

AI: 88965

MSG130661



Rec'd via email:  
06/02/2025

# HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

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

GENERAL PERMIT MSG130661

(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. 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 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)

### 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): \_\_\_\_\_

O.C

OPERATOR INFORMATION

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

FACILITY/PROJECT NAME: \_\_\_\_\_

PIPELINE, STORAGE TANK OR FLOWLINE BEING TESTED IS:  NEW  USED

IF USED, LIST PRIOR MATERIAL SERVICE OF EQUIPMENT: \_\_\_\_\_

PHYSICAL SITE ADDRESS (If not available, indicate 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 \_ \_ \_ \_ \_

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and/or imprisonment for knowing violations.

*Mina B. Orsney*

Signature<sup>1</sup> (Must be signed by operator when different than owner)

Date Signed

Printed Name

Title

<sup>1</sup>This application shall be signed according to ACT6, T-17 of the General Permit, as follows:

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.
- For a municipal, state or other public facility, by principal executive officer, the mayor, or ranking elected official.

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

## 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.

OUTFALL NO.	LATITUDE <sup>1</sup> (deg/min/sec)	LONGITUDE <sup>1</sup> (deg/min/sec)	SOURCE OF FILL WATER	NEAREST RECEIVING STREAM <sup>2</sup>				EST. TOTAL DISCHARGE (MIL GAL)	STATUS OF TANK, PIPELINE, FLOWLINE ETC.		EXPECTED TEST DATE(S) (mm/dd/yr)	INDICATE WHETHER OUTFALL IS NEW OF EXISTING	
				NAME	ON MDEQ 303(D) LIST? <sup>3</sup>		HAS TMDL? <sup>3</sup>		New	Used			
					Yes	No	Yes						No
001													
002													
003													
004													
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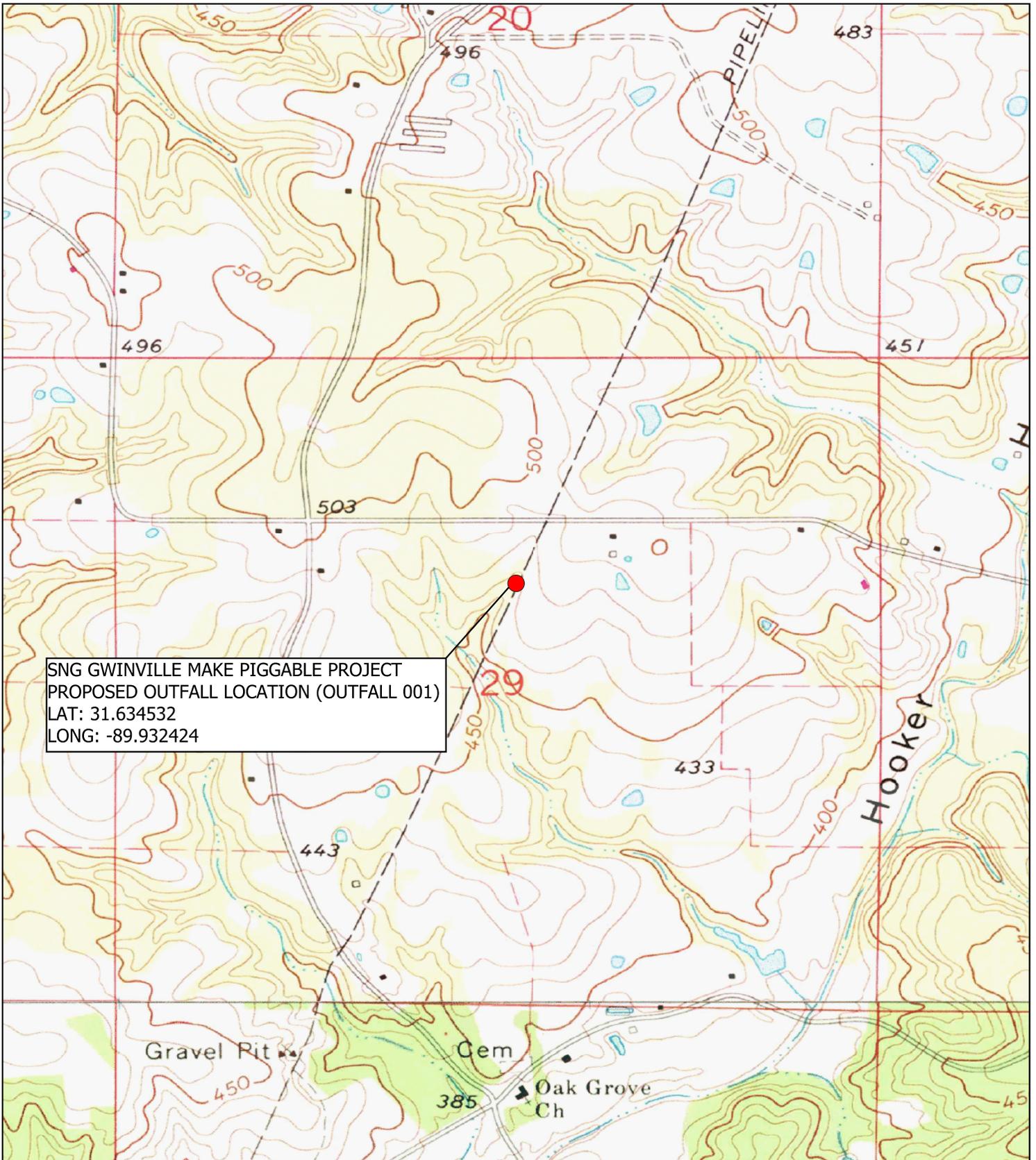
Revised: 03/15/17

**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 <http://bit.ly/2gao6sW>. For additional information about NetDMR, please send an email to [netdmrhelp@mdeq.ms.gov](mailto:netdmrhelp@mdeq.ms.gov) or contact Annette Brocks at 601-961-5252

<sup>1</sup> List the latitude and longitude of its location to the nearest 15 seconds.

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

<sup>3</sup> 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](http://www.deq.state.ms.us/MDEQ.nsf/page/TWB_Total_Maximum_Daily_Load_Section)



SNG GWINVILLE MAKE PIGGABLE PROJECT  
 PROPOSED OUTFALL LOCATION (OUTFALL 001)  
 LAT: 31.634532  
 LONG: -89.932424



**LEGEND**  
 ● Proposed Outfall Location

Source: USGS Topographic Maps



SOUTHERN NATURAL GAS CO., LLC GWINVILLE MAKE PIGGABLE PROJECT JEFFERSON DAVIS COUNTY, MISSISSIPPI		
<b>ALLEN</b> ENGINEERING AND SCIENCE		
Scale: 1" = 700'	DRAWN BY: BW	DATE: 04/22/25
	CHKD BY: TB	DATE: 04/22/25
PROJECT NO. 24296	CAD FILE: 24296 FIG01 D SLM 042225	
<b>SITE LOCATION MAP</b>		<b>FIGURE</b> 1



**Michael Watson**  
SECRETARY OF STATE

Office of the Secretary of State  
Jackson, Mississippi

## Certificate of Good Standing

I, MICHAEL WATSON, Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by The Mississippi Registration of Foreign Limited Liabilities Company Act to be filed in my office do hereby certify:

**SOUTHERN NATURAL GAS COMPANY, L.L.C.**

Registered the 4th day of August, 2011

A Delaware LIMITED LIABILITY COMPANY has filed the necessary documents in this office and has obtained a certificate of registration to do business in this state, under the provisions of The Mississippi Registration of Foreign Limited Liability Companies Act as shown by the records in this office.

I further certify that said Limited Liability Company has filed in this office an appointment of registration for service of process, with written acceptance endorsed thereon, and/or power of attorney, designating its agent and/or attorney for service of process in this State as:

C T CORPORATION SYSTEM  
645 LAKELAND EAST DRIVE, Suite 101  
FLOWOOD, MS 39232

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office, and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

Given under my hand and seal of office  
the 13th day of January, 2025

A handwritten signature in black ink that reads "Michael Watson".

Certificate Number: CN25204170

Verify this certificate online at <http://corp.sos.ms.gov/corpcnv/verifycertificate.aspx>



# State of Mississippi

TATE REEVES  
Governor

MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

CHRIS WELLS, EXECUTIVE DIRECTOR

May 28, 2025

Travis Beard  
Allen Engineering and Science  
1100-C Dauphin Street  
Mobile, Alabama 36604

Re: Letter of Authorization  
Southern Natural Gas Water – Gwinville  
Hydrostatic/Integrity Test  
Jefferson Davis County, Mississippi

Mr. Beard:

The Mississippi Department of Environmental Quality (MDEQ) has reviewed Southern Natural Gas's request for a temporary authorization to withdraw groundwater for the purpose of hydrostatic/integrity testing. Given that this is a one-time withdrawal, the volume requested, and the time frame for which the water is needed, this letter will serve as temporary authorization from the State of Mississippi for Southern Natural Gas, or its representative, to withdraw groundwater for the purpose of hydrostatic testing in Jefferson Davis County, subject to the following terms and conditions:

1. The source of the withdrawal shall be limited to the water wells associated with groundwater withdrawal permits MS-GW-00916 and MS-GW-00917.
2. The total withdrawal volume for the test shall be limited to a maximum of 30,000 gallons. However, in the event of rupture during testing, an additional 30,000 gallons of water may be withdrawn.
3. Coverage under the Hydrostatic Test General Permit must be received from MDEQ's Office of Pollution Control prior to withdrawing water for the project.
4. Within 10 working days after the project has been completed, Southern Natural Gas must submit to MDEQ's Office of Land and Water Resources the total volume of water withdrawn.

OFFICE OF LAND AND WATER RESOURCES

POST OFFICE BOX 2309 • JACKSON, MISSISSIPPI 39225-2309 • TEL: (601) 961-5555 • FAX: (601) 961-5228 • [www.mdeq.ms.gov](http://www.mdeq.ms.gov)

Facebook: @mdeq.ms • Twitter: @MDEQ • Instagram: @MDEQ

AN EQUAL OPPORTUNITY EMPLOYER

Mr. Beard  
May 28, 2025  
Page 2 of 2

If you have any questions regarding the authorization or need further assistance, please contact me at (601) 961-5775

Sincerely,

A handwritten signature in blue ink, appearing to read 'CHAS HAWKINS', with a long horizontal flourish extending to the right.

Chris Hawkins, P.E., Chief  
Permitting, Certification, and Compliance Division

Cc: Thomas Kelly - MDEQ