

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Document Number:
400310760

EARTHEN PIT REPORT / PERMIT

This form is to be used for both reporting and permitting pits. Rule 903 describes when a Permit with prior approval, or a Report within 30 days is required for pits. Submit required attachments and forms.

Form Type: **PERMIT** **REPORT** OGCC PIT NUMBER: _____

NOTE: Operator to provide OGCC Pit Number only if available on an existing pit for pit report

OGCC Operator Number: _____	52530	Contact Name: Ryan Warner
Name of Operator: <u>MAGPIE OPERATING, INC</u>		
Address: <u>2707 SOUTH COUNTY RD 11</u>	Phone: (970) 669-6308	
City: <u>LOVELAND</u>	State: <u>CO</u>	Zip: <u>80537</u> Email: <u>magpieoil@yahoo.com</u>

ATTACHMENTS	
Detailed Site Plan	<input type="checkbox"/>
Design/Cross Sec	<input type="checkbox"/>
Topo Map	<input type="checkbox"/>
Calculations	<input type="checkbox"/>
Sensitive Area Info	<input type="checkbox"/>
Mud Program	<input type="checkbox"/>
Form 2A	<input type="checkbox"/>
Form 26	<input type="checkbox"/>
Water Analysis	<input type="checkbox"/>

Pit Location Information

Operator's Pit/Facility Name: _____	Operator's Pit/Facility Number: _____
API Number (associated well): 05- <u>121</u> <u>06222</u> <u>00</u>	
OGCC Location ID (associated location): _____	Or Form 2A # _____
Pit Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>NWNE-5-2S-56W-</u>	
Latitude: _____	Longitude: _____ County: <u>WASHINGTON</u>

Operation Information

Pit Use/Type (Check all that apply):	Pit Type: <input checked="" type="checkbox"/> Lined <input type="checkbox"/> Unlined
<input type="checkbox"/> Drilling: (Ancillary, Completion, Flowback, Reserve Pits)	<input type="checkbox"/> Oil-based Mud; <input type="checkbox"/> Salt Sections or High Chloride Mud
<input type="checkbox"/> Production:	<input type="checkbox"/> Skimming/Settling; <input type="checkbox"/> Produced Water Storage; <input type="checkbox"/> Percolation; <input type="checkbox"/> Evaporation
<input checked="" type="checkbox"/> Special Purpose:	<input type="checkbox"/> Flare; <input type="checkbox"/> Emergency; <input type="checkbox"/> Blowdown; <input checked="" type="checkbox"/> Workover; <input type="checkbox"/> Plugging; <input type="checkbox"/> BS&W/Tank Bottoms
<input type="checkbox"/> Multi-Well Pit:	Construction Date: _____ Actual or Planned: _____
Method of treatment prior to discharge into pit: <u>N/A</u>	
Offsite disposal of pit contents:	<input type="checkbox"/> Injection; <input type="checkbox"/> Commercial; <input checked="" type="checkbox"/> Reuse/Recycle; <input type="checkbox"/> NPDES; Permit Number: _____
Other Information:	<u>LIQUID CONTENTS PLACED IN PRODUCTION TANK. CONTAMINATED SOIL WILL BE DISPOSED OF OFF SITE.</u>

Site Conditions

Distance (in feet) to the nearest surface water: <u>10000</u>	Ground Water (depth): <u>5</u>	Water Well: <u>4600</u>
Is this location in a Sensitive Area? <u>No</u>	Existing Location? _____	

Pit Design and Construction

Size of Pit (in feet):	Length: <u>15</u>	Width: <u>6</u>	Depth: <u>6</u>	Calculated Working Volume (in barrels): <u>64</u>
Flow Rates (in bbl/day):	Inflow: <u>0</u>	Outflow: <u>0</u>	Evaporation: _____	Percolation: _____
Primary Liner. Type:	<u>PLASTIC</u>	Thickness (mil): <u>8</u>		
Secondary Liner (if present):	Type: _____	Thickness (mil): _____		
Is Pit Fenced? <u>No</u>	Is Pit Netted? <u>No</u>	Leak Detection? <u>No</u>		
Other Information:	<u>PIT IS IN REMEDIATION PROCESS</u>			

Operator Comments: _____

Certification

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: RYAN WARNER
Title: VP Email: MAGPIEOIL@YAHOO.COM Date: _____

Approval

Signed: _____

Title: _____ Director of Cogcc

Date: _____

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)

CONDITIONS OF APPROVAL:

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