VENOCO, INC.

November 21, 2014

Mr. Jared Blumenfeld
US EPA, Region 9
NPDES/DMR, ENF-4-1
75 Hawthorne Street
San Francisco, CA 94105-3901

Discharge Monitoring Report – Platform Grace
NPDES Permit No. CAG280000

Dear Mr. Blumenfeld:

This DMR reporting period covers the months of August, September, and October 2014 for Platform Grace. There were no NPDES violations for this reporting period.

Included herein:

Attachment 1: EPA DMR forms (3320-1) for the related discharges and monitoring activities.

Attachment 2: is a listing of the Chemical Inventory for miscellaneous discharges.

The following is a brief summary of some of the monitoring and reporting parameters affecting the various discharges:

Drilling Fluids and Drill Cuttings (001): There were no drilling discharges for this quarter.

Produced Water (002): There were no produced water discharges at Platform Grace. Produced water from Grace is sent to Platform Gail, which commingles with Gail's sour train production and is injected back into the oil production formation at Gail.

Deck Drainage (004): Deck drains were discharged and monitoring activities are reported in the DMR (there were no exceedances).

Non-Contact Cooling Water and Fire Water (008, 009): There is no discharge of non-contact cooling water. As seen in Attachment 2, the test method used to estimate the fire water chlorine usage rates for the required chemical inventory is not an official EPA test method, but using this data better represents the chemical inventory values from month to month since there is no requirement in the permit for an official EPA test. The chlorination system was offline throughout the quarter and there were no batch chlorination treatments.

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

6267 Carpinteria Ave., Ste. 100, Carpinteria, CA 93013 • 805.745.2100 (o) • 805.745.2217 (f) • www.venocoinc.com

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. See 18 U.S.C & 1001 and 33 U.S.C. & 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years)

If you should have any questions or require additional information, please contact Pat Corcoran at (805) 745-2264.

Sincerely,

Larry Huskins
Operations Manager

Cc: Allison Dettmer
Manager, Energy and Ocean Resources Unit
California Coastal Commission
45 Fremont, Suite 2000
San Francisco, Ca. 94105-2219

Ms. Susan Zaleski
Regional Supervisor
Office of Environment
Bureau of Ocean Energy Management
770 Paseo Camarillo, 2nd Floor
Camarillo, CA 93010-6064
Attn: Chief, Environmental Analysis Section

Regional Supervisor
BSEE
770 Paseo Camarillo
Camarillo, CA 93010

Platform Grace Operations Supervisor

Platform Grace

Attachment 1

EPA DMR
PERMIT NO. CAG280000

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

WELL DISCHARGE MONITORING REPORT (Well DMR)

No Discharge X

CAG280000	001
PERMIT NO.	DISCHARGE NO.

Approved Form
OMB No. 2000-0015

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

DRILLING FLUIDS AND DRILL CUTTINGS (001)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
DRILLING FLUIDS VOLUME	Sample Measurement		**No Discharge**	Barrels/ Well							
August	Permit Requirement		Report							1/well 1/day	Estimate
	Sample Measurement		**No Discharge**	Barrels/ Well							
September	Permit Requirement		Report							1/well 1/day	Estimate
	Sample Measurement		**No Discharge**	Barrels/ Well							
October	Permit Requirement		Report							1/well 1/day	Estimate
Quarterly Total	Sample Measurement		0	Barrels/ Quarter					0		
08/01/14 - 10/31/14	Permit Requirement		Report								
Annual Cumulative Volume Limit [1]	Sample Measurement		0	Barrels/ Year					0		
03/01/14 - 02/28/15	Permit Requirement		49,500								

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE	DATE
Larry Huskins Operations Manager	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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)		(805) 745-2100	11 21 2014
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

[1] Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2014 through February 2015.

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

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From: 14	08	01	To: 14	10	31

DRILLING FLUIDS AND DRILL CUTTINGS (001)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
DRILL CUTTINGS VOLUME	Sample Measurement		**No Discharge**	Barrels/ Month							
August	Permit Requirement		Report							1/well 1/day	Estimate Grab
	Sample Measurement		**No Discharge**	Barrels/ Month							
September	Permit Requirement		Report							1/well 1/day	Estimate Grab
	Sample Measurement		**No Discharge**	Barrels/ Month							
October	Permit Requirement		Report							1/well 1/day	Estimate Grab
Annual Cumulative Volume Limit [1]	Sample Measurement		0	Barrels/ Year					0		
03/01/14 - 02/28/15	Permit Requirement		28,700								
DRILL FLUIDS/CUTTINGS FREE OIL	Sample Measurement		**No Discharge**	Barrels/ Month	**No Discharge**			# Days Sheen Observed			
August	Permit Requirement		Report		Negative Static Sheen Test/Free Oil					1/well 1/day	Visual Visual
	Sample Measurement		**No Discharge**	Barrels/ Month	**No Discharge**			# Days Sheen Observed			
September	Permit Requirement		Report		Negative Static Sheen Test/Free Oil					1/well 1/day	Visual Visual
	Sample Measurement		**No Discharge**	Barrels/ Month	**No Discharge**			# Days Sheen Observed			
October	Permit Requirement		Report		Negative Static Sheen Test/Free Oil					1/well 1/day	Visual Visual

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TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

[1] Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2014 through February 2015.

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

WELL DISCHARGE MONITORING REPORT (Well DMR)

No Discharge X

CAG280000	001
PERMIT NO.	DISCHARGE NO.

Approved Form
OMB No. 2000-0015

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

DRILLING FLUIDS AND DRILL CUTTINGS (001)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading Average	Maximum	Units	(4 card only) Quality or Concentration Maximum	Units	NO. EX.	Frequency Analysis	Sample Type
DRILLING FLUIDS TOXICITY	Sample Measurement				N / A	% by Volume			
	Permit Requirement				LC50 > 3% SPP			(0-80%) Well Footage	Grab
DRILLING FLUIDS TOXICITY	Sample Measurement				N / A	% by Volume			
	Permit Requirement				LC50 > 3% SPP			(80-100%) Well Footage	Grab
BARITE MERCURY	Sample Measurement				N / A	mg / kg			
	Permit Requirement				1 mg / kg			Stock Barite	Grab
BARITE CADMIUM	Sample Measurement				N / A	mg / kg			
	Permit Requirement				3 mg / kg			Stock Barite	Grab
DRILL FLUIDS CHEMICAL INVENTORY					N / A				
					Report			Each Mud System	
No. DAYS DISCHARGE FOR EACH DRILLING FLUID					N / A				
					Report			# Days Each	
PROHIBITED DISCHARGE 1. Oil-based Fluids					No Discharge				
2. Diesel Oil 3. Non-aqueous based drilling fluids or cuttings					No Discharge			N/A	

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TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)
N / A: No discharge of drilling fluids at Platform Grace.

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

No Discharge X

Approved Form
OMB No. 2000-0015

CAG280000	002
PERMIT NO.	DISCHARGE NO.

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

PRODUCED WATER (002)
(Commingled at Platform Gail)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
PRODUCED WATER FLOW RATE (Commingled at Platform Gail) August - October	Sample Measurement	**No Discharge**		Monthly Average bbl/Day							
	Permit Requirement									1/day	Estimate
QUARTERLY AVERAGE Volume August - October	Sample Measurement	**No Discharge**		Quarterly Average bbl/Day							
										1/quarter	Estimate
ANNUAL CUMULATIVE [1] Volume 03/01/14 - 02/28/15	Sample Measurement		0	Barrels/ Year					0		
	Permit [1] Requirement		2,190,000								
PRODUCED WATER OIL & GREASE	Sample Measurement					**No Discharge**	**No Discharge**	mg/L			
	Permit Requirement					29.0	42.0			1/week	Grab
PRODUCED WATER CONSTITUENTS				lbs/day		**No Discharge**	**No Discharge**				
										1/month for 1 year	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
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COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)
No discharge of produced water at Platform Grace.
[1] Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2014 through February 2015.

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

WELL DISCHARGE MONITORING REPORT (Well DMR)

No Discharge [X]

CAG280000	003
PERMIT NO.	DISCHARGE NO.

Approved Form
OMB No. 2000-0015

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS (003)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
WELL TREATMENT COMPLETION AND WORKOVER FLUIDS FLOW August	Sample Measurement		**No Discharge**	Barrels / Job							
	Permit Requirement		Report								
September	Sample Measurement		**No Discharge**	Barrels / Job							
	Permit Requirement		Report								
October	Sample Measurement		**No Discharge**	Barrels / Job							
	Permit Requirement		Report								
WELL TREATMENT COMPLETION AND WORKOVER FLUIDS OIL AND GREASE						**MONTHLY AVERAGE**	**DAILY MAXIMUM**				
August	Sample Measurement					**No Discharge**	**No Discharge**	mg/L			
	Permit Requirement					29.0	42.0			1/job	Grab
September	Sample Measurement					**No Discharge**	**No Discharge**	mg/L			
	Permit Requirement					29.0	42.0			1/job	Grab
October	Sample Measurement					**No Discharge**	**No Discharge**	mg/L			
	Permit Requirement					29.0	42.0			1/job	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
Larry Huskins Operations Manager	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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)		(805) 745-2100	11 21 2014
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COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

WELL DISCHARGE MONITORING REPORT (Well DMR)

No Discharge X

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CAG280000	003
PERMIT NO.	DISCHARGE NO.

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS (003)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS TYPE AND TOTAL NUMBER OF JOBS August - October	Sample Measurement		0	Barrels / Job							
	Permit Requirement		Report								
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS STATIC SHEEN August - October	Sample Measurement					N / A		# Times Sheen Observed			
	Permit Requirement					Negative Static Sheen Test - # Times observed-None				1/discharge	Grab
	Sample Measurement										
	Permit Requirement										
WELL TREATMENT, COMPLETION AND WORKOVER FLUIDS **Chemical Inventory** August - October	Sample Measurement					N / A					
	Permit Requirement					Report				1/job	Report
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
Larry Huskins Operations Manager	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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)		(805) 745-2100	11 21 2014
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COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

N / A: No WTCF this quarter.

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

No Discharge ☐

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CAG280000	004
PERMIT NO.	DISCHARGE NO.

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

DECK DRAINAGE (004)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
			Average	Units	Minimum	Average	Maximum	Units			
DECK DRAINAGE VOLUME-FLOW RATE [1]	Sample Measurement		31.0	Mo. Avg. bbl/day					0	1/month	Estimate
August	Permit Requirement		Report							1/month	Estimate
	Sample Measurement		31.0	Mo. Avg. bbl/day					0	1/month	Estimate
September	Permit Requirement		Report							1/month	Estimate
	Sample Measurement		32.0	Mo. Avg. bbl/day					0	1/month	Estimate
October	Permit Requirement		Report							1/month	Estimate
DECK DRAINAGE FREE OIL	Sample Measurement		0	# Days Sheen Observed	No free oil/visual sheen on the receiving water.				0	1/day	Visual - Daylight
August	Permit Requirement		0		No free oil/visual sheen on the receiving water.					1/day	Visual - Daylight
	Sample Measurement		0	# Days Sheen Observed	No free oil/visual sheen on the receiving water.				0	1/day	Visual - Daylight
September	Permit Requirement		0		No free oil/visual sheen on the receiving water.					1/day	Visual - Daylight
	Sample Measurement		0	# Days Sheen Observed	No free oil/visual sheen on the receiving water.				0	1/day	Visual - Daylight
October	Permit Requirement		0		No free oil/visual sheen on the receiving water.					1/day	Visual - Daylight

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TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

[1] Includes fire water from deluge testing.

Venoco, Inc.
6267 Carpinteria Ave
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

CAG280000	005
PERMIT NO.	DISCHARGE NO.

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OMB No. 2000-0015

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YR	MO	DAY	YR	MO	DAY
From:	14	08	01	To:	14 10 31

SANITARY & DOMESTIC WASTES (005)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
SANITARY WASTE FLOW RATE	Sample Measurement	6.0		Monthly Average bbl/day					0	1/day	Estimate
August	Permit Requirement	Report								1/month	Estimate
	Sample Measurement	7.0		Monthly Average bbl/day					0	1/day	Estimate
September	Permit Requirement	Report								1/month	Estimate
	Sample Measurement	6.3		Monthly Average bbl/day					0	1/day	Estimate
October	Permit Requirement	Report								1/month	Estimate
SANITARY WASTES FOAM & FLOATING SOLIDS	Sample Measurement		0	# days observed	No floating solids in the receiving waters.				0	1/day	Visual - Daylight
August	Permit Requirement		0		No floating solids in the receiving waters.					1/day	Visual - Daylight
	Sample Measurement		0	# days observed	No floating solids in the receiving waters.				0	1/day	Visual - Daylight
September	Permit Requirement		0		No floating solids in the receiving waters.					1/day	Visual - Daylight
	Sample Measurement		0	# days observed	No floating solids in the receiving waters.				0	1/day	Visual - Daylight
October	Permit Requirement		0		No floating solids in the receiving waters.					1/day	Visual - Daylight

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
Larry Huskins Operations Manager	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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)		(805) 745-2100	11 21 2014
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

No Discharge ☐

CAG280000	005
PERMIT NO.	DISCHARGE NO.

Approved Form
OMB No. 2000-0015

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From:	14	08	01	To: 14	10 31

SANITARY & DOMESTIC WASTES (005)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average			Minimum	Average	Maximum	Units	(62-63)		
SANITARY WASTE RESIDUAL CHLORINE [1]	Sample Measurement				N / A		N / A	mg/l	0	Monthly	Grab
August	Permit Requirement				1 mg/l		10 mg/l			Monthly	Grab
	Sample Measurement				N / A		N / A	mg/l	0	Monthly	Grab
September	Permit Requirement				1 mg/l		10 mg/l			Monthly	Grab
	Sample Measurement				N / A		N / A	mg/l	0	Monthly	Grab
October	Permit Requirement				1 mg/l		10 mg/l			Monthly	Grab
DOMESTIC WASTE FLOW RATE [2]	Sample Measurement	2.7		Monthly					0	Monthly	Grab
August	Permit Requirement	Report		Average bbl/day						Monthly	Grab
	Sample Measurement	5.2		Monthly					0	Monthly	Grab
September	Permit Requirement	Report		Average bbl/day						Monthly	Grab
	Sample Measurement	2.8		Monthly					0	Monthly	Grab
October	Permit Requirement	Report		Average bbl/day						Monthly	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
Larry Huskins Operations Manager	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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)		(805) 745-2100	11 21 2014
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

[1] The sewage treatment unit is a marine sanitation device that complies with pollution control standards and regulations under Section 312 of the Clean Water Act. Thus, it is deemed to be in compliance with permit limitations for sanitary waste discharges (as per Condition II.E.1 Footnote 2 of CAG280000)

[2] Domestic waste is discharged separately.

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

No Discharge ☐

CAG280000	005
PERMIT NO.	DISCHARGE NO.

Approved Form
OMB No. 2000-0015

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

SANITARY & DOMESTIC WASTES (005)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
DOMESTIC WASTE[1] FOAM AND FLOATING SOLIDS	Sample Measurement		0	# of Days Observed	No foam or floating solids in the receiving waters.				0	1/day	Visual - Daylight
August	Permit Requirement		None		No foam or floating solids in the receiving waters.					1/day	Visual - Daylight
	Sample Measurement		0	# of Days Observed	No foam or floating solids in the receiving waters.				0	1/day	Visual - Daylight
September	Permit Requirement		None		No foam or floating solids in the receiving waters.					1/day	Visual - Daylight
	Sample Measurement		0	# of Days Observed	No foam or floating solids in the receiving waters.				0	1/day	Visual - Daylight
October	Permit Requirement		None		No foam or floating solids in the receiving waters.					1/day	Visual - Daylight

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
Larry Huskins Operations Manager	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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)		(805) 745-2100	11 21 2014
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

[1] Domestic waste is discharged separately. Flow rate and observations for foam and floating solids in the receiving water are required.

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

No Discharge ☐

Approved Form
OMB No. 2000-0015

CAG280000	008
PERMIT NO.	DISCHARGE NO.

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

MONITORING PERIOD	YR	MO	DAY	YR	MO	DAY
From:	14	08	01	To:	14	10	31
	(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)

FIRE CONTROL WATER (008)
(commingled with deck drains)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
			Average	Units	Minimum	Monthly Average	Daily Maximum	Units			
FIRE CONTROL SYSTEM TEST WATER (008) - FOAM	Sample Measurement		0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight
FLOATING SOLIDS August	Permit Requirement		0		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight
	Sample Measurement		0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight
September	Permit Requirement		0		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight
	Sample Measurement		0	# Days Observed	No floating solids in the receiving water. No foam in the receiving water.				0	1/day	Visual - Daylight
October	Permit Requirement		0		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight
	Sample Measurement										
	Permit Requirement										
FIRE CONTROL SYSTEM TEST WATER [1] Chemical Inventory	Sample Measurement				See attachment #2, Chemical Inventory					1/month	List
August - October	Permit Requirement				Report					1/month	List
	Sample Measurement										
	Permit Requirement										
	Sample Measurement										
	Permit Requirement										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
Larry Huskins Operations Manager	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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)		(805) 745-2100	11 21 2014
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

[1] There is no permit requirement for chlorine monitoring of the Fire control system test water.

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

No Discharge [X]

Approved Form
OMB No. 2000-0015

CAG280000	009
PERMIT NO.	DISCHARGE NO.

PLATFORM GRACE
LOCATION: 34º 10' 47"N, 119º 28' 4.2"W

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

NON-CONTACT COOLING WATER (009)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
			Average	Units	Minimum	Average	Maximum	Units			
NON-CONTACT COOLING WATER (009) - FLOW VOLUME August	Sample Measurement		**No Discharge**	Barrels/ Day							
	Permit Requirement		Report							1/month	Estimate
September	Sample Measurement		**No Discharge**	Barrels/ Day							
	Permit Requirement		Report							1/month	Estimate
October	Sample Measurement		**No Discharge**	Barrels/ Day							
	Permit Requirement		Report							1/month	Estimate
NON-CONTACT COOLING WATER (009) - FOAM FLOATING SOLIDS August	Sample Measurement		**No Discharge**	# Days Observed	**No Discharge**						
	Permit Requirement		None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight
September	Sample Measurement		**No Discharge**	# Days Observed	**No Discharge**						
	Permit Requirement		None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight
October	Sample Measurement		**No Discharge**	# Days Observed	**No Discharge**						
	Permit Requirement		None		No floating solids in the receiving water. No foam in the receiving water.					1/day	Visual - Daylight

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
Larry Huskins Operations Manager	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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)		(805) 745-2100	11 21 2014
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

No Discharge X

CAG280000	009
PERMIT NO.	DISCHARGE NO.

Approved Form
OMB No. 2000-0015

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

NON-CONTACT COOLING WATER (009)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
			Average	Units	Minimum	Monthly Average	Daily Maximum	Units			
NON-CONTACT COOLING WATER (009) - CHLORINE$_1$	Sample Measurement					**No Discharge**	**No Discharge**	mg/L			
August - October	Permit Requirement					N / A	N / A			1/year	Grab
NON-CONTACT COOLING WATER (009) CHEMICAL INVENTORY	Sample Measurement	**No Discharge**			See Attachment #2 (Chemical Inventory)					1/month	List
August - October	Permit Requirement				Report					1/month	List

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
Larry Huskins Operations Manager	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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)		(805) 745-2100	11 21 2014
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

N / A: There are no limits in the permit, appendix C.

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

No Discharge X

Approved Form
OMB No. 2000-0015

CAG280000	019
PERMIT NO.	DISCHARGE NO.

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

EXCESS CEMENT SLURRY (019)

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
			Average	Units	Minimum	Average	Maximum	Units			
EXCESS CEMENT SLURRY (019) FLOW VOLUME	Sample Measurement		**No Discharge**	Monthly Average bbl/day							
August	Permit Requirement		Report							1/month	Estimate
	Sample Measurement		**No Discharge**	Monthly Average bbl/day							
September	Permit Requirement		Report							1/month	Estimate
	Sample Measurement		**No Discharge**	Monthly Average bbl/day							
October	Permit Requirement		Report							1/month	Estimate
ANNUAL CUMULATIVE VOLUME [1]	Sample Measurement		0	Barrels/ Year					0		
03/01/14 - 02/28/15	Permit [1] Requirement		3,000								
EXCESS CEMENT SLURRY (019) SHEEN TEST/FREE OIL FOAM, FLOATING SOLIDS	Sample Measurement		**No Discharge**	# Days Sheen Observed	**No Discharge**						
August	Permit Requirement		None		No foam or floating solids No Oil					1/well 1/day	Visual Rec. Water
	Sample Measurement		**No Discharge**	# Days Sheen Observed	**No Discharge**						
September	Permit Requirement		None		No foam or floating solids No Oil					1/well 1/day	Visual Rec. Water
	Sample Measurement		**No Discharge**	# Days Sheen Observed	**No Discharge**						
October	Permit Requirement		None		No foam or floating solids No Oil					1/well 1/day	Visual Rec. Water

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
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TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

[1] Annual cumulative volume limit is applied to the cumulative volumes for the periods of March 2014 through February 2015.

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

No Discharge ☐

Approved Form
OMB No. 2000-0015

CAG280000	006,007,010,011,012,013,014
PERMIT NO.	DISCHARGE NO.

Blowout Preventer Fluids
Desalination Unit (Brine Discharge)
Ballast/Storage Displacement
Bilge Water
Boiler Blowdown
Test Fluids
Diatomaceous Earth Filter Media

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			(4 card only) Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
(006) Blowout Preventer Fluids	Sample Measurement				**No Discharge**						
FREE OIL, FOAM, FLOATING SOLIDS August - October	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water
(007) Desalination Unit (Brine)	Sample Measurement				No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.				0	1/day 1/discharge	Visual Rec. Water
FOAM, FLOATING SOLIDS August - October	Permit Requirement				No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water
(010) Ballast/Storage Displacement Water - FLOW RATE	Sample Measurement			Monthly Average bbl/day	**No Discharge**						
FREE OIL, FOAM, FLOATING SOLIDS August - October	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate / Visual Daylight
(011) Bilge Water FLOW RATE	Sample Measurement			Monthly Average bbl/day	**No Discharge**						
August - October	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate
(012) Boiler Blowdown FOAM, FLOATING SOLIDS	Sample Measurement				**No Discharge**						
August - October	Permit Requirement				No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water
(013) Test Fluids * FLOW RATE	Sample Measurement			Monthly Average bbl/day	**No Discharge**						
FREE OIL, FOAM, FLOATING SOLIDS August - October	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate / Visual Daylight
(014) Diatomaceous Earth Filter Media	Sample Measurement				**No Discharge**						
FREE OIL, FOAM, FLOATING SOLIDS August - October	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
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TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

* See Attachment 2 for Chemical Inventory, if discharged.

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

No Discharge ☐

CAG280000	015, 016, 017, 018, 020, 021	Bulk Water Transfer Overflow
PERMIT NO.	DISCHARGE NO.	Uncontaminated Water
		Water Flooding Discharges
		Laboratory Wastes(commingled w/deck drains)
		Muds, Cuttings, Cement at Sea Floor
		Hydrotest Water

Approved Form
OMB No. 2000-0015

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

PLATFORM GRACE
LOCATION: 34º 10' 47"N, 119º 28' 4.2"W

NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
			Average	Units	Minimum	Average	Maximum	Units			
(015) Bulk Transfer Water Overflow FOAM, FLOATING SOLIDS	Sample Measurement				**No Discharge**						
August - October	Permit Requirement				No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water
(016) Uncontaminated Water FOAM, FLOATING SOLIDS	Sample Measurement				**No Discharge**						
August - October	Permit Requirement				No floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water
(017) Water Flooding Discharges FREE OIL, FOAM, FLOATING SOLIDS*	Sample Measurement				**No Discharge**						
August - October	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water
(018) Laboratory Wastes FREE OIL, FOAM, FLOATING SOLIDS (commingled with produced water)	Sample Measurement				N / A (refer to produced water requirements)				0	1/month 1/discharge	Visual Rec. Water
August - October	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water
(020) Muds, Cuttings, Cement at Sea FLOOR FREE OIL, FOAM, FLOATING SOLIDS	Sample Measurement				**No Discharge**						
August - October	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Visual Rec. Water
(021) Hydrotest Water * FLOW RATE / FREE OIL, FOAM FLOATING SOLIDS	Sample Measurement			Monthly Average bbl/day	**No Discharge**						
August - October	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/month 1/discharge	Estimate / Visual Daylight

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
Larry Huskins Operations Manager	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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)		(805) 745-2100	11 21 2014
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

* See Attachment 2 for Chemical Inventory, if discharged.

Venoco, Inc.
6267 Carpinteria Ave
Carpinteria, Ca 93013

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

No Discharge X

Approved Form
OMB No. 2000-0015

CAG280000	022
PERMIT NO.	DISCHARGE NO.

PLATFORM GRACE
LOCATION: 34° 10' 47"N, 119° 28' 4.2"W

MONITORING PERIOD					
YR	MO	DAY	YR	MO	DAY
From: 14	08	01	To: 14	10	31

H2S Gas Processing Waste Water
NOTE: Read instructions before completing this form.

PARAMETER		Quantity or Loading			Quality or Concentration				NO. EX.	Frequency Analysis	Sample Type
		Average	Maximum	Units	Minimum	Average	Maximum	Units			
(022) H2S Gas Processing Waste Water FLOW RATE	Sample Measurement	**No Discharge**		Monthly Average bbl/day							
August - October	Permit Requirement	Report								1/discharge	Estimate
(022) H2S Gas Processing Waste Water FREE OIL, FOAM, FLOATING SOLIDS	Sample Measurement				**No Discharge**						
August - October	Permit Requirement				No free oil or floating solids in the receiving water. No foam, in other than trace amounts, in the receiving water.					1/discharge	Visual - Daylight
Surfactants, Detergents, Dispersants	Sample Measurement				Minimized				0		
August - October	Permit Requirement				Minimize						

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE
Larry Huskins Operations Manager	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. SEE 18 U.S.C. & 1001 AND 33 U.S.C. & 1319. (PENALTIES UNDER THESE STATUTES MAY INCLUDE FINES UP TO $10,000 AND OR MAXIMUM IMPRISONMENT OF BETWEEN 6 MONTHS AND 5 YEARS)		(805) 745-2100	11 21 2014
TYPED OR PRINTED		Signature of PRINCIPAL EXECUTIVE OFFICER or AUTHORIZED AGENT	Area Code Number	MONTH/DAY/YEAR

COMMENT AND EXPLANATION OF ANY VIOLATION (Reference all attachments here.)

Attachment 2

Chemical Inventory

ATTACHMENT 2
PLATFORM GRACE
MISCELLANEOUS DISCHARGES
CHEMICAL INVENTORY
August 1, 2014 through October 31, 2014

Fluid Type	Volume (Monthly avg bbls per day)	Product Name	Estimated Chemical Quantity (Monthly avg gal per day)	Monthly Average End-of-Pipe[1] Concentration (mg/l)
009 Non-contact Cooling Water	No Discharge	N / A	None	None
008 Fire Control System Water		Chlorine		
August	20,571		N / A [2]	N / A [2]
September	20,571		N / A [2]	N / A [2]
October	20,571		N / A [2]	N / A [2]
013 Test Fluids	No Discharge	No Discharge	None	None
017 Water Flooding Discharges	No Discharge	No Discharge	None	None
021 Hydrotest Water	No Discharge	No Discharge	None	None

[1] If reported, end-of-pipe concentration and chemical quantity calculated with Operations daily monitoring results using a non-EPA chlorine test method (Hach DPD Color Wheel). This method is not an official EPA test method, but using this data better represents the chemical inventory values from month to month since the official EPA test method is required only quarterly.

[2] Chlorination system was offline throughout the quarter and no batch chlorination occurred.