

**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:
400987443

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: 119471

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

OGCC Operator Number: 62340	Contact Name: Andrew Busch
Name of Operator: NATIONAL FUEL CORPORATION	
Address: 8400 EAST PRENTICE AVE #735	Phone: (303) 220-7772
City: GREENWOOD VILLAGE State: CO Zip: 80111-2926	Email: abusch@national-fuel.com

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: Kirby Eidson #28-4	Operator's Pit/Facility Number: 119471
API Number (associated well): 05- 103 08974 00	
OGCC Location ID (associated location): 315669	Or Form 2A #
Pit Location (QtrQtr, Sec, Twp, Rng, Meridian): NWSW-28-4S-102W-6	
Latitude: 39.669739	Longitude: -108.856897
County: RIO BLANCO	

Operation Information

Pit Use/Type (Check all that apply):	Pit Type: <input type="checkbox"/> Lined <input checked="" 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 checked="" type="checkbox"/> Production:	<input type="checkbox"/> Skimming/Settling; <input checked="" type="checkbox"/> Produced Water Storage; <input type="checkbox"/> Percolation; <input checked="" type="checkbox"/> Evaporation
<input checked="" type="checkbox"/> Special Purpose:	<input type="checkbox"/> Flare; <input type="checkbox"/> Emergency; <input checked="" type="checkbox"/> Blowdown; <input type="checkbox"/> Workover; <input type="checkbox"/> Plugging; <input type="checkbox"/> BS&W/Tank Bottoms
<input checked="" type="checkbox"/> Multi-Well Pit:	Construction Date: 12/30/1983 Actual or Planned: Actual
Method of treatment prior to discharge into pit: NA	
Offsite disposal of pit contents:	<input type="checkbox"/> Injection; <input checked="" type="checkbox"/> Commercial; <input type="checkbox"/> Reuse/Recycle; <input type="checkbox"/> NPDES; Permit Number:
Other Information:	This facility is also duplicated as Facility #119472. The original purpose of this pit was for Blowdown and Produced Water. After setting a 1025 gallon tank inside the pit to capture Produced Water and Blowdown fluids, the pit is now being used as secondary containment for the 1025 gal tank. Prior to selling this asset to Foundation Energy Management, no fluids were being produced into the pit during normal operations.

Distance (in feet) to the nearest surface water: 1019	Ground Water (depth): 457	Water Well: 2044
Is this location in a Sensitive Area? No	Existing Location? Yes	

Pit Design and Construction

Size of Pit (in feet): Length: 10 Width: 10 Depth: 2	Calculated Working Volume (in barrels): 35
Flow Rates (in bbl/day): Inflow: 0 Outflow: 0 Evaporation: 0 Percolation: 0	
Primary Liner. Type: NA Thickness (mil): 0	
Secondary Liner (if present): Type: NA Thickness (mil): 0	
Is Pit Fenced? Yes Is Pit Netted? No Leak Detection? No	
Other Information:	Well was drilled to TD with air/mist, however, the Geologic Report indicates water being encountered at 457'. Nearest known surface water is east of the location in the West Creek tributary of West Douglas Creek.

Operator: _____
Comments: Per instructions from Annie Eckman, the SAD status on the COGIS Pit Information sheet will be used for the SAD for facilities being transferred to Foundation Energy Mgmt.

Certification

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

Signed: _____ Print Name: Andrew Busch
Title: VP Operations Email: abusch@national-fuel.com Date: _____

Approval

Signed: _____ Title: _____ Date: _____

Best Management Practices

No	BMP/COA Type	Description

CONDITIONS OF APPROVAL:

COA Type	Description