

		<b>Tier Two Emergency and Hazardous Chemical Inventory Oil and Gas Well "Short Form"</b>			
Reporting Period: January 1 to December 31, 2013 County:		Short Form available to filers for which no information has changed from the 2012 submission. The information from the 2012 submission will be incorporated by reference. <input type="checkbox"/> Check if 2012 Report is incorporated by reference			
<b>Part I: Facility Identification:</b> Part 1 information may be provided below for single facilities, or reported on an attached spreadsheet for multiple, similar facilities, as long as: (1) the facilities are located within the same county; (2) the maximum and daily amounts of the chemical stored at the facilities (e.g. crude oil) are within the same range.					
Facility Name		Street			
City		Zip	Latitude	Longitude	
<b>Part II: Additional Facility Specific Information:</b> An owner or operator filing a single or multiple facility report can complete this <b>Additional Facility Specific Information Section</b> if the information is the same for all facilities included in this report. If the information is different for specific locations, this information should be included in the spreadsheet which will be attached to this report.					
Maximum No. of Occupants: <input type="checkbox"/> N/A <input type="checkbox"/> Manned <input type="checkbox"/> Unmanned		TRI Facility ID# <input type="checkbox"/> N/A		RMP ID# <input type="checkbox"/> N/A	
Subject to Emergency Planning under Section 302 of EPCRA (40 CFR part 355)? <input type="checkbox"/> Yes <input type="checkbox"/> No		Subject to Chemical Accident Prevention under Section 112(r) of CAA (40 CFR part 68, Risk Management Program)? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Part III: Owner, Operator and Contact Information</b>					
<b>Owner or Operator Information</b>		<b>Facility Emergency Coordinator (if applicable)</b>			
Name		Name		Title	
Address		Email Address			
Phone Number ( ) -	Email Address	Phone Number ( ) -	24-hour Phone ( ) -		
<b>Tier II Information Contact</b>					
Name		Title			
Phone Number ( ) -		Email Address			
<b>Part IV: Chemical Information (Attach additional pages if reporting additional chemicals)</b>					
<b>Chemical Description</b>	<b>Inventory</b>	<b>Type of Storage</b>	<b>Storage Condition</b> (Pressure/Temperature)	<b>Storage Location</b> Confidential <input type="checkbox"/> Yes <input type="checkbox"/> No	
Chemical Name	Maximum Amount <b>Range Code:</b>				
Trade Secret <input type="checkbox"/> Yes <input type="checkbox"/> No	Average Amount <b>Range Code:</b>				
Mixture or Product Name:	Maximum Amount <b>Range Code:</b>				
EHS(s) Name (if applicable):	Maximum Amount of each EHS in the Mixture <b>Range Code:</b>				
<b>Certification</b> <i>(Read and sign after completing all sections)</i>			<b>NEW 2014 Reporting Ranges</b>		
I certify under penalty of law that I have personally examined and am familiar with the information submitted on the CY2012 chemical inventory report dated ____ which is hereby incorporated by reference and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate and complete; and that I have personally examined and am familiar with the information submitted in pages one through ____ of the CY2013 report and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate and complete.  Name and official title of owner/operator OR owner/operator's authorized representative			Range Code	From	To
			01	0	99
			02	100	499
			03	500	999
			04	1,000	4,999
			05	5,000	9,999
			06	10,000	24,999
			07	25,000	49,999
			08	50,000	74,999
			09	75,000	99,999
			10	100,000	499,999
			11	500,000	999,999
			12	1,000,000	9,999,999
13	10,000,000	Greater than 10 million			
Signature		Date Signed			