

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303)894-2100 Fax:(303)894-2109



FOR OGCC USE ONLY

RECEIVED
4/3/2014

SPILL/RELEASE REPORT

This form is to be submitted by the party responsible for the oil and gas spill or release. Any spill or release which may impact waters of the State must be reported as soon as practicable; any spill over 20 bbls must be reported within 24 hours and all spills over five bbls must be reported within ten days. Submit a Site Investigation and Remediation Workplan (Form 27) when requested by the Director.

Spill report taken by:

FACILITY ID:

OPERATOR INFORMATION

Name of Operator: <u>CM Production, LLC</u>	OGCC Operator No: <u>10352</u>	Phone Numbers
Address: <u>600 17th Street, Suite 2800 South</u>		No: # <u>303.534.0199</u>
City: <u>Denver</u>	State: <u>CO</u> Zip: <u>80202</u>	Fax: <u>303.479.1318</u>
Contact Person: <u>John Teff</u>		E-Mail: <u>johnt@cmproductionllc.com</u>

DESCRIPTION OF SPILL OR RELEASE

Date of Incident: <u>04/01/2014</u>	Facility Name & No.: <u>Rice # 116281</u>	County: <u>Logan</u>
Type of Facility (well, tank battery, flow line, pit): <u>Produced Water Pit - South Pit</u>		QtrQtr: <u>SW NW</u> Section: <u>33</u>
Well Name and Number: <u>N/A</u>		Township: <u>12N</u> Range: <u>54W</u>
API Number: <u>N/A</u>		Meridian: <u>6</u>
Specify volume spilled and recovered (in bbls) for the following materials:		
Oil spilled: _____	Oil recov'd: _____	Water spilled: <u>4 bbls</u>
		Water recov'd: <u>0 bbls</u>
		Other spilled: _____
		Other recov'd: _____
Ground Water impacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Surface Water impacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Contained within berm? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Area and vertical extent of spill: <u>10</u> x <u>15</u>	
Current land use: <u>Rangeland</u>	Weather conditions: <u>Cool, overcast, High Temp 55 F</u>	
Soil/geology description: <u>Mitchell-Keota Loam 3% to 9% slopes, Brule Formation - Tertiary White River Group</u>		
IF LESS THAN A MILE, report distance IN FEET to nearest.... Surface water: <u>500 ft E</u> wetlands: <u>N/A</u> buildings: _____		
Livestock: <u>~1,000 ft S</u> water wells: _____ Depth to shallowest ground water: <u>130 ft</u>		
Cause of spill (e.g., equipment failure, human error, etc.): <u>Animal burrow into the earthen berm</u> Detailed description of the spill/release incident:		

CORRECTIVE ACTION

Describe immediate response (how stopped, contained and recovered):
CM Production personnel used an excavator to stop the leak.

Describe any emergency pits constructed:
No emergency pits were constructed.

How was the extent of contamination determined:
The extent of impact was determined visually.

Further remediation activities proposed (attach separate sheet if needed):
Impacted soils were scraped up with the excavator. The need for further remediation will be assessed.

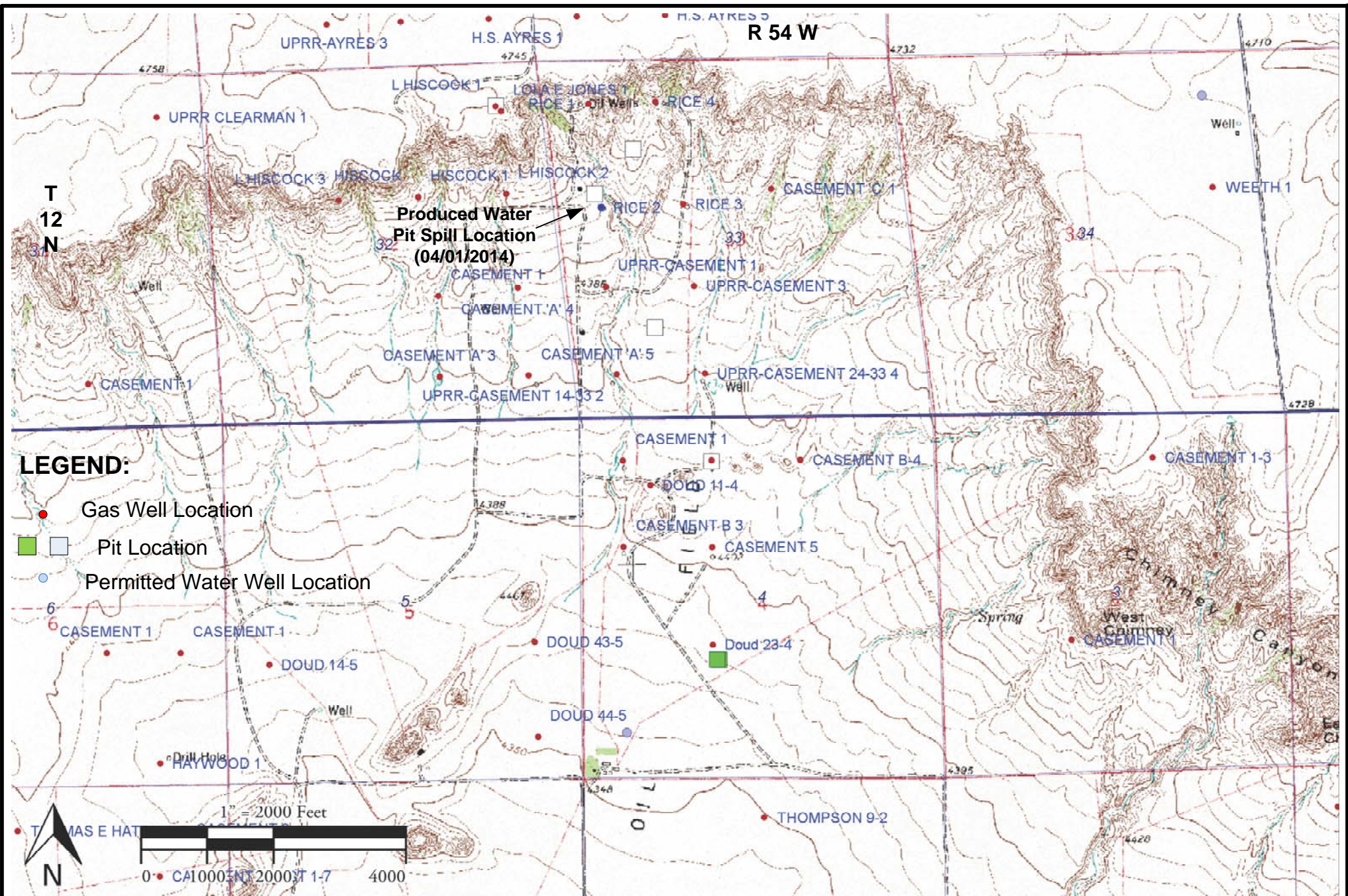
Describe measures taken to prevent problem from reoccurring:
CM Production personnel will use the excavator to compact the berm on the south pit to make sure that no other burrows are present that could result in reoccurring spills.

OTHER NOTIFICATIONS

List the parties and agencies notified (County, BLM, EPA, DOT, Local Emergency Planning Coordinator or other).

Date	Agency	Contact	Phone	Response
04/01/2014	Landowner Rep	Mr. Dick Rogers	Called (Private)	
04/02/2014	COGCC - Inspector	Mr. Kym Schure - via email	(970) 520-3832	
04/02/2014	COGCC - NE Region EPS	Mr. John Noto - via email	(720) 498-5298	Automated Out of Office reply
04/02/2014	COGCC - E. Env Supervisor	Mr. John Axelson - via email	(303) 894-2100 x 5115	Reply email - Submit Form 19 & Site Map

Spill/Release Tracking No: **2148452**



PROJECT NO: 014-0704

DRAWN BY: JWH

DATE: 04/03/14

Cliff Field - Rice Lease Produced Water Spill 04/01/2014
CM Production, LLC
Cliff Field, Rice Lease, Logan County, Colorado

OLSSON
ASSOCIATES

4690 Table Mountain Drive #200
Golden, Colorado 80403
TEL 303.237.2072
FAX 303.237.2659

FIGURE

1