

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:

400738975

Date Received:

11/24/2014

Spill report taken by:

Spill/Release Point ID:

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.

OPERATOR INFORMATION

Name of Operator: <u>FOUNDATION ENERGY MANAGEMENT LLC</u>	Operator No: <u>10112</u>	Phone Numbers
Address: <u>16000 DALLAS PARKWAY #875</u>		Phone: <u>(918) 526-5591</u>
City: <u>DALLAS</u>	State: <u>TX</u>	Mobile: <u>(918) 636-7239</u>
Zip: <u>75248-6607</u>		Email: <u>regulatory@foundationenergy.com</u>
Contact Person: <u>Caitlin O'Hair</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400738975

Initial Report Date: 11/24/2014 Date of Discovery: 11/24/2014 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SENW SEC 14 TWP 4S RNG 104W MERIDIAN 6

Latitude: 39.712770 Longitude: -109.041060

Municipality (if within municipal boundaries): _____ County: RIO BLANCO

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) 05-103-10446

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): 0

Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): >=1 and <5

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

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): _____

Weather Condition: Partly cloudy, dry

Surface Owner: FEDERAL

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):

Well head broke at nipple at two valves on the tubing side of the well head. This allowed some water from the flowline to spill onto location at an estimated 2-3 bbls of production water. Exact cause is unknown, but we think that the rods spun backwards at a high speed causing the bearing to seize, putting force into the wellhead. This then caused the well head to spin 270 degrees counter-clockwise after breaking the flow line.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
11/24/2014	COGCC	Stan Spencer	970-6252497	Did not pick up phone, left message.
11/24/2014	LEPC	John Hutchins	970-878-5023	Number disconnected, sent email at jhutchins@co.rio-blanco.co.us

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: 11/24/2014 Email: regulatory@foundationenergy.com

Attachment Check List

Att Doc Num **Name**

400739079	TOPOGRAPHIC MAP
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Total Attach: 1 Files

General Comments

User Group **Comment** **Comment Date**

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Total: 0 comment(s)