

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:

403155409

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: 285083

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

OGCC Operator Number:	10705	Contact Name:	Mackenzie Smith
Name of Operator:	EVERGREEN NATURAL RESOURCES LLC		
Address:	1875 LAWRENCE ST STE 1150	Phone:	(303) 2848820
City	DENVER	State:	CO
Zip:	80202	Email:	mackenzie.smith@enrllc.com

Pit Location Information

Operator's Pit/Facility Name:	AIMEE	Operator's Pit/Facility Number:	24-12
API Number (associated well):	05- 071 08758 00		
OGCC Location ID (associated location):	284249	Or Form 2A #	
Pit Location (QtrQtr, Sec, Twp, Rng, Meridian):	SESW-12-33S-66W-6		
Latitude:	37.181035	Longitude:	-104.732020
County:	LAS ANIMAS		

Operation Information

Construction Date:	06/01/2006	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.					
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 checked="" type="checkbox"/> Percolation	<input checked="" type="checkbox"/> Evaporation	
<input type="checkbox"/> Special Purpose:	<input type="checkbox"/> Flare	<input type="checkbox"/> Blowdown	<input type="checkbox"/> BS&W/Tank Bottoms		
<input type="checkbox"/> Multi-Well Pit:	<input type="checkbox"/> Check if Rule 909.g.(1-4) applies.				
<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: no treatment required					
Offsite disposal of pit contents: <input checked="" type="checkbox"/> Injection; <input type="checkbox"/> Commercial; <input checked="" 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:	1185	Ground Water (depth):	250
Distance (in feet) to nearest Building Unit:	4074	Water Well:	5280
Distance (in feet) to nearest Designated Outside Activity Area:	0		

Pit Design and Construction

Size of Pit (in feet): Length: 54 Width: 22 Depth: 6 Calculated Working Volume (in barrels): 1269

Flow Rates (in bbl/day): Inflow: 0 Outflow: 0 Evaporation: 2 Percolation: 86

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

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

Secondary Liner (if present): Type: none Thickness (mil):

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: Effective May 30, 2022, this pit is located within High Priority Habitat area.

Operator
Comments:

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) and to comply with COAs placed on Form 4 Document # 403089213.

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: Mackenzie Smith

Title: Production Engineer Email: mackenzie.smith@enrllc.com Date: _____

Approval

Signed: _____ Title: _____ Date: _____

Best Management Practices

No BMP/COA Type

Description

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CONDITIONS OF APPROVAL:

COA Type

Description

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Attachment List

Att Doc Num

Name

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Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)