

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

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



**Document Number:**

**403419758**

**Date Received:**

**EARTHEN PIT REPORT / PERMIT**

This form is to be used for both reporting and permitting pits. Rule 908 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: _____	11001	Contact Name: _____	Mark Brown
Name of Operator: _____	BROWN OIL & GAS LLC		
Address: _____	10481 COUNTY ROAD 20.5		
City: _____	STERLING	State: _____	CO
Zip: _____	80751		
Phone: _____	(970) 522-1072		
Email: _____	brown_oil_and_gas@hotmail.com		

**Pit Location Information**

Operator's Pit/Facility Name: _____	State #1	Operator's Pit/Facility Number: _____	220349
API Number (associated well): _____	05- 075 08471 00		
OGCC Location ID (associated location): _____	389830	Or Form 2A # _____	
Pit Location (QtrQtr, Sec, Twp, Rng, Meridian): _____	NESW-36-11N-54W-6		
Latitude: _____	40.882140	Longitude: _____	-103.358070
County: _____	LOGAN		

**Operation Information**

Construction Date: _____	Actual or Planned: _____	Actual	Pit Type: _____	Unlined
Per rule 405.c: Operators will provide the Commission written notice 2 business days in advance of a Pit liner installation at any facility.				
<b>Pit Use/Type (Check all that apply):</b>				
<input type="checkbox"/> <b>Drilling: (Ancillary, Completion, Flowback, Reserve Pits)</b>	<input type="checkbox"/> Oil-based Mud	<input type="checkbox"/> Salt Sections or High Chloride Mud		
<input checked="" type="checkbox"/> <b>Production:</b>	<input type="checkbox"/> Skimming/Settling	<input checked="" type="checkbox"/> Produced Water Storage	<input checked="" type="checkbox"/> Percolation	<input type="checkbox"/> Evaporation
<input type="checkbox"/> <b>Special Purpose:</b>	<input type="checkbox"/> Flare	<input type="checkbox"/> Blowdown	<input type="checkbox"/> BS&W/Tank Bottoms	
<input type="checkbox"/> <b>Multi-Well Pit:</b>	<input type="checkbox"/> Check if Rule 909.g.(1-4) applies.			
<input type="checkbox"/> <b>Cuttings Trench</b>				
<input type="checkbox"/> <b>Form 15 Exception Pit Submitted within 30 Days after Constructing (908.c):</b>	<input type="checkbox"/> Emergency	<input type="checkbox"/> Workover	<input type="checkbox"/> Plugging	
Method of treatment prior to discharge into pit: _____				
Offsite disposal of _____				
pit contents: <input type="checkbox"/> Injection; <input type="checkbox"/> Commercial; <input type="checkbox"/> Reuse/Recycle; <input type="checkbox"/> NPDES; Permit Number: _____				
Other Information: _____				

**Site Conditions**

Enter 5280 for distance greater than 1 mile.			
Distance (in feet) to the nearest surface water: _____	5280	Ground Water (depth): _____	60
Distance (in feet) to nearest Building Unit: _____	5280	Water Well: _____	5280
Distance (in feet) to nearest Designated Outside Activity Area: _____			

**Pit Design and Construction**

Size of Pit (in feet): Length: 36 Width: 26 Depth: 8 Calculated Working Volume (in barrels): 1334

Flow Rates (in bbl/day): Inflow: 2 Outflow: 0 Evaporation: 0 Percolation: 2

Primary Liner. Type: None Thickness (mil): 0

Operational Lifespan, per manufacturer's specs (years): 0

Seconday Liner (if present): Type: na Thickness (mil): 0

Operational Lifespan, per manufacturer's specs (years): 0

#### **Pit Emissions**

Estimated tons per year (tpy) of volatile organic compounds (VOCs): Attach Pit Emission Calculations. 0

Other Information: Operator does not have sufficient guidance for Pit Emissions Calculations.

Operator Comments: An initial permit was submitted in 2009 by the previous operator (Single Tree Resources, Inc.; Operator #10245). Brown O&G acquired the facility in June 2013.

#### **Certification**

Rule 909.e.(3): If an Operator allows oil or condensate (free product or sheen) to accumulate in a Pit, then the Director may revoke the Operator's Form 15 and require the Operator to close and remediate the Pit.

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

Signed: \_\_\_\_\_ Print Name: Mark Brown

Title: President Email: brown\_oil\_and\_gas@hotmail.com Date: \_\_\_\_\_

#### **Approval**

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

### **Best Management Practices**

#### **No BMP/COA Type** **Description**

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CONDITIONS OF APPROVAL:

#### **COA Type** **Description**

0 COA	

### **Attachment List**

#### **Att Doc Num** **Name**

403440977	OTHER
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Total Attach: 1 Files

### **General Comments**

#### **User Group** **Comment** **Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)