

State of Colorado
Oil and Gas Conservation Commission

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 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

400805415

Date Received:

03/10/2015

Spill report taken by:

CHESSON, BOB

Spill/Release Point ID:

441008

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>PDC ENERGY INC</u> | Operator No: <u>69175</u> | Phone Numbers |
| Address: <u>1775 SHERMAN STREET - STE 3000</u> | | Phone: <u>(303) 860-5800</u> |
| City: <u>DENVER</u> | State: <u>CO</u> | Zip: <u>80203</u> |
| Contact Person: <u>Brandon Bruns</u> | | Mobile: <u>()</u> |
| | | Email: <u>brandon.bruns@pdce.com</u> |

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400803441

Initial Report Date: 03/04/2015 Date of Discovery: 03/03/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWSW SEC 6 TWP 4N RNG 66W MERIDIAN 6Latitude: 40.340094 Longitude: -104.826568Municipality (if within municipal boundaries): _____ County: WELD

Reference Location:

Facility Type: WELL PAD ☒ Facility/Location ID No 439392☐ 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): 0Estimated 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): >=5 and <100Specify: Estimated spill volume was approximately 18 barrels

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____Weather Condition: cloudy, 25 degreesSurface 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):

After completing cementing operations at the Bernhardt 4N66W6G drilling location, a hose was accidentally disconnected causing the release of approximately 18 barrels of drilling mud. The spill was immediately cleaned up and a majority of the spilled mud was recovered. No surface water or groundwater was impacted as a result of this spill.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

| Date | Agency/Party | Contact | Phone | Response |
|----------|--------------|----------------|-------|---|
| 3/4/2015 | landowner | Dave Bernhardt | - | talked to landowner and notified him of spill |
| 3/4/2015 | Weld County | Roy Rudisill | - | sent email notification |

SPILL/RELEASE DETAIL REPORTS

| | | | |
|-----------------|--------------------------------------|-----------------|--------------------------|
| #1 | Supplemental Report Date: 03/09/2015 | | |
| FLUIDS | BBL's SPILLED | BBL's RECOVERED | Unknown |
| OIL | 0 | 0 | <input type="checkbox"/> |
| CONDENSATE | 0 | 0 | <input type="checkbox"/> |
| PRODUCED WATER | 0 | 0 | <input type="checkbox"/> |
| DRILLING FLUID | 18 | 17 | <input type="checkbox"/> |
| FLOW BACK FLUID | 0 | 0 | <input type="checkbox"/> |
| OTHER E&P WASTE | 0 | 0 | <input type="checkbox"/> |

specify: _____

Was spill/release completely contained within berms or secondary containment? NO Was an Emergency Pit constructed? NO

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

A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit

Impacted Media (Check all that apply) ☒ Soil ☐ Groundwater ☐ Surface Water ☐ Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): 35 Width of Impact (feet): 10

Depth of Impact (feet BGS): _____ Depth of Impact (inches BGS): _____

How was extent determined?

On March 3, 2015, a release of approximately 18 barrels of drilling mud occurred at the Bernhardt 4N66W6G drilling location. The release volume was immediately contained and recovered. Impacted material was excavated and disposed of in the adjacent mud tanks on location. On March 5, 2015, six confirmation soil samples (SS01 - SS06) were collected from the excavation extent at approximately 3 inches below ground surface (bgs). Soil samples were submitted to Summit Scientific Laboratories in Golden, Colorado for analysis of benzene, toluene, ethylbenzene, and total xylenes (BTEX), naphthalene, and total petroleum hydrocarbons (TPH) - gasoline range organics (GRO) by USEPA Method 8260B. In addition, samples were analyzed for TPH - diesel range organics (DRO) by USEPA Method 8015. Analytical results indicated constituent concentrations were below COGCC Table 910-1 soil standards in the six sample locations. Soil analytical results are summarized in Table 1 and the laboratory analytical report is included as Attachment A. The excavation extent and soil sample locations are illustrated on Figure 2. Laboratory analytical results are below COGCC Table 910-1 soil standards. Consequently, PDC is requesting a No Further Action (NFA) determination for this release.

Soil/Geology Description:

Kim loam, 1 to 3 percent slopes

Depth to Groundwater (feet BGS) 10 Number Water Wells within 1/2 mile radius: 13

If less than 1 mile, distance in feet to nearest

| | | | | | |
|------------|-------------|--|-------------------|-------------|--|
| Water Well | <u>735</u> | None <input type="checkbox"/> | Surface Water | <u>940</u> | None <input type="checkbox"/> |
| Wetlands | _____ | None <input checked="" type="checkbox"/> | Springs | _____ | None <input checked="" type="checkbox"/> |
| Livestock | <u>1250</u> | None <input type="checkbox"/> | Occupied Building | <u>2460</u> | None <input type="checkbox"/> |

Additional Spill Details Not Provided Above:

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 03/09/2015

Cause of Spill (Check all that apply) ☒ Human Error ☐ Equipment Failure ☐ Historical-Unknown
☐ Other (specify) _____

Describe Incident & Root Cause (include specific equipment and point of failure)

A release of approximately 18 barrels of drilling mud occurred when a hose was accidentally disconnected during drilling operations.

Describe measures taken to prevent the problem(s) from reoccurring:

Contractors have been instructed to routinely verify hose connections and fittings during drilling operations.

Volume of Soil Excavated (cubic yards): 5

Disposition of Excavated Soil (attach documentation) ☐ Offsite Disposal ☒ Onsite Treatment
☐ Other (specify) _____

Volume of Impacted Ground Water Removed (bbls): 0

Volume of Impacted Surface Water Removed (bbls): 0

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: Brandon Brunts

Title: EHS Supervisor Date: 03/10/2015 Email: brandon.brunts@pdce.com

COA Type

Description

| | |
|--|--|
| | |
|--|--|

Attachment Check List

Att Doc Num

Name

| | |
|-----------|--------------------|
| 400805415 | FORM 19 SUBMITTED |
| 400805417 | ANALYTICAL RESULTS |
| 400805418 | TOPOGRAPHIC MAP |
| 400805419 | SITE MAP |

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)