

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

July 14, 2025

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 15828 MLS 26-1 Class Change DeSoto County, Mississippi Providence Project No. 196-693

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 26-inch-diameter pipeline in DeSoto County, Mississippi. The volume of water for the hydrostatic test will be approximately 60,000 gallons from a nearby fire hydrant and discharged onto their existing right-of-way. All water will be discharged at a rate of approximately 300 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 included as **Attachment B**. If you have questions, please contact me 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,

Kelsey Docke

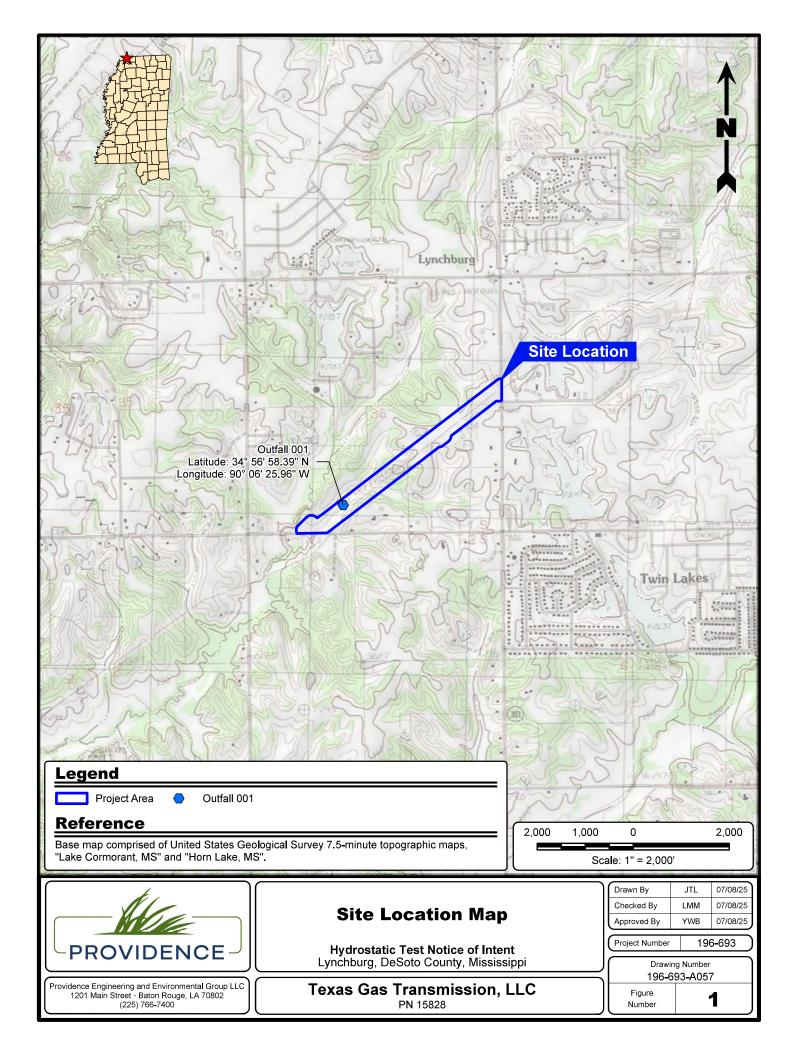
Kelsey Gocke Supervisor, Environmental Permitting Texas Gas Transmission, LLC

Enclosures: As stated

cc: Yvonne Baker, Providence Engineering and Environmental Group LLC

FIGURE 1

SITE LOCATION MAP



ATTACHMENT A

HYDROSTATIC TEST NOTICE OF INTENT

AI: 89266 MSG130662



Rec'd via email: 07/14/2025

HYDROSTATIC TEST NOTICE OF INTENT (HTNOI)

FOR COVERAGE UNDER MISSISSIPPI'S HYDROSTATIC TEST GENERAL PERMIT 0662 GENERAL PERMIT MSG13

(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. <u>Discharge of hydrostatic test</u> 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: 0 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)		
	OWN	ER INFORMATION			
OWNER CONTACT NAME &	POSITION: Kelse	ey Gocke, Superv	isor, Environmental Permitting		
OWNER EMAIL ADDRESS:	Kelsey.Gocke	@bwpipelines.c	om		
OWNER COMPANY NAME:	Texas Gas Tr	ansmission, LLC	2		
OWNER STREET (P.O. BOX): 9 Greenway Plaza, Suite 2800					
OWNER CITY: Houston		ST	TATE: Texas ZIP: 77046		
OWNER PHONE # (INCLUDE AREA CODE): (713) 479-8080					

OPERATOR INFO	RMATION				
OPERATOR CONTACT NAME & POSITION: Kelsey Gocke, Supervisor, Environmental Permitting					
OPERATOR EMAIL: Kelsey.Gocke@bwpipe	elines.com				
OPERATOR COMPANY: Texas Gas Transmission	on, LLC				
OPERATOR STREET (P.O. BOX): 9 Greenway Plaza					
OPERATOR CITY: HOUSTON					
OPERATOR PHONE # (INCLUDE AREA CODE): 77046					
FACILITY/PROJECT INFORMATION					
FACILITY/PROJECT NAME: Hydrostatic Test Disc	charge PN 15828				
PIPELINE, STORAGE TANK OR FLOWLINE BEING TESTED IS:					
IF USED, LIST PRIOR MATERIAL SERVICE OF EQUIPMENT: Not applicable					
PHYSICAL SITE ADDRESS (If not available, indicate nearest named road. Linear projects indicate beginning of project): STREET:					

COUNTY: DeSoto	ZIP: 38680			
Facility site tribal land ID (NA if not a	pplicable) Not Applicable			
TYPE OF TREATMENT (IF PROVI				
SIC Code <u>4922</u> , <u>4923</u> NAIC	Code <u>21120, 486210</u>			
certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a ystem designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the				

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.

Kelsey Jote 2025-07-14 11:50-05:00	7/14/2025
Signature ¹ (Must be signed by operator when different than owner)	Date Signed
Kelsey Gocke	Supervisor, Environmental Permitting
Printed Name	Title

¹This 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.

				NEAREST RECEIVING STREAM ²							US OF		
OUTALL NO.	LATITUDE ¹ (deg/min/sec)	LONGITUDE ¹ (deg/min/sec)	SOURCE OF FILL WATER	NAME			HAS TMDL? ³ Yes No		EST. TOTAL DISCHARGE (MIL GAL)	TANK, PIPELINE, FLOWLINE ETC. New Used		EXPECTED TEST DATE(S) (mm/dd/yr)	INDICATE WHETHER OUTFALL IS NEW OF EXISTING
001	34°56'58.39"N		Fire Hydrant	Johnson Creek					0.06	X		8/22/25	New
002			,										
003								<u> </u>					
004													
005													
006													
007													
008													
009													
010													
011													
012													1.00/15/15

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, 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	Manager
HOUSTON, TX 77046	
Ctarran Dankauslaus	
Steven Barkauskus 9 Greenway Plaza Suite 2800	Treasurer
> Groenway 1 laza Sulte 2000	

7/8/25, 1:55 PM

Houston, MS 77046

Scott Hallam 9 Greenway Plaza Suite 2800 Houston, TX 77046

President