS

A project in this survey is defined as a well, group of wells, lease, group of leases, or some other recognized unit that your establishment operates as an economic unit when making production decisions.

Page 3	Screener ID:_{}
In 2008, how many CBM projects did your establishment own or operate?	
	Projects
Item F CBM PROJE	ECT INFORMATION
For each CBM projectinformation.	ct that you owned and/or operated in 2008, provide the following
you may prefer to	copies of this page are available at www.epa.gov/xxxxxxx . If you have many projects, report this information in a tabular format. A spreadsheet version of this page is epa.gov/xxxxxxx and may be used instead of providing one page per project.
	r identifier that you use for this project? \rightarrow then assign identifiers A, B, C, etc.)
2. Where is this projec	t located:
Basin (e.g., Powder River):
State (2	2-letter abbreviation):
3. Did you buy or sell	this project during 2008?
☐ Yes →	What month?
□ No	
4. What was the maxir	num number of CBM wells producing gas and/or water during 2008?
Number:	
5. What was the comb	ined gas production from these wells to date in 2008?
5. What was the comb	Thousands of Cubic Feet (Mcf)
	Other – Enter other reporting units →
	u manage your produced water? Check all that apply.
│	ge to surface water (e.g., lake, river, stream, creek)
☐ Dischar	ge to publicly owned treatment works
Land A	pplication (with or without crop production)
☐ Underg	round injection

Page 4	Screener ID:_{}
	Evaporation or infiltration pond
	Livestock or wildlife watering
	Trucked or transported off site to a third party
	No water produced by the project
to statistically	avoid asking you for detailed information about all of your projects, EPA intends select a limited number of projects to receive a Detailed Questionnaire. If this cted to receive a Detailed Questionnaire, where should we send the Detailed?
	To the same contact person identified in Item B.
	To the same contact person identified in the previous project.
	To the following contact person:
	Name:
	Employer (for example, name of your establishment or consulting firm):
	Street Address:
	City, State, ZIP:
	Phone:
	e-Mail:
REMARKS:	Please use this space to clarify your responses, if appropriate.
,	

Please keep a copy and return the original to:

U.S. Environmental Protection Agency CBM Industry Screener c/o PG Environmental, LLC 447B Carlisle Drive Herndon, VA 20170

THANK YOU.

