

9 Greenway Plaza, Ste. 2800 Houston, TX 77046 (713) 479-8000

May 16, 2023

Chief, Environmental Permits Division Mississippi Department of Environmental Quality Office of Pollution Control P.O. Box 2261 Jackson, MS 39225

Re: Hydrostatic Test Notice of Intent Texas Gas Transmission, LLC PN 14441 DeSoto and Tunica Counties, Mississippi Providence Project No. 196-621

To Whom It May Concern:

Texas Gas Transmission, LLC is submitting this Hydrostatic Test Notice of Intent (HTNOI) requesting authorization for a discharge of hydrostatic test water from their 18-inch-diameter pipeline in DeSoto and Tunica Counties, Mississippi. The volume of water for the hydrostatic test in Tunica County will be approximately 161,000 gallons from an on-site water well and will be discharged onto their existing right-of-way (Outfall 001). The volume of water for the hydrostatic test in DeSoto County will be approximately 80,000 gallons from a storm water retention pond (unnamed surface water) and will be discharged onto their existing right-of-way (Outfall 002). All water will be discharged at a rate of approximately 500 gallons-per-minute into a haybale structure.

Please find attached a site location map showing the discharge locations (Figure 1) and the HTNOI general permit forms and requisite supporting information (Attachment A). The Mississippi Secretary of State Certificate of Good Standing is in Attachment B. If you have questions, please contact Kelsey Gocke at (713) 479-8080 or <u>kelsey.gocke@bwpipelines.com</u> or Yvonne Baker at (225) 766-7400 or <u>yvonnebaker@providenceeng.com</u>.

Sincerely, Texas Gas Transmission, LLC

Montana Patin

Montana Patin Supervisor, Environmental Permitting Texas Gas Transmission, LLC

Enclosures: As stated

cc: Kelsey Gocke, Texas Gas Transmission, LLC Yvonne Baker, Providence Engineering and Environmental Group LLC FIGURE 1

SITE LOCATION MAP



ATTACHMENT A

HYDROSTATIC TEST NOTICE OF INTENT







HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST **GENERAL PERMIT**

GENERAL PERMIT MSG130624

(Number to be assigned by MDEO)

INSTRUCTIONS

The Hydrostatic Test Notice of Intent (HTNOI) is for coverage under the Hydrostatic Test General Permit to discharge hydrostatic test water. 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. Discharge of hydrostatic test water without written notification of coverage is a violation of state law.

If the company seeking coverage is a corporation, a limited liability company, a partnership, or a business trust, attach proof of its registration with the Mississippi Secretary of State and /or its Certificate of Good Standing. This registration or Certificate of Good Standing must be dated within twelve (12) months of the date of the submittal of this coverage form. Coverage will be issued in the company name as it is registered with the Mississippi Secretary of State.

IF REGULATED LAND DISTURBING ACTIVITIES ARE TO OCCUR, LIST ACRES DISTURBED: NOTE: If disturbing five (5) acres or more, a stormwater construction coverage is required.

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:

- Labeled site drawing noting the outfall(s) associated with hydrostatic test water discharge(s)
- List of chemical Additives,
- Appropriate Section 404 documentation from U.S. Army Corps of Engineers, or
- Written authorization from the MDEO, 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:		OPERATOR	(Must check one or both)						
OWNER INFORMATION									
OWNER CONTACT NAME &	& POSITION:								
OWNER EMAIL ADDRESS:									
OWNER COMPANY NAME:									
OWNER STREET (P.O. BOX)):								

OWNER CITY: ______ STATE: _____ZIP:

OWNER PHONE # (INCLUDE AREA CODE):



OPERATOR CONTACT NAME & POSITION:			
OPERATOR EMAIL:			
OPERATOR COMPANY:			
OPERATOR STREET (P.O. BOX):			
OPERATOR CITY:	STATE:	ZIP:	
OPERATOR PHONE # (INCLUDE AREA CODE):			

FACILITY/PROJECT INFORMATION

PIPELINE, STORAGE TANK OR FLOWLINE	BEING TESTED IS: NEW USED
IF USED, LIST PRIOR MATERIAL SERVICE	OF EQUIPMENT:
PHYSICAL SITE ADDRESS (II not available, II	dicate nearest named road. Linear projects indicate beginning of project):
STREET:	CITY:
COUNTY:	ZIP:
Facility site tribal land ID (NA if not applicable)	
TYPE OF TREATMENT (IF PROVIDED):	
SIC Code NAICS Code	
certify under penalty of law that this document and all a ystem designed to assure that qualified personnel proper person or persons who manage the system, or those perso he best of my knowledge and belief, true, accurate and co	ttachments were prepared under my direction or supervision in accordance with a ly gathered and evaluated the information submitted. Based on my inquiry of the ns directly responsible for gathering the information, the information submitted is, to omplete. I am aware that there are significant penalties for submitting false
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I certify under penalty of law that this document and all a system designed to assure that qualified personnel proper person or persons who manage the system, or those person he best of my knowledge and belief, true, accurate and conformation, including the possibility of fines and/or improvement of the possibility of fines and/or improvement of the signature of the signed by operator when differ Montana Mathematical Accuration of the signed by operator when differ Printed Name I This application shall be signed according to ACT • For a corporation, by a responsible corporate of the sole proprietorship, by the proprietor. • For a municipal, state or other public facility, I	ttachments were prepared under my direction or supervision in accordance with a ly gathered and evaluated the information submitted. Based on my inquiry of the ns directly responsible for gathering the information, the information submitted is, to omplete. I am aware that there are significant penalties for submitting false isonment for knowing violations.
I certify under penalty of law that this document and all a system designed to assure that qualified personnel proper person or persons who manage the system, or those person the best of my knowledge and belief, true, accurate and conformation, including the possibility of fines and/or improvement of the possibility of the proprietor. I This application shall be signed according to ACT For a partnership, by a general partner. For a municipal, state or other public facility, provement of the possibility of the proprietor. For a municipal, state or other public facility. H	ttachments were prepared under my direction or supervision in accordance with a ly gathered and evaluated the information submitted. Based on my inquiry of the ns directly responsible for gathering the information, the information submitted is, to omplete. I am aware that there are significant penalties for submitting false isonment for knowing violations.

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.

				NEAREST RECEIVING STREAM ²				STATUS OF					
OUTALL NO.	LATITUDE ¹ (deg/min/sec)	LONGITUDE ¹ (deg/min/sec)	SOURCE OF FILL WATER	NAME	ON N 303 LIS Yes	IDEQ 6(D) T? ³ No	H/ TMD Yes	AS DL? ³ No	EST. TOTAL DISCHARGE (MIL GAL)	PIPE FLOV	NK, LINE, VLINE [C. Used	EXPECTED TEST DATE(S) (mm/dd/yr)	INDICATE WHETHER OUTFALL IS NEW OF EXISTING
001	(deg/mm/sec)	(deg/iiiii/sec)	FILL WATER		162	NO	162	NO		New	USEU	(mm/dd/yr)	EXISTING
001													
002													
003													
004													
005													
006													
007													
008													
009													
010													
011													
012													1.02/15/17

Revised: 03/15/17

NOTE: To Comply with EPA's NPDES e-Reporting rule, MDEQ has implemented the use of U.S.EPA's NetDMR for the submittal of DMRs. Permittees required to submit DMRs must submit DMRs electronically using NetDMR. A training video and additional info can be found at <u>http://bit.ly/2gao6sW</u>. For additional information about NetDMR, please send an email to <u>netdmrhelp@mdeq.ms.gov</u> or contact Annette Brocks at 601-961-5252

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

ATTACHMENT B

MISSISSIPPI SECRETARY OF STATE CERTIFICATE OF GOOD STANDING



This is not an official certificate of good standing.

Name History			
Name		Name Type	
TEXAS GAS TRANSMISSION, LLC		Legal	
Business Information			
Business Type:	Limited Liability Company		
Business ID:	733779		
Status:	Good Standing		
Effective Date:	05/16/2003		
State of Incorporation:	DE		
Principal Office Address:	9 GREENWAY PLAZA SUITE 2800 HOUSTON, TX 77046		
Registered Agent			
Name			
CORPORATION SERVICE COMPANY 109 Executive Drive, Suite 3 Madison, MS 39110			
Officers & Directors			
Name	Title		
James D Jones 9 GREENWAY PLAZA STE. 2800 HOUSTON, TX 77046	Manager		
H DEAN JONES II 3800 FREDERICA ST			

4/13/23, 11:59 AM

OWENSBORO, KY 42304

Stanley C Horton 9 GREENWAY PLAZA STE. 2800 HOUSTON, TX 77046

Steven Barkauskus 9 Greenway Plaza Suite 2800 Houston, MS 77046 President

Treasurer