

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:

400820832

Date Received:

04/06/2015

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

441105

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>ENCANA OIL & GAS (USA) INC</u> | Operator No: <u>100185</u> | Phone Numbers |
| Address: <u>370 17TH ST STE 1700</u> | | Phone: <u>(303) 7743962</u> |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202-5632</u> | | Mobile: <u>()</u> |
| Contact Person: <u>Forrest Thorniley</u> | | Email: <u>forrest.thorniley@enana.com</u> |

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400798670

Initial Report Date: 02/24/2015 Date of Discovery: 02/22/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWSE SEC 21 TWP 2N RNG 68W MERIDIAN 6

Latitude: 40.122520 Longitude: -105.005080

Municipality (if within municipal boundaries): _____ County: WELD

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No 434303
 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? No

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): 0 Estimated Condensate Spill Volume(bbl): >=100

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

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: Snowing

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):

The spill was discovered at approximately 7AM on 2/22/15. Condensate was found to be leaking from a tank loadline at the base of the production tank on a loose flange. The flange bolts were tightened and the leak was stopped. Immediately a vacuum truck was dispatched to remove free product from the lined secondary containment. The spill did not leave containment.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

| <u>Date</u> | <u>Agency/Party</u> | <u>Contact</u> | <u>Phone</u> | <u>Response</u> |
|-------------|---------------------|----------------|--------------|-----------------|
| 2/22/2015 | COGCC | main number | 303-8942100 | left message |
| 2/23/2015 | COGCC | Chris Canfield | - | email |
| 2/23/2015 | Weld County | Roy Rudisill | - | email |

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: Forrest Thorniley

Title: Environmental Specialist Date: 04/06/2015 Email: forrest.thorniley@encana.com

COA Type

Description

| <u>COA Type</u> | <u>Description</u> |
|-----------------|--------------------|
| | |

Attachment Check List

| <u>Att Doc Num</u> | <u>Name</u> |
|--------------------|--------------------|
| 400820832 | FORM 19 SUBMITTED |
| 400820840 | ANALYTICAL RESULTS |

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)