

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:

400698379

Date Received:

10/03/2014

SPILL/RELEASE REPORT (INITIAL)

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:

CANFIELD, CHRIS

Spill/Release Point ID:

439655

OPERATOR INFORMATION

Name of Operator: FOUNDATION ENERGY MANAGEMENT LLC	Operator No: 10112	<b>Phone Numbers</b>
Address: 16000 DALLAS PARKWAY #875		Phone: (918) 526-5592
City: DALLAS State: TX Zip: 75248-6607		Mobile: (918) 585-1660
Contact Person: Rachel Grant		Email: regulatory@foundationenergy.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400698379

Initial Report Date: 09/30/2014 Date of Discovery: 01/21/2014 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SW SW SEC 2 TWP 1N RNG 67W MERIDIAN 6

Latitude: 40.074750 Longitude: -104.865280

Municipality (if within municipal boundaries): County: WELD

Reference Location:

Facility Type: FLOWLINE  Facility/Location ID No  No Existing Facility or Location ID No.  Well API No. (Only if the reference facility is well) 05-123-07467

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): Unknown Estimated Condensate Spill Volume(bbl): Unknown

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): Unknown

Estimated Other E&P Waste Spill Volume(bbl): 0 Estimated Drilling Fluid Spill Volume(bbl): 0

Specify:

Land Use:

Current Land Use: OTHER Other(Specify): Wellpad

Weather Condition: sunny, dry

Surface Owner: FEE Other(Specify):

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):

Anadarko (shared tank battery) gave notice when they were boring around their current lines that they discovered historical contamination. Foundation shut-in their well and lines during this testing period. An area was dug up on the well pad at which point the flowlines for multiple wells crossed. Contamination was visible at the area where all the lines meet. It was unsure whether historical contamination occurred from Foundation or Anadarko's lines. Samples were collected shortly thereafter that exceeded BTEX and TPH. Foundation is trying to determine the cause of the contamination and develop a plan to remediate the area.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
9/30/2014	COGCC	Chris Canfield	303-894-2100	Left message to discuss

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

Signed: \_\_\_\_\_ Print Name: Rachel Grant

Title: Sr. HSE/Regulatory Tech Date: 10/03/2014 Email: regulatory@foundationenergy.com

**COA Type**

**Description**

<u>COA Type</u>	<u>Description</u>

**Attachment Check List**

**Att Doc Num**

**Name**

400698379	FORM 19 SUBMITTED
400698819	AERIAL PHOTOGRAPH
400698821	TOPOGRAPHIC MAP

Total Attach: 3 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)