

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:

400642326

Date Received:

07/10/2014

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

438226

SPILL/RELEASE REPORT (INITIAL /w SUPPLEMENTAL)

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.

OPERATOR INFORMATION

Name of Operator: <u>ENCANA OIL & GAS (USA) INC</u>	Operator No: <u>100185</u>	Phone Numbers
Address: <u>370 17TH ST STE 1700</u>		Phone: <u>(720) 402-9543</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(720) 402-954</u>
Zip: <u>80202-5632</u>		Email: <u>tarah.garza@encana.com</u>
Contact Person: <u>Tarah Garza</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400642326

Initial Report Date: 07/10/2014 Date of Discovery: 07/04/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENW SEC 26 TWP 2N RNG 66W MERIDIAN 6Latitude: 40.114900 Longitude: -104.746660Municipality (if within municipal boundaries): _____ County: WELD

Reference Location:

Facility Type: WELL ☐ Facility/Location ID No _____☐ No Existing Facility or Location ID No.☒ Well API No. (Only if the reference facility is well) 05-123-37760

Fluid(s) Spilled/Released (please answer Yes/No):

Was one (1) barrel or more spilled outside of berms or secondary containment? Yes

Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.

Were Five (5) barrels or more spilled? No

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): 0Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): >=1 and <5Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____Weather Condition: ClearSurface Owner: FEE Other(Specify): TBD

Check if impacted or threatened by spill/Release (please answer Yes/No to all that apply):

Waters of the State ☐ Residence/Occupied Structure ☐ Livestock ☐ Public Byway ☐ Surface Water Supply Area ☐

As defined in COGCC 100-Series Rules

Describe what is known about the spill/release event (what happened -- including how it was stopped, contained, and recovered):

While flowing back, a gasket failure on iron connection on the inlet to the manifold created a release/spill. It was immediately closed in and recovered via vacuum truck.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
7/4/2014	COGCC	Canfield	303-894-2100	N/A
7/4/2014	Land Owner	N/A	-	

REQUEST FOR CLOSURE

Spill/Release Reports should be closed when impacts have been remediated or when further investigation and corrective actions will take place under an approved Form 27.

Basis for Closure: ☐ Corrective Actions Completed (documentation attached)

☐ Work proceeding under an approved Form 27

Form 27 Remediation Project No: _____

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

Signed: _____ Print Name: Tarah Garza

Title: Environmental Specialist Date: 07/10/2014 Email: tarah.garza@encana.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

400642326	FORM 19 SUBMITTED
400642337	TOPOGRAPHIC MAP

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)