

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

403411598

Date Received:

05/24/2023

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: 261235

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

OGCC Operator Number:	10705	Contact Name:	Logan Smith
Name of Operator:	EVERGREEN NATURAL RESOURCES LLC		
Address:	1875 LAWRENCE ST STE 1150	Phone:	(720) 4673042
City:	DENVER	State:	CO
Zip:	80202	Email:	Logan.Smith@enrllc.com

Pit Location Information

Operator's Pit/Facility Name:	LORENCITO	Operator's Pit/Facility Number:	16-32-33-66
API Number (associated well):	05- 071 06982 00		
OGCC Location ID (associated location):	256942	Or Form 2A #	
Pit Location (QtrQtr, Sec, Twp, Rng, Meridian):	SESE-32-33S-66W-6		
Latitude:	37.122061	Longitude:	-104.798276
County:	LAS ANIMAS		

Operation Information

Construction Date:	03/22/2001	Actual or Planned:	Actual	Pit Type:	Unlined
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Per rule 405.c: Operators will provide the Commission written notice 2 business days in advance of a Pit liner installation at any facility.

Pit Use/Type (Check all that apply):

<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 type="checkbox"/> Produced Water Storage
<input type="checkbox"/> Special Purpose:	<input type="checkbox"/> Flare	<input type="checkbox"/> Blowdown
<input type="checkbox"/> Multi-Well Pit:	<input type="checkbox"/> Check if Rule 909.g.(1-4) applies.	<input type="checkbox"/> BS&W/Tank Bottoms
<input type="checkbox"/> Cuttings Trench		
<input type="checkbox"/> Form 15 Exception Pit Submitted within 30 Days after Constructing (908.c):	<input type="checkbox"/> Emergency	<input type="checkbox"/> Workover
	<input type="checkbox"/> Plugging	

Method of treatment prior to discharge into pit: separator

Offsite disposal of pit contents: ☐ Injection; ☐ Commercial; ☐ Reuse/Recycle; ☐ NPDES; Permit Number: _____

Other Information:

Site Conditions

Enter 5280 for distance greater than 1 mile.			
Distance (in feet) to the nearest surface water:	758	Ground Water (depth):	160
Distance (in feet) to nearest Building Unit:	2447	Water Well:	1447
Distance (in feet) to nearest Designated Outside Activity Area:	5280		

Pit Design and Construction

Size of Pit (in feet): Length: 70 Width: 50 Depth: 6 Calculated Working Volume (in barrels): 3740
Flow Rates (in bbl/day): Inflow: 23 Outflow: 0 Evaporation: 6 Percolation: 254
Primary Liner. Type: na Thickness (mil): 0
Operational Lifespan, per manufacturer's specs (years): 0
Secondary Liner (if present): Type: na Thickness (mil): 0
Operational Lifespan, per manufacturer's specs (years): 0
Is Pit Fenced? No Is Pit Netted? No Leak Detection? No

Pit Emissions

Attach Pit Emission Calculations.

Estimated tons per year (tpy) of volatile organic compounds (VOCs): 0 (Round to nearest whole ton.)

Other Information:

This Form 15 pit report has been submitted to update the latitude and longitude, Operation Information and Conditions/Design & Construction of the pit as specified in Rule 909.a.(2). This is not being submitted in compliance with any COA's, but rather as part of the Pit Reconciliation process for the Lorencito 16-32-33-66 Well, and in response to Field Inspection Report Document #690203577. 909J Baseline samples were collected on the Lorencito 16-32-33-66 well on 12/22/2021 and submitted to the COGCC in Doc#403019281.

Operator
Comments:

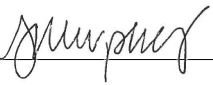
Certification

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: Logan Smith
Title: Production tech Email: Logan.Smith@enrllc.com Date: 05/24/2023

Approval

Signed:  Title: Director of COGCC Date: 05/30/2023

Best Management Practices

<u>No</u>	<u>BMP/COA Type</u>	<u>Description</u>

CONDITIONS OF APPROVAL:

<u>COA Type</u>	<u>Description</u>
0 COA	

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
403411598	PIT REPORT SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)