



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

We Protect Hoosiers and Our Environment.

100 N. Senate Avenue • Indianapolis, IN 46204
(800) 451-6027 • (317) 232-8603 • www.idem.IN.gov

Eric J. Holcomb
Governor

Brian C. Rockensuess
Commissioner

May 31, 2024

VIA ELECTRONIC MAIL: Cale.LeBlanc@bwpipelines.com

Mr. Cale LeBlanc, Director, Environmental
Texas Gas Transmission, LLC
9 Greenway Plaza, Ste. 2800
Houston, TX 77046

Dear Mr. LeBlanc:

Re: IDEM Notice of Coverage – New
NPDES General Permit Coverage # ING670124
Texas Gas Transmission, LLC
PN14537 Pipeline Upgrade
Hydrostatic Testing of Petroleum Pipeline
Discharging Near 540 Belmont Dr.
Columbus, IN
Bartholomew County

Our office received your second Notice of Intent (NOI) on April 27, 2024, requesting NPDES general permit coverage for the above-mentioned project. We are pleased to inform you that your submittal is sufficient to comply with the NOI requirements of NPDES General Permit ING670000 for wastewater discharges from hydrostatic testing of commercial pipelines and that the project will be covered under the general permit. This project will involve hydrostatic testing of new pipeline which is intended to carry natural gas.

NPDES permit coverage is effective on **July 1, 2024**, from which date you are authorized to discharge under the terms and conditions of ING670000. The expiration date of general permit coverage under ING670000 is October 31, 2025. You will need to submit a request to terminate the general permit coverage when the project and potential discharge(s) have ended.

NPDES general permit ING670000 is available in IDEM's Virtual File Cabinet; go to <https://vfc.idem.in.gov/DocumentSearch.aspx> and search for Document # 83083931. You may also contact the permit manager listed below to request that any documents be sent to you. You are responsible for following the general permit requirements contained therein.

One condition of your permit requires periodic reporting of several effluent parameters. You are required to submit both federal discharge monitoring reports (DMRs) and state Monthly Monitoring Reports (MMRs) on a routine basis. The MMR form can be found on IDEM's web site at <https://www.in.gov/idem/cleanwater/wastewater-compliance/wastewater-reporting-forms-notice-and-instructions/>. Please note that all NPDES permit holders are required to submit their monthly monitoring data to IDEM using NetDMR. Please contact Helen Demmings at (317) 232-8815 for more information on NetDMR.

IDEM shall serve notice of its decision to accept your facility for coverage under the general permit in accordance with the requirements of 327 IAC 5-3-14. It should also be noted that any appeal must be filed under procedures outlined in IC 13-15-6, IC 4-21.5, and the enclosed Public Notice. The appeal must be initiated by filing a petition for administrative review with the Office of Environmental Adjudication (OEA) within fifteen (15) days of the emailing of an electronic copy of this letter or within eighteen (18) days of the mailing of this letter. A copy must also be served upon IDEM. Addresses are as follows:

Director
Office of Environmental Adjudication
Indiana Government Center North
Room 103
100 N. Senate Ave.
Indianapolis, IN 46204

Commissioner
Indiana Department of Environmental Management
Indiana Government Center North
Room 1301
100 N. Senate Ave.
Indianapolis, IN 46204

The Office of Environmental Adjudication will provide parties who request review of this acceptance for coverage with notice of prehearing conferences, preliminary hearings, hearing, and stays or orders disposing of all proceedings. Nonparties may receive such notices without intervening and formally becoming parties in the proceeding by requesting copies of such notices from the Office of Environmental Adjudication.

If you have any questions regarding this letter, please contact Ms. C. Anne Burget of my staff at (317) 234-8745 or you may contact either of us via email at owqwwper@idem.IN.gov.

Sincerely,

Catherine Hess

Catherine Hess, Chief
Permits Administration Section
Office of Water Quality

Attachments

cc: Kelsey Gocke (Kelsey.Gocke@bwpipelines.com)

ATTACHMENT 1

**TEXAS GAS TRANSMISSION, LLC
PIPELINE UPGRADE PN 14537
COLUMBUS / BARTHOLOMEW COUNTY**

NPDES GENERAL PERMIT APPROVAL # ING670124

EFFECTIVE DATE : JULY 1, 2024

AUTHORIZED OUTFALL(S)

The following outfalls are authorized for coverage under this general permit approval:

OUTFALL	LATITUDE	LONGITUDE	RECEIVING WATER
001	39° 12' 11.26"	-85 ° 59' 46.63"	UPLAND AREA TO WOLF CREEK

Attachment 2 - Discharge Limitations

Table 1

Parameter	Quantity or Loading			Quality or Concentration			Monitoring Requirements	
	Monthly average	Daily maximum	Units	Monthly average	Daily maximum	Units	Measurement Frequency	Sample type
Flow [1]	Report	Report	MGD	----	----	----	Daily	24-Hr. Total
Total Flow	----	Report	Mgal	----	----	----	1 x Monthly	Recorder total
Oil and grease	----	----	----	-----	15	mg/l	1 x Daily	Grab [3]
Total Suspended Solids (TSS)	----	----	----	-----	45	mg/l	1 x Daily	Grab [2]
Total Residual Chlorine (TRC) [4,5]	----	----	----	----	0.02	mg/l	1 x Daily	Grab

Table 2

Parameter	Quality or Concentration			Monitoring Requirements	
	Daily minimum	Daily maximum	Units	Measurement Frequency	Sample type
pH	6.0	9.0	s.u.	Daily	Grab

- [1] Measurement of flow is required. The discharge flow volume may be estimated by calculating the volume of water which can be contained in the section of pipeline being tested.
- [2] Grab samples shall be taken of the hydrostatic test water being discharged as it leaves the pipeline or after receiving treatment at the beginning and at the end of the discharge and two (2) times during the discharge at evenly spaced time intervals. All of the grab samples shall be combined into one (1) composite sample at the end of each test period for analysis and reported as the maximum value for that sampling period.
- [3] Grab samples shall be taken of the hydrostatic test water as it leaves the pipeline or after receiving treatment at the beginning and at the end of the discharge and two (2) times during the discharge at evenly spaced time intervals. All of the grab samples shall be tested individually and their arithmetic mean reported as the maximum value for that sampling period.
- [4] The effluent limitation for Total Residual Chlorine (TRC) shall apply whenever chlorinated intake water is used to hydrostatically test pipelines. For any months in which chlorinated intake water is not used for hydrostatically testing, the permittee shall be allowed to report "N/A" on the Discharge Monitoring Report (DMR) for this pollutant.

- [5] The daily maximum water quality-based effluent limit (WQBEL) for chlorine is greater than or equal to the limit of detection (LOD) but less than the limit of quantitation (LOQ) as defined below which is specified in the permit. Compliance with the daily maximum limit will be demonstrated if the observed effluent concentrations are less than the LOQ.

<u>Parameter</u>	<u>Test Method</u>	<u>LOD</u>	<u>LOQ</u>
Chlorine	4500-Cl-D	0.02 mg/l	0.06 mg/l
Chlorine	4500-Cl-E	0.02 mg/l	0.06 mg/l
Chlorine	4500-Cl-G	0.02 mg/l	0.06 mg/l

Case-Specific LOD/LOQ

The permittee may determine a case specific LOD or LOQ using the analytical method specified above, or any other test method which is approved by the Commissioner prior to use. The LOD shall be derived by the procedure specified for method detection limits contained in 40 CFR Part 136, Appendix B, and the LOQ shall be set equal to 3.18 times the LOD. Other methods may be used if first approved by the Commissioner.

**STATE OF INDIANA
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**

PUBLIC NOTICE NO. 20240531-ING670124-GP

DATE OF NOTICE: May 31, 2024

The Office of Water Quality approves the following New GENERAL NPDES PERMIT coverage.

NEW COVERAGE under NPDES GENERAL PERMIT ING670000:

TEXAS GAS TRANSMISSION, LLC; PN 14537 PIPELINE UPGRADE PROJECT, NPDES GENERAL PERMIT COVERAGE NO. ING670124. This pipeline construction project will terminate in Columbus, IN (**BARTHOLOMEW COUNTY**). The permittee has submitted a sufficient Notice of Intent to obtain new coverage under ING670000, the NPDES General Permit for Hydrostatic Testing of Commercial Pipelines. This project involves hydrostatic testing of new pipeline that is being constructed to carry natural gas. The receiving stream for the discharge is an upland, vegetated area that drains to Wolf Creek. The effective date of general permit coverage is July 1, 2024. For more information regarding this permit action, please contact Ms. C. Anne Burget at (317) 234-8745 or cburget@idem.IN.gov.

Notice of Right to Administrative Review

If you wish to challenge this permit coverage, you must file a Petition for Administrative Review with the Office of Environmental Adjudication (OEA) and serve a copy of the petition upon IDEM. The requirements for filing a Petition for Administrative Review are found in IC 4-21.5-3-7, IC 13-15-6-1 and 315 IAC 1-3-2. A summary of the requirements of these laws is provided below.

A Petition for Administrative Review must be filed with the Office of Environmental Adjudication (OEA) within fifteen (15) days of the issuance of this notice (eighteen (18) days if you received this notice by U.S. Mail), and a copy must be served upon IDEM. Addresses are:

Director
Office of Environmental Adjudication
Indiana Government Center North
Room N103
100 North Senate Avenue
Indianapolis, Indiana 46204

Commissioner
Indiana Department of Environmental Management
Indiana Government Center North
Room 1301
100 North Senate Avenue
Indianapolis, Indiana 46204

The petition must contain the following information:

1. The name, address and telephone number of each petitioner.
2. A description of each petitioner's interest in the permit.
3. A statement of facts demonstrating that each petitioner is:
 - a. a person to whom the order is directed;
 - b. aggrieved or adversely affected by the permit; or
 - c. entitled to administrative review under any law.
4. The reasons for the request for administrative review.
5. The particular legal issues proposed for review.
6. The alleged environmental concerns or technical deficiencies of the permit.
7. The permit terms and conditions that the petitioner believes would be appropriate and would comply with the law.
8. The identity of any persons represented by the petitioner.
9. The identity of the person against whom administrative review is sought.
10. A copy of the permit that is the basis of the petition.
11. A statement identifying petitioner's attorney or other representative, if any.

Failure to meet the requirements of the law with respect to a Petition for Administrative Review may result in a waiver of your right to seek administrative review of the permit. Examples are:

1. Failure to file a Petition by the applicable deadline;
2. Failure to serve a copy of the Petition upon IDEM when it is filed; or
3. Failure to include the information required by law.

If you seek to have a permit stayed during the administrative review, you may need to file a Petition for a Stay of Effectiveness. The specific requirements for such a Petition can be found in 315 IAC 1-3-2 and 315 IAC 1-3-2.1.

Pursuant to IC 4-21.5-3-17, OEA will provide all parties with notice of any pre-hearing conferences, preliminary hearings, hearings, stays, or orders disposing of the review of this action. If you are entitled to notice under IC 4-21.5-3-5(b) and would like to obtain notices of any pre-hearing conferences, preliminary hearings, hearings, stays, or orders disposing of the review of this action without intervening in the proceeding you must submit a written request to OEA at the address above.

If you have procedural or scheduling questions regarding your Petition for Administrative Review, please refer to OEA's website at <https://www.in.gov/oea/>.



**NOTICE OF INTENT (NOI) LETTER
FOR ING670000 HYDROSTATIC TESTING
OF COMMERCIAL PIPELINES
GENERAL NPDES PERMIT**

State Form 55918 (R / 12-20)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

A scanned copy of all completed documents may be sent via e-mail to OWQ@idem.IN.gov. Online fee payments may be made at www.in.gov/idem/6973.htm.

Alternatively, this form, fee payment, and required attachments may be mailed to:

Indiana Department of Environmental Management
Office of Water Quality, Permits Administration Section
100 North Senate Avenue, IGCN Room 1255
Indianapolis, IN 46204-2251

INSTRUCTIONS

- This form must be used to apply for coverage under the General NPDES Permit for wastewater from hydrostatic testing of commercial pipelines pursuant to NPDES Permit No. ING670000.
- This form must be completed fully.
- If you do not use a computer to complete this form, please type or print in ink. Do not use white-out to correct errors.
- Further item-specific instructions are provided in Appendix A at the end of this form.

For questions regarding this form, the required attachments, or permit requirements, contact IDEM General NPDES Permits staff at (317) 232-8704 or (800) 451-6027, ext. 28704 (within Indiana).

ELIGIBILITY REQUIREMENTS

This general permit covers discharge of hydrostatic test water to surface waters of the State from pipelines and flowlines used for the transportation of natural gas, crude oil, and liquid or gaseous petroleum hydrocarbons, except as stated below.

The following discharges are NOT authorized by this permit:

- 1) direct discharges into waters designated as an Outstanding National Resource Water (ONRW) defined at IC 13-11-2-149.5 or an Outstanding State Resource Water (OSRW) defined at IC 13-11-2-149.6 and listed at 327 IAC 2-1.3-3(d);
- 2) those discharging to a receiving stream when the discharge results in an increased ambient concentration of a pollutant which contributes to the impairment of the receiving stream for that pollutant as identified on the current 303(d) list of impaired waters;
- 3) those containing water treatment additives (WTAs) which have not received prior written approval from IDEM for the specific additive, use, and dosage at the particular site for which the Notice of Intent (NOI) is submitted; and
- 4) those resulting from the cleaning of tanks and/or pipelines;
- 5) storm water discharges associated with construction or industrial activity, as defined at 40 CFR 122.26;
- 6) discharges to combined or sanitary sewer systems;
- 7) discharges that are commingled with hazardous wastes or hazardous materials;
- 8) bypasses or upsets of any kind from a treatment works or collection system;
- 9) discharges that contain pollutants classified as bioaccumulative chemicals of concern (BCCs); and
- 10) discharges for which the Commissioner requests an individual permit application.

By checking this box, I certify that this facility meets all eligibility requirements of this general permit.

APPLICATION TYPE

NEW
RENEWAL
MODIFICATION

PERMIT NUMBER, IF APPLICABLE

OTHER PERMIT NUMBER(S) APPLICABLE TO SITE

DESCRIPTION OF PROPOSED MODIFICATION, IF APPLICABLE

PART A: GENERAL INFORMATION FOR FACILITY

1. PIPELINE OWNER'S NAME and SPECIFIC PIPELINE PROJECT NAME (See Appendix A)

Texas Gas Transmission, LLC; Pipeline Upgrade PN14537

2. PIPELINE OWNER'S MAILING ADDRESS (See Appendix A)

STREET ADDRESS (number and street)
9 Greenway Plaza, Ste. 2800

CITY
Houston

STATE
TX

ZIP CODE
77046

3. FACILITY PHYSICAL LOCATION / WHERE TESTING WILL OCCUR

STREET ADDRESS (number and street)
Near 540 Belmont Drive

CITY
Columbus

STATE
IN

ZIP CODE
47201

PARENT COMPANY / OWNER'S COMPLETE MAILING ADDRESS, IF DIFFERENT FROM ABOVE			5a. FACILITY SIC CODE	5b. FACILITY NAICS CODE	6. COUNTY OF PIPELINE'S TESTING LOCATION(S)			
COMPANY NAME Boardwalk Pipelines			4922	486210	Bartholomew			
STREET ADDRESS (number and street) 9 Greenway Plaza, Ste. 2800			7. LATITUDE AND LONGITUDE OF INITIAL FACILITY SITE (See Appendix A)					
			Latitude			Longitude		
			Degree	Minute	Second	Degree	Minute	Second
CITY Houston	STATE TX	ZIP CODE 77046	39	12	6.06	85	59	48.22
8. What is the nature of the primary business conducted at the facility or site? (Example: natural gas production and distribution) Federal Energy Regulatory Commission-regulated natural gas transmission pipeline								
9. Provide a brief description of the facility operations that result in the discharge. (Example: hydrostatic testing of a new natural gas pipeline) <u>Also include information regarding the method which is used for flow measurement at this site.</u> Testing of new pipe associated with the upgrade of a natural gas transmission pipeline per Pipeline and Hazardous Materials Safety Administration (PHMSA) requirements.								

PART B: CONTACT INFORMATION FOR RESPONSIBLE OFFICIAL (AUTHORIZED NOI SIGNATORY)	
Provide information regarding the <u>responsible official</u> who has the authorization to sign this NOI in accordance with 40 CFR 122.22. If the responsible official wishes to delegate signatory authority for reports and other correspondence related to this NOI, that delegation must be made in writing to IDEM. This delegation of authority may occur either via this NOI or via a letter (signed and dated by the responsible official) which shall be submitted to the address at the top of the front page of this form.	
10. NAME OF RESPONSIBLE OFFICIAL	11. NAME OF ALTERNATE PERSON DELEGATED TO SIGN NOI AND ASSOCIATED DOCUMENTS
Cale LeBlanc	
RESPONSIBLE OFFICIAL'S TITLE	ALTERNATE SIGNATORY PERSON'S TITLE
Director, Environmental	
RESPONSIBLE OFFICIAL'S TELEPHONE NUMBER	ALTERNATE SIGNATORY PERSON'S TELEPHONE NUMBER
(225) 282-0389	
RESPONSIBLE OFFICIAL'S PERSON'S E-MAIL ADDRESS	ALTERNATE SIGNATORY PERSON'S E-MAIL ADDRESS
Cale.LeBlanc@bwpipelines.com	

PART C: OTHER CONTACT INFORMATION			
NAME OF PERSON RESPONSIBLE FOR 12. DISCHARGE MONITORING REPORTS		RESPONSIBLE PERSON AND COMPANY NAME	
		Kelsey Gocke Texas Gas Transmission, LLC	
TELEPHONE NUMBER 713-479-8080		STREET ADDRESS (number and street) 9 Greenway Plaza- Suite 2800	
E-MAIL ADDRESS Kelsey.Gocke@bwpipelines.com		CITY Houston	STATE TX
		ZIP CODE 77046	
13. ANNUAL FEE AND FINANCIAL CONTACT AND BILLING ADDRESS		RESPONSIBLE PERSON AND COMPANY NAME	
		Same as 12.	
TELEPHONE NUMBER		STREET ADDRESS (number and street)	
E-MAIL ADDRESS		CITY	STATE
		ZIP CODE	
14. OPERATOR / OTHER CONTACT AND MAILING INFORMATION (OPTIONAL)		CONTACT PERSON AND COMPANY NAME	
CONTACT TELEPHONE NUMBER		STREET ADDRESS (number and street)	
CONTACT E-MAIL ADDRESS		CITY	STATE
		ZIP CODE	

PART D: SOURCE WATER INFORMATION

Please provide the volume of the water, in millions of gallons per day (MGD), that you propose to withdraw from each of the following sources for use for the hydrostatic testing of commercial pipelines.

WELL WATER	SURFACE WATER	PUBLIC WATER SUPPLY	UNITS
		0.105	MGD

PART E: TYPE OF PIPE TO BE HYDROSTATICALLY TESTED (mark all that apply.) For testing of any existing pipeline, (i.e. which has previously contained any product), please describe the product it contained.

NEW (Unused)	EXISTING	PIPELINE CONTENT INFORMATION
<input checked="" type="checkbox"/>	<input type="checkbox"/>	

PART F: OUTFALL INFORMATION:

Provide the following information for all outfalls / discharges to be covered by this general permit. You may attach additional sheets if necessary.

15. OUTFALL NUMBER	16. LATITUDE			16. LONGITUDE			17. RECEIVING WATER	18. FOR ANY DISCHARGE INTO A STORM SEWER, IDENTIFY THE STORM SEWER OWNER	19. ANTICIPATED DAILY VOLUME OF DISCHARGE in MGD AND METHOD OF DETERMINATION OF VOLUME
	DEG.	MIN	SEC.	DEG.	MIN.	SEC.			
001	39	12	11.26	85	59	46.63	Upland area draining to Wolf Creek		0.009 which is volume of water needed for test.

PART G: EFFLUENT CHARACTERISTICS

Provide the following information for all outfalls / discharges to be covered by this permit. This page may be copied and used to report data for every discharge site.

- A. Existing Sources – Provide measurements for the parameters listed in the left-hand column, unless waived by the permitting authority. (See Appendix A)
- B. New Dischargers – Provide estimates for the parameters listed in the left-hand column below, unless waived by the permitting authority. In lieu of the number of measurements taken, provide the source of estimated value. (See Appendix A)

	(1) 20. Maximum Daily Value (Include units)		(2) 21. Average Daily Value Over Last Year (Include units)		22. (3) or (4)	
	Mass	Concentration	Mass	Concentration	Number of Measurements Taken (last year)	Source of Estimate (if new discharger)
Biochemical Oxygen Demand (BOD)		N/A				3
Total Suspended Solids (TSS)		45 mg/l				3
Fecal coliform (if present or believed present) (units in count/100 ml)		N/A				3
Total Residual Chlorine (if chlorine or chlorinated water is used)		0.02 mg/l				3
Oil and Grease		15 mg/l				3
Ammonia (as N)		N/A				3
Discharge Flow	VALUE in MGD		VALUE IN MGD			3
		0.105				
Temperature (Winter; in degrees F)	VALUE in DEGREES FAHRENHEIT		VALUE in DEGREES FAHRENHEIT			3
		40				
Temperature (Summer; in degrees F)	VALUE in DEGREES FAHRENHEIT		VALUE in DEGREES FAHRENHEIT			3
		72				
pH (S.U.)	MINIMUM		MAXIMUM			3
		6		9		

PART G: ADDITIONAL TABLE for EFFLUENT CHARACTERISTICS (if applicable)

Provide the following information for all outfalls/discharges to be covered by this permit. This page may be copied and used to report data for every discharge site.

- A. Existing Sources – Provide measurements for the parameters listed in the left hand column, unless waived by the permitting authority. (See Appendix A A)
- B. New Dischargers- Provide estimates for the parameters listed in the left-hand column below, unless waived by the permitting authority. In lieu of the number of measurements taken, provide the source of estimated value. (See Appendix A A)

	(1) 20. Maximum Daily Value (include units)		(2) 21. Average Daily Value Over Last Year (include units)		22. (3)	or	(4)
	Mass	Concentration	Mass	Concentration	Number of Measurements Taken (last year)		Source of Estimate (if new discharger)
Biochemical Oxygen Demand (BOD)							
Total Suspended Solids (TSS)							
Fecal coliform (if present or believed present) (units in count/100 ml)							
Total Residual Chlorine (if chlorine or chlorinated water is used)							
Oil and Grease							
Ammonia (as N)							
Discharge Flow	VALUE in MGD		VALUE IN MGD				
Temperature (Winter; in degrees F)	VALUE in DEGREES FAHRENHEIT		VALUE in DEGREES FAHRENHEIT				
Temperature (Summer; in degrees F)	VALUE in DEGREES FAHRENHEIT		VALUE in DEGREES FAHRENHEIT				
pH (S.U.)	MINIMUM		MAXIMUM				

PART H: WATER TREATMENT ADDITIVES (WTAs)

Note that the only additives that may be used under this permit are those that have been previously approved for use at this site by the Indiana Department of Environmental Management and that are already in use at the time of this submittal. See the Appendix A A for more information on WTAs or if you will need to use a water treatment additive that has not yet been approved by IDEM.

23. OUTFALL NUMBER	24. WATER TREATMENT ADDITIVES TO BE USED (Attach a copy of IDEM approval letter for each WTA to be used.)
001	Chlorine will be neutralized with a dechlorination product, such as sulfur dioxide or sulfite salts (i.e., sodium sulfite, sodium bisulfite, or sodium metabisulfite).

PART I: IDENTIFICATION OF POTENTIALLY AFFECTED PERSONS

25. Pursuant to IC 4-21.5 and IC 13-15-3-1 each applicant for general permit coverage is required to provide a listing of all persons who are potentially affected by the discharge(s) to be covered under the general permit. **PLEASE NOTE THAT MAILING LABELS ARE ALSO REQUIRED WITH THIS SUBMITTAL.** (See instructions in Appendix A.)

Please list here any and all persons whom you have reason to believe have a substantial or proprietary interest in this matter, or could otherwise be considered to be potentially affected under the law. Failure to notify any person who is later determined to be potentially affected could result in voiding our decision on procedural grounds. To ensure conformance with the Administrative Orders and Procedures Act (AOPA) and to avoid reversal of a decision, please list all such parties. Attach additional names and addresses on a separate sheet of paper, as needed. **NOTE: Email addresses for potentially affected persons are NOT required; but the information is very helpful.**

Name: Dan and Jean Reynolds	Name:
Street address (number and street): 6740 W SR 46	Street address (number and street):
City/State/ZIP code: Columbus, IN 47201	City/State/ZIP code:
E-mail Address:	E-mail Address:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
E-mail Address:	E-mail Address:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
E-mail Address:	E-mail Address:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
E-mail Address:	E-mail Address:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
E-mail Address:	E-mail Address:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
E-mail Address:	E-mail Address:
Name:	Name:
Street address (number and street):	Street address (number and street):
City/State/ZIP code:	City/State/ZIP code:
E-mail Address:	E-mail Address:

PART J: ADDITIONAL ATTACHMENTS**26. PROOF OF PUBLICATION**

The applicant is required to publish a notice in a local newspaper of largest general circulation in the area of the discharge. The applicant is required to provide proof of that publication with this NOI letter. This legal ad must be published in the newspaper for a minimum of one day. Be advised that notices without the proper information will not be sufficient, and IDEM will require that a new public notice be placed in the newspaper. If the proof of publication is not available a legible photocopy of the article that contains the name of the newspaper and the date the article was run is also acceptable. Please use the following template statement for the newspaper notice:

(Facility name, address, address of the location of the discharging facility) "is submitting a Notice of Intent to notify the Indiana Department of Environmental Management of our intent to comply with the requirements under the National Pollutant Discharge Elimination System (NPDES) general permit ING670000 for discharges of hydrostatic test water from commercial pipelines. Discharge will be to *(supply the names of the streams or water bodies receiving the discharge(s))*."

"Any person wishing further information about this discharge may contact *(facility contact person's name and telephone number and e-mail address)*. The decision to issue coverage under this NPDES general permit for this discharge is appealable per IC 13-15-6. Any person who wants to be informed of IDEM's decision regarding granting or denying coverage to this facility under this NPDES general permit, and who would like to be informed of procedures to appeal the decision may contact IDEM at OWQWWPER@Idem.IN.gov and ask to be placed on a mailing list to receive notification of IDEM's decision."

27. REQUIRED MAPS

The following maps are required:

1. A topographical map must be submitted with this NOI which shall include the following items:
 - (A) the location of the operation shown clearly and identified by name and by mark;
 - (B) the location of each numbered outfall shown clearly and identified by number and by mark;
 - (C) the receiving streams that each outfall discharges to shown clearly and identified by name;
 - (D) any existing permanent structures or roads in the area shown clearly and identified by name; and
 - (E) the location of any surface water intake structures
2. A site map must also be submitted, which must show and identify the significant structures, including all piping, diked areas, all outfall and sampling locations, and any surface water intake structures.
3. A flow schematic diagram(s) that shows how the process wastewater travels through the facility to the point(s) where it is discharged (outfall point). This map may be added to the site map if it will be legible.

Maps should be no larger than 11" x 17" and in color, if possible.

PART K: APPLICATION FEE

28. A \$50 fee is required to be submitted with this NOI in accordance with IC 13-18-20-12. The \$50 fee is applicable for each new NOI, renewal, and modification. Updates to information in Parts B and C shall not be subject to the \$50 fee for modifications. Checks or money orders shall be made payable to IDEM. IDEM also accepts e-checks and some credit card payments via its Online Payment Portal at <https://www.in.gov/idem/6973.htm>.

PART L: SIGNATORY CERTIFICATION STATEMENT

29. The NOI must be signed by the Responsible Official (as identified in Part B, item 10; also see Appendix A):

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 gather and evaluate 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 fine and imprisonment for knowing violations.

I swear or affirm, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10 and IC 13-15-7-1(3), that the statements and representations in this **NOI** are true, accurate, and complete.

Cale LeBlanc Printed or Typed Name of Responsible Official	Director, Environmental Title
DocuSigned by:  Signature B1CDDA5480...	3/28/2024 2:05:07 PM CDT Date signed (month, day, year)

- PART M:** Please use the address at the top of page 1 of the NOI form to submit completed NOI form, attachments, and fee.

APPENDIX A / SUPPLEMENTAL INSTRUCTIONS

Application type: For the purposes of this form, a modification includes removing an existing outfall, adding an outfall in a new location, updating the volume of discharge anticipated, or updating an NOI wastewater characterization table if determined that actual sampling data differs significantly from what was originally submitted in the Notice of Intent. Outfall locations are considered, for the purposes of this permit, to be discrete points. If an outfall is relocated, an NOI requesting permit modification must be submitted, requesting to remove the outfall from its previous location, and add a new outfall with a new outfall number to the permit coverage. Changes in contact information must be reported to IDEM, but may be done via a letter on company letterhead or an updated NOI. Either document is required to be signed by the signatory (Part B Item 10) or delegated signatory authority (Part B Item 11). When simply updating contact information, neither a fee, potentially affected parties list, nor proof of publication in a newspaper is required.

Part A, Item 1: Provide the name of the OWNER of the pipeline as well as the name of the specific pipeline project that is to be permitted, differentiated from other projects by name/location and/or project number.

Part A, Items 2 and 3: Provide address or location description of pipeline's start, terminal/end, location of discharge, and/or other location information. If the facility's mailing address is not sufficient to allow a person who wishes to visit the discharge site to find it, then section 3 should be a description of the testing site's location. Often, the testing location will not have a physical address, so please attach additional sheets if the space provided in the NOI is not big enough to provide a proper location description.

Part A, Item 5: Enter the four digit Standard Industrial Classification (SIC) code and the six-digit North America Industry Classification System (NAICS) code which identifies the facility's primary activity. SIC codes can be obtained from the Standard Industrial Classification Manual, 1987, by accessing the Occupational Safety and Health Administration (OSHA) website https://www.naics.com/hrf_faq/how-can-i-determine-the-correct-sic-code-for-my-business/ or by contacting the Indiana Department of Workforce Development. NAICS codes can be found at <https://www.NAICS.com/naics-to-sic-sic-to-naics-crosswalks/>.

Part A, Item 7: The latitude and longitude of the center of the facility site must be in the degrees/minutes/seconds format. Longitude and latitude can be obtained from United States Geological Survey (USGS) quadrangle or topographic map, by calling (888) 275-8747, or by accessing a locational (geocoding) website and conducting a search based on the facility street address. You may also access this information with the use of a handheld GPS unit at the site.

Longitude and Latitude in decimal degrees may be converted to degrees/minutes/seconds for proper entry on the NOI by following this example:

Convert decimal latitude 45.1234567 to degrees/minutes/ seconds

1. The numbers to the left of the decimal point are degrees: 45
2. For the minute value, multiply the first four numbers to the right of the decimal point by 0.006: $1234 \times 0.006 = 7.404$
3. The numbers to the left of the decimal point in the result obtained in (2) are the minutes: 7
4. To calculate the second value, multiply the remaining three numbers to the right of the decimal from the result obtained in (2) by 0.06: $404 \times 0.06 = 24.24$.
5. The result is 24.24 seconds.
6. The conversion of 45.1234567 is 45° (degrees), 7' (minutes), and 24.24" (seconds).

Part B, item 10: To be authorized to sign NPDES documents, a Responsible Official or Responsible Person must meet at least one of the following requirements:

- a) For a corporation, the responsible person must be a corporate officer, which means either of the following:
 - (1) a president, secretary, treasurer, any vice president of the corporation in charge of a principal business function, or any other person who performs similar policymaking or decision making functions for the corporation; or
 - (2) the manager of one or more including of the following: manufacturing, production, or operation of facilities, provided the manager is authorized to make management decisions which govern the operation of the regulated facility. This would include having the explicit or implicit duty of making major capital investment recommendations, and initiating and directing other comprehensive measures to assure long-term environmental compliance with environmental laws and regulations. The manager is authorized to ensure that the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements. This person has been given authority to sign documents in accordance with corporate procedures.
- b) For a partnership or sole proprietorship, the responsible person must be a general partner or the proprietor, respectively.
- c) For a municipality, state, federal, or other public agency or political subdivision thereof, the responsible official must be either a principal executive officer or ranking elected official. For purposes of this section, a principal executive officer of a Federal agency is:
 - (1) The chief executive officer of the agency, or
 - (2) A senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrator of U.S. EPA).

Part F, Item 15: Enter a three number designation for each point of discharge, for example, 001, 002, 003, etc.

Part F Item 16, see Part A, Item 7, above.

Part F, Item 17: Enter the name of the water of the state to which discharge will be directed for each outfall, as either the body of water itself, if the discharge is direct, or taking into account tributaries if applicable. EXAMPLE: "Upland area draining to Stone Creek", or "Connor Ditch to Stone Creek"; or "unnamed tributary to Connor Ditch to Stone Creek". Please label all water bodies on the map.

Part F, Item 18: If discharge first enters a storm sewer which then carries it to waters of the state, then please provide the name of the owner of the storm sewer. EXAMPLE: "City of Muncie Department of Public Works" or "LaPorte Storm Sewer System".

Part G, items 20 and 21: All pollutant data must be reported as concentration and as total mass. Total mass is the total weight of pollutants discharged over a day. Use the following abbreviations for units:

Concentration

ppm.....parts per million
 mg/l..... milligrams per liter
 ug/l.....micrograms per liter
 ng/l.....nanograms per liter

Mass

lbs.....pounds
 ppb.....parts per billion
 g.....grams

Existing Sources

At least one analysis is required for each pollutant or parameter listed that is known or believed to be present. Data reported must be representative of the facility's current operation (average daily value over the previous 365 days). Pollutants not present should be marked N/A.

The pollutants or parameters required to be tested for include the following: average flow, biochemical oxygen demand (BOD), total suspended solids (TSS), fecal coliform (if believed present), pH, total residual chlorine (if chlorine or chlorinated water is used), temperature (winter and summer), oil and grease, and ammonia (as N). The analysis of these pollutants or parameters must be done in accordance with procedures promulgated in 40 CFR Part 136. Grab samples must be used for pH, total suspended solids (TSS), temperature, residual chlorine, oil and grease, and fecal coliform. For all other pollutants, 24-hour composite samples must be used. Any further questions on sampling or analysis should be directed to (317) 232-8704 or OWQWWPER@idem.IN.gov.

The Commissioner may request that additional testing be done, if appropriate and on a case by case basis under Section 308 of the Clean Water Act (CWA). If a pollutant is expected to be present solely as a result of its presence in intake water, this information should be provided on a separate piece of paper submitted with the Notice of Intent form.

New Dischargers

An estimated maximum daily and average daily value for each pollutant or parameter must be provided (exceptions noted on the NOI form). Sampling and analysis are not required with the initial Notice of Intent. If, however, data from such analyses are available, then the data should be reported. The source of the estimates should be provided in the second column of item 22. Determination of whether or not a pollutant will be present in the discharge should be based on knowledge of the proposed facility's use of maintenance chemicals and any analyses of this facility's effluent or of effluent from a similar facility or outfall. Estimates may also be based on available in-house or contractor's engineering reports, or on any other studies performed on the proposed facility. If a pollutant is expected to be present solely as a result of its presence in intake water, this information should be provided on a separate piece of paper and submitted with the Notice of Intent form. The following codes may be used to report any results:

Engineering Study Code

Actual data pilot plants.....	1
Estimates from other engineering studies	2
Data from other similar plants.....	3
Best professional estimates.....	4
Others	Specify on the form

Testing Waivers

To request a waiver from reporting any of these pollutants or parameters, the applicant (whether a new or existing discharger) must submit to IDEM a written request specifying the pollutants or parameters that should be waived, and the reason(s) for requesting a waiver. This request may be submitted to the permitting authority either before submitting the NOI, or with the NOI. The permitting authority may waive the requirements for information about any pollutant or parameter if s/he determines that less stringent reporting requirements are adequate to support approval of discharge permit coverage.

Part H, Item 24: Water treatment additives may only be used for waters discharging through outfalls covered by this general permit, and only after the applicant has received prior approval from IDEM. To apply for approval of a water treatment additive, State Form 50000 should be submitted to IDEM either before or with your Notice of Intent; Form 5000 may be found at <https://www.in.gov/ide/5157.htm>. For more information, please contact us at (317) 232-8704 or OWQWWPER@idem.IN.gov.

Part I, Item 25: Identification of Potentially Affected Persons

The Administrative Orders and Procedures Act (AOPA) IC 4-21.5-3-5(b), requires that the Indiana Department of Environmental Management (IDEM) give notice of its decision on your Notice of Intent to the following persons:

- 1) Each person to whom the decision is specifically directed;
- 2) Each person to whom a law requires notice to be given;
- 3) Each competitor who has applied to IDEM for a mutually exclusive license, if issuance is the subject of the decision and the competitor's application has not been denied in an order for which all rights to judicial review have been waived or exhausted;
- 4) Each person who has provided IDEM with a written request for notification of the decision;
- 5) Each person who has a substantial and direct proprietary interest in the issuance of the permit/variance;
- 6) Each person whose absence as a party in the proceeding concerning the (permit) decision would deny another party complete relief in the proceeding, or who claims an interest related to the issuance of the permit and is so situated that the disposition of the matter, in the person's absence may result in either of the following:
 - a) As a practical matter, impair or impede the person's ability to protect that interest, or
 - b) Leave any other person who is a party to a proceeding concerning the permit subject to a substantial risk of incurring multiple or otherwise inconsistent obligation by reason of the person's claimed interest.

IC 4-21.5-3-5(f) provides that we may request your assistance in identifying these people.

Additionally, IC 13-15-3-1 requires IDEM to send notice that the permit application has been received by the department to the following entities:

- a) The board of county commissioners of a county affected by the permit application and
- b) The mayor of a city that is affected by the permit application, or
- c) The president of a town council of a town affected by the permit application.

Please submit the names of those persons affected by these statutes on the attached form **and include the completed mailing labels with your NOI**. These mailing labels should include the names and addresses of the affected parties along with our mailing code (65-42PS) listed above each affected party listing. Example: **65-42PS**

**John Doe
111 Circle Drive
City, State, ZIP Code**

Part L: See instructions for Part B, item 10, above.

The Republic

Prescribed by State Board of Accounts

General Form No 99P (Rev. 2009A)

Attn:
Name: SWCA Environmental Consultants
Address: 200 W 22ND ST. STE 220

City/State: LOMBARD, IL 60148
Acct #: C11219761
Order #: 60134848

AIM MEDIA INDIANA
d/b/a/ THE REPUBLIC
PO BOX 3213
McALLEN, TX 78502-3213
FED I.D. #32-0472774

(Government Unit) County: Bartholomew

PUBLISHER'S CLAIM

LINE COUNT

Data for computing costs: Number of equivalent lines per column-----	52
Number of Columns -----	1
Number of insertions -----	1

COMPUTATION OF CHARGES

52 lines, 1 column(s) x rate of 104.0000 flat rate

Additional charges for notices containing rule or tabular work

(50 percent surcharge included in rate above)

Charges for extra proofs of publication (\$1.00 for each proof in excess of two included in rate above)

TOTAL AMOUNT OF CLAIM ----- 104.00

Pursuant to the provisions and penalties of IC 5-11-10-1, I hereby certify that the foregoing account is just and correct, that the amount claimed is legally due, after allowing all just credits, and that no part of the same has been paid.

PUBLISHER'S AFFIDAVIT

I, Sally Clark, Legal Advertising Clerk of the newspaper of general circulation printed and published in the English language in the (city/town) of Columbus in state and county aforesaid, and that the printed matter attached hereto is a true copy, which publication being as follows:

4/17/2024



Sally Clark/Legal Advertising Clerk

4/23/2024

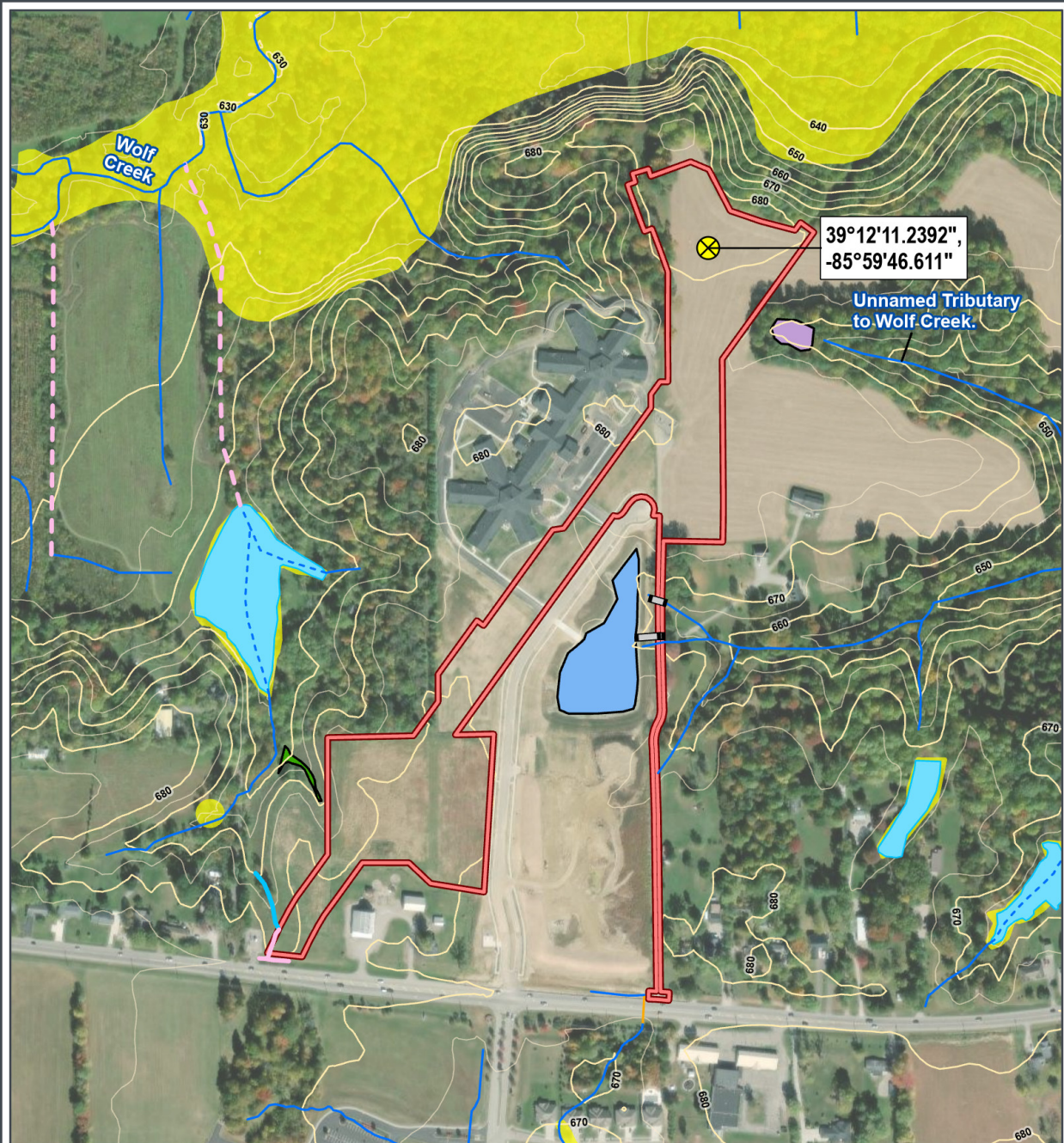
Date

Page	:	1 of 1	04/23/2024 13:13:40	Ad Number	:	50173896
Order Number	:	60134848		Ad Key	:	
PO Number	:	Damon Sinars		Salesperson	:	34 - Cathy Otte
Customer	:	C11219761 SWCA ENVIRONMENTAL CO		Publication	:	The Republic
Contact	:			SectionNTS	:	60 Notices
Address1	:	200 W 22ND ST. STE 220		Sub Section	:	60 Notices
Address2	:			Category	:	6015 Legals
City St Zip	:	LOMBARD IL 60148		Dates Run	:	04/17/2024-04/17/2024
Phone	:	(630) 599-3022		Days	:	1
Fax	:			Size	:	1 x 5.04, 52 lines
Credit Card	:			Words	:	170
Printed By	:	Bill Kloote		Ad Rate	:	L-Variance
Entered By	:	Cathy Otte		Ad Price	:	104.00
Keywords	:	Variance 540 Belmont Dr, Columbus, IN		Amount Paid	:	0.00
Notes	:	dsinars@swca.com		Amount Due	:	104.00
Zones	:					

Legal Advertisement
Texas Gas Transmission, LLC, 9 Greenway Plaza, Ste 2800, Houston, TX 77046 with a pipeline near 540 Belmont Dr, Columbus, IN 47201 is submitting a Notice of Intent to notify the Indiana Department of Environmental Management of our intent to comply with the requirements under the National Pollutant Discharge Elimination System (NPDES) general permit ING670000 for discharges of hydrostatic test water from commercial pipelines. Discharge will be to an unnamed tributary to Wolf Creek.

Any person wishing further information about this discharge may contact Kelsey Gocke at 713-479-8080 or Kelsey.Gocke@bwpipelines.com. The decision to issue coverage under this NPDES general permit for this discharge is appealable per IC 13-15-6. Any person who wants to be informed of IDEM's decision regarding granting or denying coverage to this facility under this NPDES general permit, and who would like to be informed of procedures to appeal the decision may contact IDEM at OWQWWPER@Idem.IN.gov and ask to be placed on a mailing list to receive notification of IDEM's decision.

60134848 hspaxlp
R: 04/17/2024



39°12'11.2392",
-85°59'46.611"

Unnamed Tributary
to Wolf Creek.

PN 14537 TEXAS GAS
TRANSMISSION PIPE
REPLACEMENT PROJECT
**Hydrostatic Test
Discharge Location**

- Hydrostatic Test Discharge Location
- Contour (5 feet)
- Contour (10 feet)
- Culvert
- NHD Connector
- NHD Canal/Ditch
- NHD Stream/River
- NHD Artificial Path
- Delineated Ditch
- Delineated Ephemeral Stream
- NHD Lake/Pond
- NWI Wetland
- Delineated PEM Wetland
- Delineated PFO Wetland
- Delineated Pub Wetland
- Workspace

Bartholomew County, IN
USGS 7.5' Quadrangle:
New Bellsville, IN, 39086-B1
Columbus, IN, 39085-B8
NAD 1983 2011 StatePlane
Indiana East FIPS 1301 Ft US
39.2004°N 85.9981°W



1:6,000



Base Map: Esri ArcGIS Online,
accessed March 2024
Updated: 3/21/2024
Project No. 84764
Layout: Hydrostatic_Discharge

