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Madera Valley Water Supply Corp.



P.O. BOX 9009
VERHALEN, TEXAS 79772
BUSINESS (432) 375-2556
FAX (432) 375-2446

October 25, 2021

RE: Central Records, Project 52299
Madera Valley Water Supply Corporation
PWS#1950006

To whom it may concern:

The attached information has been submitted to our electric utility providers, retail electric provider and our Office of Emergency Management for Reeves County, as is stated in Project 52299 with the Public Utility Commission of Texas (PUCT). Please review the attached information and let me know if you have any questions or concerns.

Thank you for your time,

JoAnn Klein, MVWSC

Madera Valley Water Supply Corp.



P.O. BOX 9009
VERHALEN, TEXAS 79772
BUSINESS (432) 375-2556
FAX (432) 375-2446

October 14, 2021

To whom it may concern:

We are sending the attached information as part of our critical load list to comply with Project 52299, Senate Bill 3, 87th legislature, and Texas Water Code 13.1396.

This information includes the location and description of our facilities that qualify for critical load status.

Also, our Emergency contacts for these locations are listed below:

Craig Huelster, General Manager
432-448-7192

Israel Tarin, Operator
432-448-7191.

For further details, please contact us at 432-375-2556.

Thank you,

JoAnn Klein, Office Manager
MVWSC



AEP Texas Application for Critical Load Industrial or Critical Load Public Safety Designation

SEND COMPLETED FORM TO: CriticalLoadAEPTX@aep.com

This Application should be completed in order to request the designation of Critical Load Industrial Customer or Critical Load Public Safety Customer with AEP Texas, as defined below. The Application must be submitted to AEP Texas at the email address above. Do not include premises served by another utility in this Application.

Critical Load Public Safety Customer – A customer for whom electric service is considered crucial for the protection or maintenance of public safety, including but not limited to hospitals, police stations, fire stations, and critical water and wastewater facilities.

Critical Load Industrial Customer – An industrial customer for whom an interruption or suspension of electric service will create a dangerous or life-threatening condition on the retail customer's premises, is a "critical load industrial customer."

Designation of Critical Load does not guarantee an uninterrupted supply of electricity. It is the responsibility of the customer to make arrangements for alternative sources of electric power should a localized outage or load shed event occur.

AEP Texas may request more information prior to implementing a designation.

CUSTOMER CONTACT INFORMATION

Contact Name:

Madera Valley Water Supply Corporation

Contact Title:

CRAIG HUELSTER, General Manager

Mailing address (if different from Service Address):

P.O. Box 9009, Verhalen, TX 79772

Work Number:

432-375-2556

Cell Number:

432-448-7190

E-Mail Address:

maderavalleywsc@yahoo.com

SERVICE ADDRESS

Requested Designation:

☒ Critical Load Public Safety ☐ Critical Load Industrial

Premise Identifier (ESI ID):

See attached meter numbers

Customer Name associated with ESI ID:

Madera Valley Water Supply Corporation

Street:

City:

Zip Code:

79772

Name of Retailer Electric Provider(if applicable):

Reliant Energy

AEP.

APPLICATION FOR CRITICAL LOAD STATUS -

PART ONE:

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.
Member account number: 000012761606

Service address (found on your electric bill):

Balmerhea Unit WL-
Huelster Wells
Balmerhea, TX 79718
ESI ID# 10204049700940260

Mailing address (if different than service address):

PO Box 9009
Verhalen, TX 79712

Member primary phone number:

(432) 375-2556

Member alternate phone number:

(432) 448-7190

Member primary email:

maderavalleywsc@yahoo.com

Member alternate email (if any):

N/A

MEMBER:

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature: _____

Printed name: _____

JoAnn Klein
JoAnn Klein

Date: _____

Title: _____

10/13/21
Office admin

AEP

APPLICATION FOR CRITICAL LOAD STATUS -

PART ONE:

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.
Member account number: 000012765994

Service address (found on your electric bill):

Balmerha Unit WL-
Kerley Station
Balmerha, TX 79718
ESI-ID# 10204049711637220

Mailing address (if different than service address):

PO Box 9009
Verhalen, TX 79712

Member primary phone number:

(432) 375-2556

Member alternate phone number:

(432) 448-7190

Member primary email:

madera.valley.wsc@yahoo.com

Member alternate email (if any):

N/A

MEMBER:

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature:

JoAnn Klein

Printed name:

JoAnn Klein

Date:

10/13/21

Title:

Office admin

AEP

APPLICATION FOR CRITICAL LOAD STATUS -

PART ONE:

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.
Member account number: 000012796014

Service address (found on your electric bill):

Saragosa Unit WL-
Office
Saragosa, TX 79780
ESI-ID# 10204049767068220

Mailing address (if different than service address):

PO Box 9009
Verhalen, TX 79772

Member primary phone number:

(432) 375-2556

Member alternate phone number:

(432) 448-7190

Member primary email:

maderavalleywsc@yahoo.com

Member alternate email (if any):

N/A

MEMBER:

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature: _____

Printed name: _____

JoAnn Klein
JoAnn Klein

Date: _____

Title: _____

10/13/21
Office admin

AEP

APPLICATION FOR CRITICAL LOAD STATUS -

PART ONE:

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.

Member account number: 000012786000

Service address (found on your electric bill):

Balmerhea Unit WL
V Station
Balmerhea, TX 79718
ESI ID# 10204049739158551

Mailing address (if different than service address):

Po Box 9009
Verhalen, TX 79772

Member primary phone number:

(432) 375-2556

Member alternate phone number:

(432) 448-7190

Member primary email:

maderavalleywsc@yahoo.com

Member alternate email (if any):

N/A

MEMBER:

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature: [Signature]

Printed name: Jo Ann Klein

Date: 10/13/21

Title: Office admin

AEP.

APPLICATION FOR CRITICAL LOAD STATUS -

PART ONE:

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.

Member account number: 000012781105 (#1) 000012784476 (#2)

Service address (found on your electric bill):

Saragosa Unit WL-
- McIntire #1 Well
- McIntire #2 well

Saragosa, TX 79780

ESI ID #1 10204049742835392 #2 10204049730183211

Member primary phone number:

(432) 375-2556

Mailing address (if different than service address):

PO Box 9009
Verhalen, TX 79772

Member alternate phone number:

(432) 448-7190

Member primary email:

Madera Valley WSC@yahoo.com

Member alternate email (if any):

N/A

MEMBER:

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature:

[Signature]

Date:

10/13/21

Printed name:

JoAnn Klein

Title:

office admin

AEP

APPLICATION FOR CRITICAL LOAD STATUS -**PART ONE:**

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.Member account number: 000012780574

Service address (found on your electric bill):

10 Highway 17 ODLT 175MVB
Sarasota, TX 79780

Mailing address (if different than service address):

PO Box 9009
Vernale, TX 79172ESI ID# 10204049767068221

Member primary phone number:

(432) 375-2556

Member alternate phone number:

(432) 448-7190

Member primary email:

maderaValleyWSC@yahoo.com

Member alternate email (if any):

N/A**MEMBER:**

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature: John KleinDate: 10/13/21Printed name: John KleinTitle: Office admin

AEP.

APPLICATION FOR CRITICAL LOAD STATUS -

PART ONE:

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.
Member account number: 000012760572

Service address (found on your electric bill):

Balmorhea Unit WL-
Alamo Station
Balmorhea, TX 79718
ESI-ID# 10204049714456501

Mailing address (if different than service address):

PO Box 9009
Verhalen, TX 79712

Member primary phone number:

(432) 375-2556

Member alternate phone number:

(432) 448-7190

Member primary email:

maderavalleywsc@yahoo.com

Member alternate email (if any):

N/A

MEMBER:

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature: _____

Printed name: _____

Date: _____

Title: _____

APPLICATION FOR CRITICAL LOAD STATUS -

PART TWO:

To be completed by the member. All information is required.

Critical load designation category:

(Please select the most applicable category and subcategory, if applicable)

☐ **Public safety**

A member for whom electric service is considered crucial for the protection or maintenance of public safety, including but not limited to hospitals, police stations, fire stations, and critical water and wastewater facilities.

*Texas Department of State Health Services license number required

☐ Hospital – trauma center*

☐ Hospital – with surgery or emergency treatment*

☐ Licensed day surgery*

☐ Licensed emergency care*

☐ Licensed dialysis clinic*

☐ Licensed birthing clinic*

☐ Licensed skilled nursing facility*

☐ Licensed unskilled nursing facility*

☐ Licensed assisted living facility*

☐ Hospice services facility*

☐ Major or regional airport

☐ Emergency alert system primary or secondary transmitter

☐ 9-1-1 center

☐ Police

☐ Fire

☒ Water/sewage deemed critical – note that some community water and waste facilities may qualify, however, not all individual wells, sewer lift stations etc. qualify as critical

☐ Flood control

☐ Other (explain)

☐ **Industrial**

An industrial member for whom an interruption or suspension of electric service will create a dangerous or life-threatening condition on the member's premises.

☐ **Natural gas infrastructure**

A member that supports natural gas-fired generation, including gas control center or gas compressor plant.

**Please provide detail for consideration of Critical Load status
and attach supporting information for consideration.**

Madera Valley Water Supply Corp.



P.O. BOX 9009
VERHALEN, TEXAS 79772
BUSINESS (432) 375-2556
FAX (432) 375-2446

October 14, 2021

To whom it may concern:

We are sending the attached information as part of our critical load list to comply with Project 52299, Senate Bill 3, 87th legislature, and Texas Water Code 13.1396.

This information includes the location and description of our facilities that qualify for critical load status.

Also, our Emergency contacts for these locations are listed below:

Craig Huelster, General Manager
432-448-7192

Israel Tarin, Operator
432-448-7191.

For further details, please contact us at 432-375-2556.

Thank you,

JoAnn Klein, Office Manager
MVWSC

Application for Critical Load Serving Electric Generation and Cogeneration

CRITICAL LOAD DESIGNATIONS ARE REVIEWED EACH YEAR APRIL 1 FOR SUMMER PEAK and OCTOBER 1 FOR WINTER PEAK

This Application should be completed in order to request the designation of Critical Load Serving Electric Generation and Cogeneration. A separate Application must be submitted to each electric utility provider. Do not include premises served by different electric utilities in a single Application. Multiple premises, served by a single electric utility, may be submitted with a single form, provided that the information requested below is provided for each metered location.

The designation shall only be requested for individual premises (meters) that provide electricity to natural gas production, saltwater disposal wells, processing, storage, or transportation such as a natural gas compressor station, gas control center, or other pipeline transportation infrastructure.

The customer must provide any changes to customer or premise information as soon as practicable. The electric utility may request confirmation of the Critical Load designation and the customer must timely confirm that a premise previously designated as Critical Load continues to qualify for that designation. The utility may request more information prior to implementing the Critical Load designation.

DESIGNATION OF A CRITICAL LOAD DOES NOT GUARANTEE AN UNINTERRUPTED SUPPLY OF ELECTRICITY.

It is the responsibility of the customer to make arrangements for alternative sources of electric power should a localized outage or significant load shed event occur.

UTILITY NAME: Madera Valley Water Supply Corporation

CUSTOMER CONTACT INFORMATION
Contact Name: Craig Huelster, 432-448-7192 Israel Tarin, 432-448-7191 JoAnn Klein, 432-375-2556
Contact Title: General Manager Operator Office Manager
Mailing address (if different from Service Address): P.O. Box 9009, Verhalen, TX 79772

Work Number:**432-375-2556****Cell Number:****432-448-7190****E-Mail Address:****maderavalleywsc@yahoo.com****SERVICE ADDRESS****Customer Name associated with ESI-ID or Premise:****Madera Valley Water Supply Corporation****Street (if street address is unavailable, please provide latitude/longitude, any nearby roadway, and/or distance to the closest town)****Please see attached****City****Verhalen****Zip Code****79772****Premise Identifier (e.g., ESIID, Premise Number, Account Number):****#1040051949675001, #10400513134600001, #10400513965070001, #10400513136930001, #10400513965090001, #10400513965100001**

Describe equipment or premise served (e.g., production field, midstream processing plant, natural gas storage facility, gas compressor station saltwater disposal well or recycling facility, including the name of the generation unit(s) served by the infrastructure if known) and interdependencies (such as particular fields are tied to a particular midstream processing facility). Information regarding *production rate* (mcf/day) is also helpful:

Potable water supply system
includes wells and booster stations

Average daily production rate served by this premise for the past 12 months:

- ☐ $\geq 1,000$ mcf/d
☐ $< 1,000$ mcf/d and ≥ 250 mcf/d
☐ < 250 mcf/d

n/a

Describe any existing battery or backup capacity, or dual feed capability, including (1) the length of time the facility can operate without electricity from the electric utility and (2) the length of required time for start-up following a power outage:

generators with transfer switches

Name of retail electric provider or electric utility that bills the customer for service:

Reliant Energy

ELECTRIC UTILITY CONTACT INFORMATION:

AEP Texas: criticalloadaep.tx@aep.com

CenterPoint: critical.load@centerpointenergy.com

Oncor: criticalload@oncor.com

TNMP: criticalload@tnmp.com

For contact information for other electric utilities, contact the electric utility listed on the bill you receive for electric service.

APPLICATION FOR CRITICAL LOAD STATUS -

PART ONE:

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.Member account number: 0000169191004

Service address (found on your electric bill):

2500 CR 108
Pecos, TX 79772ESI ID# 10400519496750001

Mailing address (if different than service address):

PO Box 9009
Verhalen, TX 79772

Member primary phone number:

(432) 375-2556

Member alternate phone number:

432-448-7190

Member primary email:

madera Valley WSC @ yahoo.com

Member alternate email (if any):

N/A

MEMBER:

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature: JoAnn KleinDate: 10/13/21Printed name: JoAnn KleinTitle: Office admin

TNMP

APPLICATION FOR CRITICAL LOAD STATUS -

PART ONE:

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.

Member account number: 000012795710

Service address (found on your electric bill):

N. Duval Rd BSTA -
Duval Station
Pecos, TX 79772
ESI ID# 10400513134600001

Mailing address (if different than service address):

PO Box 9009
Verhalen, TX 79772

Member primary phone number:

(432) 375-2556

Member alternate phone number:

432-448-7190

Member primary email:

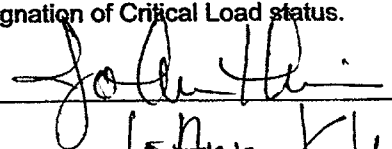
madera Valley WSC @ yahoo.com

Member alternate email (if any):

N/A

MEMBER:

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature: 

Printed name: JoAnn Klein

Date: 10/13/21

Title: Office admin

TNMP

APPLICATION FOR CRITICAL LOAD STATUS -

PART ONE:

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.

Member account number: 0000127960034

Service address (found on your electric bill):

Hoban Station

Verhalen, TX 79772

ESI ID# 10400513965070001

Mailing address (if different than service address):

PO Box 9009

Verhalen, TX 79772

Member primary phone number:

(432) 375-2556

Member alternate phone number:

432-448-7190

Member primary email:

maderavalleywsc@yahoo.com

Member alternate email (if any):

N/A

MEMBER:

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load Status.

Signature: [Signature]

Printed name: JoAnn Klein

Date: 10/13/21

Title: Office admin

APPLICATION FOR CRITICAL LOAD STATUS -**PART ONE:**

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.Member account number: 000012760573

Service address (found on your electric bill):

2308 Yaso Rd. Dum
Pecos, TX 79712

Mailing address (if different than service address):

PO Box 9009
Vernalen, TX 79712ESI ID# 10400513136930001

Member primary phone number:

(432) 375-2556

Member alternate phone number:

432-448-7190

Member primary email:

maderavalleywsc@yahoo.com

Member alternate email (if any):

N/A**MEMBER:**

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature: [Signature]Date: 10/13/21Printed name: John KleinTitle: Office admin

APPLICATION FOR CRITICAL LOAD STATUS -**PART ONE:**

To be completed by the member. All information is required.

Member name on account: Madera Valley Water Supply Corp.
 Member account number: 000012759047(#2) 000012759046(#1)

Service address (found on your electric bill):

CSL Wellfield #2
Verhalen, TX 79772
CSL Wellfield #1
Verhalen, TX 79772

Mailing address (if different than service address):

Po Box 9009
Verhalen, TX 79772

ESI-ID #1 10400513965090001 ESI-ID #2 10400513965100001

Member primary phone number:

(432) 375-2556

Member alternate phone number:

432-448-7190

Member primary email:

maderavalleywsc@yahoo.com

Member alternate email (if any):

N/A

MEMBER:

The undersigned, on behalf of the member, has read and understood the information and certifies that the information provided on this Application is correct and understands the information will be used to determine whether the member is eligible for designation of Critical Load status.

Signature:

[Signature]
Jo Ann Klein

Date:

10/13/21

Printed name:

Title:

Office admin

APPLICATION FOR CRITICAL LOAD STATUS -

PART TWO:

To be completed by the member. All information is required.

Critical load designation category:

(Please select the most applicable category and subcategory, if applicable)

☐ **Public safety**

A member for whom electric service is considered crucial for the protection or maintenance of public safety, including but not limited to hospitals, police stations, fire stations, and critical water and wastewater facilities.

*Texas Department of State Health Services license number required

☐ Hospital – trauma center*

☐ Hospital – with surgery or emergency treatment*

☐ Licensed day surgery*

☐ Licensed emergency care*

☐ Licensed dialysis clinic*

☐ Licensed birthing clinic*

☐ Licensed skilled nursing facility*

☐ Licensed unskilled nursing facility*

☐ Licensed assisted living facility*

☐ Hospice services facility*

☐ Major or regional airport

☐ Emergency alert system primary or secondary transmitter

☐ 9-1-1 center

☐ Police

☐ Fire

☒ Water/sewage deemed critical – note that some community water and waste facilities may qualify, however, not all individual wells, sewer lift stations etc. qualify as critical

☐ Flood control

☐ Other (explain)

☐ **Industrial**

An industrial member for whom an interruption or suspension of electric service will create a dangerous or life-threatening condition on the member's premises.

☐ **Natural gas infrastructure**

A member that supports natural gas-fired generation, including gas control center or gas compressor plant.

**Please provide detail for consideration of Critical Load status
and attach supporting information for consideration.**

Madera Valley Water Supply Corp / Critical Load List

maderavalleywsc.../Sent



Madera Valley Water <maderavalleywsc@yahoo.com>
To: criticalload@tnmp.com <criticalload@tnmp.com>

Oct 18 at 11:54 AM

Sent from [Mail](#) for Windows

1 File 559.7kB



TNMP_Critical Load list.pdf
560kB

Critical Load Asset list-MVWSC

maderavalleywsc.../Sent



Madera Valley Water <maderavalleywsc@yahoo.com>

To: jerry.bullard@co.reeves.tx.us

Oct 25 at 2:21 PM

Thank you for speaking with me today, I appreciate it.
Please review and let me know if you have questions or concerns.
I will reach out once I receive word from our Energy Billing services.

Have a good day.
--JoAnn Klein, MVWSC

2 Files 1.1MB



AEP_Critical Load list.pdf
603kB



TNMP_Critical Load list.pdf
560kB

Madera Valley Water Supply Corp / Critical Load List

maderavalleywsc.../Sent



Madera Valley Water <maderavalleywsc@val100.com>

To: CriticalLoadAEPTX@aep.com <criticalloadaepx@aep.com>

Oct 18 at 11:51 AM

Sent from Mail for Windows

1 File 603.1kB



AEP_Critical Load list.pdf
603kB

7019 2280 0002 3186 9471

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Sent To: Texas Div. of Emergency Mgmt
 TX DOT P.O. Box 4087
 Austin TX 78773

PS Form 3800, April 2015 PSN 7530-02-000-9047-9011 See Reverse for Instructions



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 PECOS, TX 79772-9998
 (800)275-8777

10/26/2021 08:35 AM

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Tracking #: 70192280000231869471			
Total			\$5.71

Grand Total: \$5.71

Credit Card Remitted \$5.71

Card Name: VISA
 Account #: XXXXXXXXXXXX1915
 Approval #: 05569G
 Transaction #: 180
 AID: A0000000031010 Chip
 AL: VISA CREDIT
 PIN: Not Required CHASE VISA

USPS is experiencing unprecedented volume increases and limited employee availability due to the impacts of COVID-19. We appreciate your patience.

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

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