

STATE OF WYOMING
OIL AND GAS CONSERVATION COMMISSION
P. O. Box 2640
Casper, Wyoming 82602

FEDERAL FORMS MAY BE SUBMITTED IN LIEU OF FORM 14A for non-split estate lands.
IF ALL INFORMATION REQUIRED HEREON IS INCLUDED

API #:

COUNTY

7.

(SUBMIT IN DUPLICATE)

Split Estate

Yes No If Split Estate,
provide the Form 1A.

APPLICATION FOR PERMIT TO CONSTRUCT AND USE AN EARTHEN PIT
FOR RETENTION OF PRODUCED WATER

1. TYPE OF PIT. CHECK ONE.

NEW PIT

EXISTING PIT

2. NAME OF OPERATOR

PHONE NO.

EMAIL

3. ADDRESS OF OPERATOR

4. WELL NAME &
NUMBER*

6. LOCATION (QQ SEC. T.R.)
T. R.

LAT.
LON.

GROUND ELEVATION
5. Ft.

9. Distance: Is this pit located less than 350 feet from water supplies, residences, schools, parks, hospitals,
Churches, business, or other places where people are known to congregate?

No Yes

10. WATER ANALYSIS - TESTS MUST BE MADE IN ACCORDANCE WITH STANDARD METHODS -
ATTACH FULL COPY OF THE ANALYSIS(ES) TO THIS FORM.

TOTAL DISOLVED SOLIDS _____ mg/l

OIL AND GREASE _____ mg/l

11. METHOD OF WATER SAMPLE COLLECTION

LABORATORY PROVIDED RECEIPTAL
DATE WATER SAMPLE WAS TAKEN IN THE FIELD _____

OTHER: _____

12.

MAXIMUM ESTIMATED INFLOW _____ BWPD

AVERAGE ESTIMATED INFLOW _____ BWPD

13. SIZE OF PIT:

LENGTH _____ FT. WIDTH _____ FT. DEPTH _____ FT. FREEBOARD _____ FT.

14.

CAPACITY _____ 0 _____ BBLs.

15. ORIGIN OF THE PIT CONTENT.

16. DISPOSAL OF PIT CONTENT:

EVAPORATION _____

HAULED _____ (PIT LOCATION)

DISPOSAL WELL _____ (WELL NO. AND LOCATION)

17. MAXIMUM FLUID LEVEL ABOVE AVG. GROUND LEVEL

FT. _____

18. DRAINAGE DISTANCE IN FEET TO CLOSEST FRESH POND, STREAM OR LAKE

NAME _____ FT. _____

19. SUBSOIL TYPE

20. TYPE OF SEALING MATERIAL (Including specifications and Method of Application)

* Number Assigned to Well Or One Of The Wells Going Into Pit.

FORM 14 A CONTINUED

21. ADDITIONAL INFORMATION: (By attachment, include a plan view of the location, a topo map of sufficient size and detail to determine the surface drainage system complete with all natural waterways and irrigation systems, (if appropriate), and other information as may be specifically required by the Commission).

22. I HEREBY CERTIFY THAT THE FOREGOING IS TRUE AND CORRECT

SIGNED _____ TITLE _____ DATE _____

THE SPACE BELOW IS FOR COMMISSION USE

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: