

January 3, 2013

**VIA HAND DELIVERY**

Mr. Darrell Nitschke  
Executive Secretary  
North Dakota Public Service Commission  
600 E. Boulevard, Dept. 408  
Bismarck, ND 58505-0480



**RE: BAKKENLINK PIPELINE, LLC  
8- and 12-INCH CRUDE OIL PIPELINE  
- CASE NUMBER PU-10-218**

Dear Mr. Nitschke:

Enclosed for filing, please find an original and ten (10) copies of the following:

1. Letter from North Dakota Department of Health.

Also enclosed is a CD containing the above-referenced document in PDF format.

Sincerely,

A handwritten signature in blue ink, appearing to read "LB", written over the word "Sincerely,".

LAWRENCE BENDER

LB/jjj  
Enclosures

cc: Mr. Patrick Fahn (w/ encl. - via e-mail)  
Mr. Darren Snow (w/ encl. - via e-mail)  
Mr. Rich Voss (w/ encl. - via e-mail)  
Mr. Steve Griesser (w/ encl. - via e-mail)  
Mr. Jame L. Todd (w/ encl. - via e-mail)

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**NORTH DAKOTA**  
DEPARTMENT of HEALTH

ENVIRONMENTAL HEALTH SECTION  
Gold Seal Center, 918 E. Divide Ave.  
Bismarck, ND 58501-1947  
701.328.5200 (fax)  
www.ndhealth.gov



December 19, 2012

Darren Snow  
BakkenLink Pipeline, LLC  
3456 E. Century Ave  
Bismarck, ND 58503

Re: NDPDES Permit No. NDG070367

We have received your "Application for Permit to Discharge - NDPDES Industrial-Short Form C" and have granted authority to discharge under the General Permit for Temporary Dewatering/Hydrostatic Testing Permit NDG070000. Your facility has been assigned permit no. **NDG070367**. This permit has been issued by the North Dakota Department of Health (NDDoH) with the understanding that all other applicable permits and permissions have been obtained for the start of the following project. The application indicates that the discharge(s) will consist of municipal water from the hydrostatic testing of the new crude oil BakkenLink Pipeline:

Discharge Point	Volume (Gallons)	Location
001H	≈ 522,000	BakkenLink Line All counties which this pipeline runs

**All discharge points shall be inspected daily.** On a daily basis record the total volume of discharge and make a visual inspection for Oil and Grease. Analytical parameters for pH, Total Residual Chlorine and Total Suspended Solids (TSS) shall be waived for this project. The parameter of Oil and/or Grease is waived unless sheen is observed in the discharge; if observed then collect a sample for Total Petroleum Hydrocarbon (TPH). The department shall be contacted on all findings of Oil and Grease. All discharges made directly to a surface water body or wetland shall be inspected closely so as to minimize any turbidity issues. Best Management Practices (BMPs) must be used to minimize the impact of the discharge.

**ADDITIVES:** No additives were reviewed for this project.

Enclosed are Discharge Monitoring Report (DMR) forms for your use. If someone else is responsible for the submittal of the DMRs, please forward this letter and the enclosed forms to them. The reports cover three months; the dates and location have been filled out. If no discharge occurs during the reporting period, check "No" in section one. The reports must be post-marked by the last day of the month following the end of each reporting period. All original DMR forms should be sent to NDDoH and a copy should be kept for your files. **EPA no longer requires a copy of the DMR form.**

If any other testing is conducted during this project, copies of the results of any such test should be forwarded to the Department. **Should you wish to no longer be covered under this permit, you must submit a written request to terminate and cite the reasons for termination.** Coverage shall be maintained until a written notification to release has been issued to the permittee by NDDoH. Should you have any questions about your permit or how to complete the DMRs, please contact me at (701) 328-5234.

Sincerely,

Marty Haroldson  
Environmental Scientist  
Division of Water Quality

Enc.  
Cc: EPA

Environmental Health  
Section Chief's Office  
701.328.5150

Division of  
Air Quality  
701.328.5188

Division of  
Municipal Facilities  
701.328.5211

Division of  
Waste Management  
701.328.5166

Division of  
Water Quality  
701.328.5210

# North Dakota Department of Health--Division of Water Quality--NDPDES--Discharge Monitoring Report

NDG070367 BakkenLink Pipeline, LLC  
3456 E. Century Ave. Bismarck ND 58503-0737

001H  
For Official Use

Reporting Period: 10/01/2012-12/31/2012

Due By: 01/31/2013

**Section 1: (BakkenLink Pipeline)**

**Section 2: Length of Discharge**

**Did any discharges occur from this discharge point from 10/01/2012-12/31/2012?**

Yes If 'Yes' then complete all blank non-gray items in sections 2,3 and 4. Mail to the address below by 01/31/2013.  
 No If 'No' then complete section 4 and mail to the address below by 01/31/2013.

	Cell/Site	Start Date	End Date	# of Days	
#1					Total Days
#2					
#3					

**Section 3: Parameter Data**

Parameter	Quantity or Loading	Quality or Concentration			No. of	Frequency of	Sample				
		Average	Maximum	Units	Minimum	Average	Maximum	Units	Exceedances	Analysis	Type
Total Suspended Solids 00530	Result Value	XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L			
Effluent	Permit Value						100 DAILY MX	mg/L		Weekly	Grab
pH 00400	Result Value	XXXXX	XXXXX	XXXXX		XXXXX		S.U.			
Effluent	Permit Value				6 MINIMUM		9 MAXIMUM	S.U.		Weekly	Grab
Total Residual Chlorine 50060	Result Value	XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L			
Effluent	Permit Value						.1 DAILY MX	mg/L		Conditional	Instantaneous
Oil and Grease Visual 84066	Result Value	XXXXX		Yes 1/No 0	XXXXX	XXXXX	XXXXX	XXXXX			
Effluent	Permit Value		TOTAL	Yes 1/No 0						Daily	Visual
Total Petroleum Hydrocarbon 82181	Result Value	XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L			
Effluent	Permit Value						1 DAILY MX	mg/L		Conditional	Grab
Discharge Flow in Million Gals 50050	Result Value			Mgal/d	XXXXX	XXXXX	XXXXX	XXXXX			
Effluent	Permit Value	30DA AVG	DAILY MX	Mgal/d						Daily	Calculated
Drain in Million Gallons 51500	Result Value	XXXXX		Mgal	XXXXX	XXXXX	XXXXX	XXXXX			
Effluent	Permit Value		TOTAL	Mgal						Quarterly	Calculated

**Section 4 Certification:**

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Name: (Print)	Signature:	Date:	Telephone:
Title	<b>Make a copy for your records</b>	For Office Use: Rec'd: _____	Initials: _____ Entered on: _____ Initials: _____

# North Dakota Department of Health--Division of Water Quality--NDPDES--Discharge Monitoring Report

NDG070367 BakkenLink Pipeline, LLC  
3456 E. Century Ave. Bismarck ND 58503-0737

001H  
For Official Use

Reporting Period: 01/01/2013-03/31/2013

Due By: 04/30/2013

**Section 1: (BakkenLink Pipeline)**

**Section 2: Length of Discharge**

Did any discharges occur from this discharge point from 01/01/2013-03/31/2013?

Yes If 'Yes' then complete all blank non-gray items in sections 2,3 and 4. Mail to the address below by 04/30/2013.  
 No If 'No' then complete section 4 and mail to the address below by 04/30/2013.

	Cell/Site	Start Date	End Date	# of Days	
#1					Total Days
#2					
#3					

**Section 3: Parameter Data**

Parameter	Quantity or Loading	Quality or Concentration			No. of	Frequency of	Sample				
		Average	Maximum	Units	Minimum	Average	Maximum	Units	Exceedances	Analysis	Type
Total Suspended Solids 00530 Effluent	Result Value	XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L			
	Permit Value						100 DAILY MX	mg/L		Weekly	Grab
pH 00400 Effluent	Result Value	XXXXX	XXXXX	XXXXX		XXXXX		S.U.			
	Permit Value				6 MINIMUM		9 MAXIMUM	S.U.		Weekly	Grab
Total Residual Chlorine 50060 Effluent	Result Value	XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L			
	Permit Value						.1 DAILY MX	mg/L		Conditional	Instantaneous
Oil and Grease Visual 84066 Effluent	Result Value	XXXXX		Yes 1/No 0	XXXXX	XXXXX	XXXXX	XXXXX			
	Permit Value		TOTAL	Yes 1/No 0						Daily	Visual
Total Petroleum Hydrocarbon 82181 Effluent	Result Value	XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L			
	Permit Value						1 DAILY MX	mg/L		Conditional	Grab
Discharge Flow in Million Gals 50050 Effluent	Result Value			Mgal/d	XXXXX	XXXXX	XXXXX	XXXXX			
	Permit Value	30DA AVG	DAILY MX	Mgal/d						Daily	Calculated
Drain in Million Gallons 51500 Effluent	Result Value	XXXXX		Mgal	XXXXX	XXXXX	XXXXX	XXXXX			
	Permit Value		TOTAL	Mgal						Quarterly	Calculated

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Title	Make a copy for your records	For Office Use: Rec'd: _____	Initials: _____ Entered on: _____ Initials: _____

# North Dakota Department of Health--Division of Water Quality--NDPDES--Discharge Monitoring Report

NDG070367 BakkenLink Pipeline, LLC  
3456 E. Century Ave. Bismarck ND 58503-0737

001H  
For Official Use

Reporting Period: 04/01/2013-06/30/2013

Due By: 07/31/2013

## Section 1: (BakkenLink Pipeline)

## Section 2: Length of Discharge

Did any discharges occur from this discharge point from 04/01/2013-06/30/2013?

Yes If 'Yes' then complete all blank non-gray items in sections 2,3 and 4. Mail to the address below by 07/31/2013.  
 No If 'No' then complete section 4 and mail to the address below by 07/31/2013.

	Cell/Site	Start Date	End Date	# of Days	
#1					Total Days
#2					
#3					

## Section 3: Parameter Data

Parameter	Result Value	Quantity or Loading			Quality or Concentration			No. of	Frequency of	Sample
		Average	Maximum	Units	Minimum	Average	Maximum	Units	Exceedances	Analysis
Total Suspended Solids 00530		XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L		
Effluent	Permit Value						100 DAILY MX	mg/L	Weekly	Grab
pH 00400		XXXXX	XXXXX	XXXXX		XXXXX		S.U.		
Effluent	Permit Value				6 MINIMUM		9 MAXIMUM	S.U.	Weekly	Grab
Total Residual Chlorine 50060		XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L		
Effluent	Permit Value						.1 DAILY MX	mg/L	Conditional	Instantaneous
Oil and Grease Visual 84066		XXXXX		Yes 1/No 0	XXXXX	XXXXX	XXXXX	XXXXX		
Effluent	Permit Value		TOTAL	Yes-1/No 0					Daily	Visual
Total Petroleum Hydrocarbon 82181		XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L		
Effluent	Permit Value						1 DAILY MX	mg/L	Conditional	Grab
Discharge Flow in Million Gals 50050				Mgal/d	XXXXX	XXXXX	XXXXX	XXXXX		
Effluent	Permit Value	30DA AVG	DAILY MX	Mgal/d					Daily	Calculated
Drain in Million Gallons 51500		XXXXX		Mgal	XXXXX	XXXXX	XXXXX	XXXXX		
Effluent	Permit Value		TOTAL	Mgal					Quarterly	Calculated

## Section 4 Certification:

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# North Dakota Department of Health--Division of Water Quality--NDPDES--Discharge Monitoring Report

NDG070367 BakkenLink Pipeline, LLC  
3456 E. Century Ave. Bismarck ND 58503-0737

001H  
For Official Use

Reporting Period: 07/01/2013-09/30/2013  
Due By: 10/31/2013

**Section 1: (BakkenLink Pipeline) Section 2: Length of Discharge**

**Did any discharges occur from this discharge point from 07/01/2013-09/30/2013?**

**Yes** If 'Yes' then complete all blank non-gray items in sections 2,3 and 4. Mail to the address below by 10/31/2013.  
 **No** If 'No' then complete section 4 and mail to the address below by 10/31/2013.

	Cell/Site	Start Date	End Date	# of Days	
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#2					
#3					

**Section 3: Parameter Data**

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	Permit Value				6 MINIMUM		9 MAXIMUM	S.U.		Weekly	Grab
Total Residual Chlorine 50060 Effluent	Result Value	XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L			
	Permit Value						.1 DAILY MX	mg/L		Conditional	Instantaneous
Oil and Grease Visual 84066 Effluent	Result Value	XXXXX		Yes 1/No 0	XXXXX	XXXXX	XXXXX	XXXXX			
	Permit Value		TOTAL	Yes 1/No 0						Daily	Visual
Total Petroleum Hydrocarbon 82181 Effluent	Result Value	XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L			
	Permit Value						1 DAILY MX	mg/L		Conditional	Grab
Discharge Flow in Million Gals 50050 Effluent	Result Value			Mgal/d	XXXXX	XXXXX	XXXXX	XXXXX			
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NDG070367 BakkenLink Pipeline, LLC  
3456 E. Century Ave. Bismarck ND 58503-0737

001H  
For Official Use

Reporting Period: 10/01/2013-12/31/2013  
Due By: 01/31/2014

**Section 1: (BakkenLink Pipeline) Section 2: Length of Discharge**

Did any discharges occur from this discharge point from 10/01/2013-12/31/2013?

\_\_\_ Yes If "Yes" then complete all blank non-gray items in sections 2,3 and 4. Mail to the address below by 01/31/2014.  
\_\_\_ No If "No" then complete section 4 and mail to the address below by 01/31/2014.

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Oil and Grease Visual 84066	Result Value	XXXXX		Yes 1/No 0	XXXXX	XXXXX	XXXXX	XXXXX			
Effluent	Permit Value		TOTAL	Yes 1/No 0						Daily	Visual
Total Petroleum Hydrocarbon 82181	Result Value	XXXXX	XXXXX	XXXXX	XXXXX	XXXXX		mg/L			
Effluent	Permit Value						1 DAILY MX	mg/L		Conditional	Grab
Discharge Flow in Million Gals 50050	Result Value			Mgal/d	XXXXX	XXXXX	XXXXX	XXXXX			
Effluent	Permit Value	30DA AVG	DAILY MX	Mgal/d						Daily	Calculated
Drain in Million Gallons 51500	Result Value	XXXXX		Mgal	XXXXX	XXXXX	XXXXX	XXXXX			
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