ATTACHMENT 1

NOTICE OF INTENT (NOI) INFORMATION SHEET NPDES GENERAL PERMIT FOR OIL AND GAS EXPLORATION FACILITIES ON THE OUTER CONTINENTAL SHELF AND CONTIGUOUS STATE WATERS IN THE BEAUFORT SEA

(Permit Number AKG-28-2100)

APPLIC	ANT (Owne	er/Ope	rator)						
Owner Nar	Name:								
Telephone Number:				Operator Mailing					
Operator Name:			Address:						
Telephone									
FACILI	TY								
Facility Na	Facility Name:				Facilit	Facility Mailing			
				Address:					
	Telephone Number:			riddress.					
Beginning	Date of							Latitude:	
Operation:					Stationary Facilities				
Expected D	Ouration of							Longitude:	
Operation:			Т = -						
		Щ.	Jackup					Initial	
Facility Ty		Щ	Drill Ship					Latitude:	
(check appli	cable type)	Щ	Semisubm	icisible	Mobile	Mobile Facilities			
		Ш	Other (spe	cify):				Initial	
								Longitude:	
RECEIVING WATER									
Beaufo	ort Sea*				Other (specify):				
State Waters				Other	(spec	с (ју). 🗀			
Federal Waters									
*Supply confirmation with the National Oceanic and Atmospheric Administration (NOAA) that the proposed discharges									
are seaward of the inner boundary baseline, and are either in State waters or in the Outer Continental Shelf (OCS).									
LOCAT	ION OF D	ISCH	ARGE						
BOEM	Lease Number				ADMD		Leas	se Number	
	Block Number				ADNR		Bloo	ck Number	
Range of w	vater denths b	elow n	nean lower						
Range of water depths below mean lower low water (MLLW) in the lease block:								To:	

(Permit Number AKG-28-2100)

Discha	arges (check								
	001 Water-Bas	ed Dr	illing Fluids and Drill Cutting	Depth of Discharge:			ge:		
	002 Deck Drai	nage		Depth of Discharge:			ge:		
	003 Sanitary W	aste		Depth of Discharge:			ge:		
	004 Domestic	Waste		Depth of Discharge:			ge:		
	005 Desalination	on Un	it Waste		Depth of Discharge:				
	006 Blowout P	reven	ter Fluid	Depth of Discharge:					
	007 Boiler Blo	wdow	n		Depth of Discharge:				
	008 Fire Contr	ol Sys	tem Test Water		Depth of Discharge:				
	009 Non-Conta	ct Co	oling Water		Depth of Discharge:				
	010 Uncontam	inated	Ballast Water		Depth of Discharge:				
	011 Bilge Wat	er			Depth of Di	Depth of Discharge:			
	012 Excess Ce	Slurry		Depth of Discharge:					
	013 Mud, Cutt	Cement at the Seafloor		Depth of Discharge:					
Well I	nformation				•		•		
Well Name:			Latitude:						
Well Number:		Longitude:							
Beginning Drill Date:		Estimated Drilling Depth:							
Number of Planned									
Sidetrack Wells: Drilling Flyids to be used in Well Drilling									
Drilling Fluids to be used in Well Drilling Water-based Water-based							Lignosulfonate		
Category		\overline{H}	Oil-based	-		H	Lime		
(check all that apply)	Ħ	Synthetic-based Group			H	Gyp			
				Ħ	(check all that apply)		Sea-water		
						Ħ	Saltwater		
		isposal practice of oil-	1			Saturated Saltwater			
based, synthetic-based, or other drilling fluids proposed							Nondispersed		
to be used in well drilling.							(Viscosifier/Polymer) PH/PA		

(Permit Number AKG-28-2100)

Zone of Deposit Request (applicable to the discharges within State waters)						
Are you requesting a Zone of Deposit from DEC?		Yes* (Complete Application Form 2M)		No (Skip this section)		
Submit a report to DEC that describes the following (18 AAC 70.210(a -c)):						
 Alternatives that would eliminate, or reduce, any adverse effects of the deposit. The potential direct and indirect impacts on human health. The potential impacts on aquatic life and other wildlife, including the potential for bioaccumulation and persistence. The potential impacts on other uses of the waterbody. The expected duration of the deposit and any adverse effects. The potential transport of pollutants by biological, physical, and chemical processes. 						
Provide salinity and temperature data from the receiving water surface to the depth of the discharge port or diffuser.						
Mixing Zone Request (applicable to the discharges within State waters)						
Are you requesting a mixing zone from ADEC?		Yes* (Complete Application Form 2M)		No (skip this section)		
Submit to DEC the following information:						
 Maximum Flooding and Ebbing current during a tidal cycle Maximum and minimum current Prevailing current direction Cross sectional profile of the ocean floor (if relatively shallow and sloped) similar to the Figure 4.4 on page 44 of the CORMIX User Manual Effluent density Salinity and temperature profile from bottom to surface or a representative profile from near/just below the discharge depth if the effluent is less dense than the receiving water. (Also note if there is a pycnocline and where). The reverse will be needed if the effluent is more dense (i.e. from discharge depth to bottom). 						

*Contact DEC Division of Water for billing information.

(Permit Number AKG-28-2100)

The applicant must submit the following information with the Notice of Intent.						
Site Map		Included	Submit a site map showing the exact location of the facility and discharges associated with the project. Mobile facilities must indicate the intended areas of operation, a description of operations within those areas, and the initial latitude and longitude of the facility.			
Initial Site Survey		Included	Submit an initial site survey; if available at NOI submittal date, document the drill site is not located in a sensitive biological area or habitat.			
Alternatives Analysis (for Discharges 001, 003, and 004 to stable ice)		Included	Submit an evaluation demonstrating that there are no technically feasible land-based disposal alternatives and means to transport the waste streams to alternative disposal sites.			
Treatment Process/Disposal Practice		Included	Submit a detailed description of the disposal mechanism of the facility, the treatment processes, and disposal practices (e.g., backhauled, reinjected, discharged).			
Line Drawing and Flow Balance		Included	Submit a line drawing that shows the flow, including rates/volumes of each discharged waste streams through facility. The line drawing must contain a flow balance showing average and maximum flow rates between intakes, operations, treatment units, and outfalls. Submit a list identifying all outfalls associated with each Discharge Number and the outfalls' locations. The line drawing must include all outfalls for each Discharge Number.			
Discharge Rate/Volume		Included	Submit a table summarizing the discharge rates (e.g., volumes per day or per hour) for the requested waste streams per well and total volumes per well.			
Environmental Monitoring Program (EMP) Plan of Study		Included	Submit an EMP Plan of Study (Section II.A.13.d.).			
Environmental Reports and Related Plans		Included	Provide copies of any exploration plans, biological surveys, and environmental reports required by other federal (e.g., BOEM, BSEE, NMFS, USFWS) and state agencies (e.g., ADNR).			
Drilling Fluid Plan		Included	Submit a plan for the formulation and control of drilling fluid/chemical additive systems for each well.			
Best Management Practices (BMP) Plan		Included	Submit the BMP Plan that incorporates practices to achieve the objectives and specific requirements of the permit.			

(Permit Number AKG-28-2100)

The applicant must submit the following information with the Notice of Intent (Continued).

Quality Assurance Project Plan (QAPP)	☐ Included		Submit a quality assurance project plan (QAPP) for all monitoring required by this general permit.		
Chemical Selection		Included	List chemicals to be used during the drilling process and identify those that meet Norway's "green" classification.		
Cooling Water Intake Structure Requirements	Yes Track I Track II No		Indicate whether the facility meets the applicability criteria, and if so, the applicant's intent to comply with either Track I or Track II requirements.		
Plan Review for All Discharges (001-013) to State Waters (not applicable for discharges to the OCS)		Included	Submit an engineering plan to DEC in accordance with DEC regulations. The applicant must receive written approval before constructing, installing, or modifying a domestic or nondomestic wastewater treatment works (18 AAC 72.200 and 18 AAC 72.600).		

Page 5 of 6

(Permit Number AKG-28-2100)

Certification

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.

1 8					
Signature:	Date:				
Printed Name:	Title:				
Mail Completed NOI to EPA and DEC at the following addresses:					
US EPA	DEC, Division of Water				
1200 6 th Avenue, Suite 900, M/S OWW-130	555 Cordova Street				
Seattle, WA 98101	Anchorage, Alaska 99501				

Page 6 of 6