

**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:**  
**400390293**

**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: 291977

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

OGCC Operator Number:	66571	Contact Name:	Daniel Padilla
Name of Operator:	OXY USA WTP LP		
Address:	P O BOX 27757	Phone:	(970) 263-3637
City:	HOUSTON	State:	TX
Zip:	77227	Email:	daniel_padilla@oxy.com

**ATTACHMENTS**

Detailed Site Plan	
Design/Cross Sec	
Topo Map	
Calculations	
Sensitive Area Info	
Mud Program	
Form 2A	
Form 26	
Water Analysis	

**Pit Location Information**

Operator's Pit/Facility Name:	CC Pond 7	Operator's Pit/Facility Number:	291977
API Number (associated well):	05-00		
OGCC Location ID (associated location):	324160	Or Form 2A #	
Pit Location (QtrQtr, Sec, Twp, Rng, Meridian):	NENE-17-6S-97W-6		
Latitude:	39.528460	Longitude:	-108.237300
County:	GARFIELD		

**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 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 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:	09/01/2007	Actual or Planned: Actual
Method of treatment prior to discharge into pit:	3 phase sep & gravity sep		
Offsite disposal of pit contents:	<input checked="" type="checkbox"/> Injection; <input checked="" type="checkbox"/> Commercial;	<input type="checkbox"/> Reuse/Recycle; <input type="checkbox"/> NPDES;	Permit Number: _____
Other Information:	This multi-well production pit is used for storage of fresh water for drilling and completions operations usage. Note that the actual pit construction date is unknown and is therefore estimated.		

**Site Conditions**

Distance (in feet) to the nearest surface water:	800	Ground Water (depth):	500	Water Well:	5969
Is this location in a Sensitive Area?	Yes	Existing Location?	Yes		

**Pit Design and Construction**

Size of Pit (in feet):	Length:	138	Width:	102	Depth:	10	Calculated Working Volume (in barrels):	10316
Flow Rates (in bbl/day):	Inflow:	90	Outflow:		Evaporation:	17	Percolation:	0
Primary Liner. Type:	HDPE		Thickness (mil):	60				
Secondary Liner (if present):	Type:		Thickness (mil):					
Is Pit Fenced?	Yes	Is Pit Netted?	No	Leak Detection?				
Other Information:	This pit is utilized for storage of fresh water; fluid level is visually monitored by production techs at least weekly, and the fluid level is also remotely monitored using an electronic fluid level monitor system that provides the data daily to the production techs through ICONICS. Ignage is in place stating that the pit shall be used for fresh water only.							

Operator Comments: This multi-well produced water storage pond is located on Oxy owned surface.

**Certification**

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

Signed: \_\_\_\_\_ Print Name: Daniel Padilla  
Title: Regulatory Advisor Email: daniel\_padilla@oxy.com Date: 03/12/2013

**Approval**

Signed: \_\_\_\_\_

Title: \_\_\_\_\_ Director of Cogcc

Date: \_\_\_\_\_

**Best Management Practices**

**No BMP/COA Type**

**Description**

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CONDITIONS OF APPROVAL:

**COA Type**

**Description**

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