

State of Colorado  
Oil and Gas Conservation Commission

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Document Number:

403200810

Date Received:

11/09/2022

## 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: 115234

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

OGCC Operator Number:	66561	Contact Name:	ERIN JOSEPH
Name of Operator:	OXY USA INC		
Address:	PO BOX 173779	Phone:	(970) 515-1169
City:	DENVER	State:	CO
Zip:	80217-3779	Email:	ERIN_JOSEPH@OXY.COM

## Pit Location Information

Operator's Pit/Facility Name:	DRILL SITE 2 SOUTH PIT	Operator's Pit/Facility Number:	
API Number (associated well):	05-		
OGCC Location ID (associated location):	334549	Or Form 2A #	
Pit Location (QtrQtr, Sec, Twp, Rng, Meridian):	NENW-15-27S-70W-6		
Latitude:	37.702590	Longitude:	-105.210510
County:	HUERFANO		

## Operation Information

Construction Date:	01/01/1983	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 type="checkbox"/> Production:	<input type="checkbox"/> Skimming/Settling	<input type="checkbox"/> Produced Water Storage
<input type="checkbox"/> Special Purpose:	<input type="checkbox"/> Flare	<input checked="" 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 checked="" type="checkbox"/> Emergency	<input type="checkbox"/> Workover
	<input type="checkbox"/> Plugging	

Method of treatment prior to discharge into pit: \_\_\_\_\_

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

Other Information:

PIT IS FOR EMERGENCY BLOWDOWN ONLY. IN NORMAL OPERATIONS PIT IS NEVER USED

## Site Conditions

Enter 5280 for distance greater than 1 mile.			
Distance (in feet) to the nearest surface water:	1047	Ground Water (depth):	5280
Distance (in feet) to nearest Building Unit:	129	Water Well:	5280
Distance (in feet) to nearest Designated Outside Activity Area:	5280		

## Pit Design and Construction

Size of Pit (in feet): Length: 63 Width: 40 Depth: 11 Calculated Working Volume (in barrels): 300

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

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

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

Secondary Liner (if present): Type: NONE Thickness (mil): 0

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

Is Pit Fenced? Yes 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:

Operator  
Comments:

### Certification

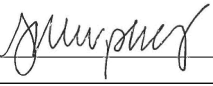
Rule 909.e.(3): If an Operator allows oil or condensate (free product or sheen) to accumulate in a Pit, then the Director may revoke the Operator's Form 15 and require the Operator to close and remediate the Pit.

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

Signed: \_\_\_\_\_ Print Name: ERIN JOSEPH

Title: REGULATORY CONSULTANT Email: ERIN\_JOSEPH@OXY.COM Date: 11/09/2022

### Approval

Signed:  Title: Director of COGCC Date: 12/21/2022

### 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**

403200810	PIT REPORT SUBMITTED
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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)