

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:

400756825

Date Received:

12/20/2014

Spill report taken by:

LUJAN, CARLOS

Spill/Release Point ID:

439840

SPILL/RELEASE REPORT (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>CAERUS PICEANCE LLC</u>	Operator No: <u>10456</u>	Phone Numbers
Address: <u>600 17TH STREET #1600N</u>		Phone: <u>(970) 285-9606</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(970) 778-2314</u>
Zip: <u>80202</u>		Email: <u>jjanicek@caerusoilandgas.com</u>
Contact Person: <u>Jake Janicek</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400731473

Initial Report Date: 11/13/2014 Date of Discovery: 11/11/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 8 TWP 7S RNG 94W MERIDIAN 6Latitude: 39.456371 Longitude: -107.916307Municipality (if within municipal boundaries): _____ County: GARFIELD

Reference Location:

Facility Type: WELL PAD ☒ Facility/Location ID No 335006☐ No Existing Facility or Location ID No.☐ Well API No. (Only if the reference facility is well) 05- -

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? Yes

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

Estimated Oil Spill Volume(bbl): 0Estimated Condensate Spill Volume(bbl): UnknownEstimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): 0Estimated 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: Overcast, cold, 38 F. Slight PPTSurface 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):

The release was caused by corrosion of the metal on a 2" buried condensate line. The leak was discovered during a quarterly pressure test on the buried line to test its integrity. The leaking line allowed condensate to migrate out into the subsurface soil.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
11/12/2014	COGCC	Carlos Lujan	970-286-3292	Notified via email
11/12/2014	Garfield County	Kirby Wynn	970-625-5905	Notified via email
11/13/2014	Landowner	John Savage	970-625-1395	Notified via voicemail

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: 8806

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

Signed: _____ Print Name: Jake Janicek

Title: EHS Professional Date: 12/20/2014 Email: jjanicek@caerusoilandgas.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

400756825	FORM 19 SUBMITTED
400756826	OTHER

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

Environmental	Impacted area was excavated; confirmation samples OK; excavation backfilled with clean soil. Form 19 is been closed. Form 27 REM #8806 will deal with the impacted soil stock pile.	12/22/2014 10:05:22 AM
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Total: 1 comment(s)