

**State of Colorado
Oil and Gas Conservation Commission**

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OGCC RECEPTION

Document Number:
400997587

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: 119487

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: Federal #4-10	Operator's Pit/Facility Number: 119487
API Number (associated well): 05-045 06875 00	
OGCC Location ID (associated location): 323896	Or Form 2A #
Pit Location (QtrQtr, Sec, Twp, Rng, Meridian): NWNW-10-8S-104W-6	
Latitude: 39.388111	Longitude: -108.982898
County: GARFIELD	

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 type="checkbox"/> Evaporation
<input 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 type="checkbox"/> Multi-Well Pit:	Construction Date: 11/01/1994 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:	Information contained in this Form 15 is based on operations prior to selling asset to Foundation Energy Mgmt. Prior to setting 95 bbl produced water tank, pit was used for produced water storage and blowdown. Currently pit is used for added capacity inside bermed area. No fluids are produced into pit during normal operations.

Distance (in feet) to the nearest surface water: 621	Ground Water (depth): 100	Water Well: 3184
Is this location in a Sensitive Area? No	Existing Location? Yes	

Pit Design and Construction

Size of Pit (in feet):	Length: 8	Width: 8	Depth: 1	Calculated Working Volume (in barrels): 11
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? Yes	Leak Detection? No		
Other Information:	Nearest surface water is the intermittently flowing West Salt Creek east of location. Ground water depth guesstimated. Insufficient records to determine ground water depth. Nearest water well NNW of location per GISOnline map.			

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