

State of Colorado
Oil and Gas Conservation Commission

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



Document Number:

400875664

Date Received:

07/28/2015

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

441871

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>PROSPECT ENERGY LLC</u>	Operator No: <u>10312</u>	Phone Numbers
Address: <u>500 DALLAS STREET SUITE 1800</u>		Phone: <u>(303) 912-8292</u>
City: <u>HOUSTON</u>	State: <u>TX</u>	Zip: <u>77002</u>
Contact Person: <u>Mary Griggs</u>		Mobile: <u>(303) 912-8292</u>
		Email: <u>mary.griggs@memorialrd.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400845210

Initial Report Date: 05/28/2015 Date of Discovery: 05/27/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 30 TWP 8N RNG 68W MERIDIAN 6Latitude: 40.637190 Longitude: -105.053590Municipality (if within municipal boundaries): _____ County: LARIMER

Reference Location:

Facility Type: FLOWLINE ☒ Facility/Location ID No 333083☐ 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): >0 and <1Estimated 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): 0

Specify: _____

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): _____

Weather Condition: Overcast, 50 degrees.Surface Owner: FEEOther(Specify): Operator is surface owner

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):

During his early morning site visit, the Production Superintendent noted steam at the location. Upon inspection, he observed production water in an excavation. The excavation was the result of an on-going cleanup for a previous release which occurred May 16. The water had filled the 20 feet x 20 feet x 11 feet (depth) excavation and had overflowed to the southeast side of the location. No production water left location. The wells associated with this flowline were shut in. A vacuum truck recovered produced water. It is estimated that 450 bbls of production water was released and 440 bbls of produced water was recovered. It is estimated that 0.1 bbl of oil was released and 0.1 bbl of oil was recovered. All fluid was hauled to a licensed disposal facility. The source of the release was a failed 3 inch diameter connection on the produced water production line, due to age and corrosion. A temporary brace was installed under the suspended portion of the 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>
5/27/2015	City of Fort Collins	Dan Weinheimer	970-416-2253	Left voice message

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: 9188

OPERATOR COMMENTS:

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

Signed: _____ Print Name: Mary Griggs

Title: Reg/Environmental Date: 07/28/2015 Email: mary.griggs@memorialrd.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

400875664	FORM 19 SUBMITTED
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)