

State of Colorado Oil and Gas Conservation Commission

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Document Number:

400874189

Date Received:

07/24/2015

Spill report taken by:

YOUNG, ROB

Spill/Release Point ID:

441453

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>WESTERN OPERATING COMPANY</u>	Operator No: <u>95620</u>	Phone Numbers
Address: <u>518 17TH ST STE 200</u>		Phone: <u>(303) 893-2438</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Steven James</u>		Mobile: <u>()</u>
		Email: <u>steve@westernoperating.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400821408

Initial Report Date: 04/07/2015 Date of Discovery: 04/07/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NESW SEC 35 TWP 9N RNG 54W MERIDIAN 6Latitude: 40.711552 Longitude: -103.383848Municipality (if within municipal boundaries): _____ County: LOGAN

Reference Location:

Facility Type: OTHER ☒ Facility/Location ID No 150330☐ 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): >=1 and <5Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): >=100Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0Specify: APPROX. 600BBL OF PRODUCED WATER

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): _____

Weather Condition: DRY, SUNNY, 70 DEG.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):

4/7/15 WELL WIRELESS SHUTDOWN FOR HIGH PRESSURE FAILED. PRODUCED WATER WASHED OUT SOUTHEASTERN EARTHEN BERM AND FLOWED SSE TOWARD PW PIT AND SKIM TANK. WELL WAS MANUALLY SHUT IN TO STOP DISCHARGE. SURROUNDING LAND VERY FLAT; RUNOFF STOPPED NEAR SKIM TANK/PW PIT. KYM SCHURE, ROB YOUNG, JOHN AXELSON, AND MATT LEPORE WERE NOTIFIED OF THE RELEASE. CREW WILL BE ONSITE ON 4/8/15 TO SCRAPE UP AND DISPOSE OF ANY OILY SOIL. SURFACE SAMPLES OF RELEASE AREA WILL BE COLLECTED TO VERIFY COMPLIANCE WITH TABLE 910 VALUES. RELEASE WAS APPROXIMATELY 200 FT LONG BY 75 FT WIDE.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
4/7/2015	COGCC	KYM SCHURE	970-5222534	RECEIVED
4/8/2015	COGCC	MATT LEPORE	303-8942100	RECEIVED BY J.AXELSON AND R.YOUNG
4/8/2015	LAND OWNER	MARK WALTERS	-	CONTACTED BY STEVE JAMES

CORRECTIVE ACTIONS

#1	Supplemental Report Date:	07/24/2015
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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)

Wireless well shutdown failed allowing produced water tank to overflow and the flow caused the SE corner of the secondary containment berm to fail

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

Wireless tank overflow replaced. SE corner of berm repaired. Soil hauled 7/24/15 and 7/27/15 due to rain earlier in week/contractor cancelation. Manifests to be filed under separated cover.

Volume of Soil Excavated (cubic yards): 150

Disposition of Excavated Soil (attach documentation) ☐ Offsite Disposal ☐ Onsite Treatment
☒ Other (specify) Hauling 7/24 and 7/27 due to rain

Volume of Impacted Ground Water Removed (bbls): _____

Volume of Impacted Surface Water Removed (bbls): _____

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: _____

OPERATOR COMMENTS:

Lab data and Figure for soil removal. As noted soil was stockpiled on plastic and removals began on 7/24 and will carry on until 7/27. Documentation will be forwarded to COGCC when it is available from landfill.

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

Signed: _____ Print Name: Eric Lang
Title: Project Geologist Date: 07/24/2015 Email: elang@ltenv.com

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400874191	SITE MAP
400874192	ANALYTICAL RESULTS
400874193	ANALYTICAL RESULTS
400874194	ANALYTICAL RESULTS

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)