

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:

403261085

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: 264508

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: PARROTHEAD	Operator's Pit/Facility Number: 31-31 ONSITE
API Number (associated well): 05- 071 07599 00	
OGCC Location ID (associated location): 263017	Or Form 2A #
Pit Location (QtrQtr, Sec, Twp, Rng, Meridian): NWNE-31-32S-66W-6	
Latitude: 37.221268	Longitude: -104.817204 County: LAS ANIMAS

Operation Information

Construction Date: 11/14/2001 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):

☐ Drilling: (Ancillary, Completion, Flowback, Reserve Pits) ☐ Oil-based Mud ☐ Salt Sections or High Chloride Mud

☒ Production: ☐ Skimming/Settling ☐ Produced Water Storage ☒ Percolation ☒ Evaporation

☐ Special Purpose: ☐ Flare ☐ Blowdown ☐ BS&W/Tank Bottoms

☐ Multi-Well Pit: ☐ Check if Rule 909.g.(1-4) applies.

☐ Cuttings Trench

☐ Form 15 Exception Pit Submitted within 30 Days after Constructing (908.c): ☐ Emergency ☐ Workover ☐ Plugging

Method of treatment prior to discharge into pit: separator

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

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) and to comply with COAs placed on Form 4 Document # 403191253.

Site Conditions

Enter 5280 for distance greater than 1 mile.

Distance (in feet) to the nearest surface water: 1154 Ground Water (depth): 175 Water Well: 3006

Distance (in feet) to nearest Building Unit: 1505

Distance (in feet) to nearest Designated Outside Activity Area: 5280

Pit Design and Construction

Size of Pit (in feet): Length: 66 Width: 34 Depth: 6 Calculated Working Volume (in barrels): 2398

Flow Rates (in bbl/day): Inflow: 6 Outflow: 0 Evaporation: 1 Percolation: 163

Primary Liner. Type: NA Thickness (mil): 0

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

Secondday 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: Based on the 909J sample for wells surrounding the Parrothead 31-31, which are producing from the same CBM formations, results show there are no detectable Benzene, Toluene, Ethylbenzene, Xylenes (BTEX), and Total Petroleum Hydrocarbons (TPH) constituents in the water. With no organic compounds in the produced water which may be discharged into pit ID#264508, there is no potential for volatile organic compounds (VOCs) emissions.

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: 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

0 COA	

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)