Notice of Termination for the Offshore Subcategory of the Oil and Gas Extraction Point Source Category for the Western Portion of the Outer Continental Shelf of the Gulf of Mexico (GMG290000)

U.S. EPA Region 6 Offshore General Permits Mail Code 6EN-WC1445 Ross Ave., Suite 1200 Dallas, TX 75202-2733

Notice of Termination (NOT) of Coverage Under the Offshore Subcategory of the Oil and Gas Extraction Category for the Western Portion of the Outer Continental Shelf of the Gulf of Mexico (GMG290000). Submission of this completed NOT constitutes notice that the entity in Section B intends to terminate coverage to discharge pollutants to Federal waters of the Gulf of Mexico seaward of the outer boundary of the territorial seas offshore of Louisiana and Texas under this National Pollutant Discharge Elimination System (NPDES) general permit (77 Fed. Reg. No. 196, p. 61605, October 10, 2012, http://www.epa.gov/region6/water/npdes/genpermit/gmg290000final/gmg290000finalpermit2012.pdf) www.epa.gov/region6/water/npdes/genpermit/ .

Operation Selection

NPDES ID *

GMG29 0512

Organization Formal Name *

HERCULES OFFSHORE

Organization Noted by Preparer

Hercules Offshore

Action *

(●) Terminate One Or More Structures ( ) Terminate Entire Permit

Permitted Feature ID *
0047 X

Permitted Feature ID *
0048 X

Permitted Feature ID *
0071 X

Permitted Feature ID *
0075 X

Permitted Feature ID *
0084 X

Permitted Feature ID *
0086 X

Permitted Feature ID *
0087 X

Permitted Feature ID *
0088 X

Permitted Feature ID *
0091 X

Permitted Feature ID *
0092 X

Permitted Feature ID *
0095 X

Permitted Feature ID *
0097 X

Permitted Feature ID *
0098 X

Permitted Feature ID *
0099 X

Permitted Feature ID *
0101 X

Permitted Feature ID *
0103 X

Permitted Feature ID *
0104 X

Permitted Feature ID *
0105 X

Permitted Feature ID *
0107 X

Permitted Feature ID *
0108 X

Permitted Feature ID *
0110 X

Add Row

Reason for Termination

Permit coverage is no longer needed as there are no longer any discharges at these locations.

Certification Information

Certifier E-Mail *

Redacted

Form Action *
Approve

Digital Signature Acknowledgement

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 person 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.