

State of Colorado Oil and Gas Conservation Commission

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Document Number:

400884003

Date Received:

08/13/2015

Spill report taken by:

Spill/Release Point ID:

SPILL/RELEASE REPORT (INITIAL /w 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: GREAT WESTERN OPERATING COMPANY LLC	Operator No: 10110	Phone Numbers
Address: 1801 BROADWAY #500		Phone: (303) 398-0302
City: DENVER	State: CO	Zip: 80202
Contact Person: Scot Donato		Mobile: (303) 579-7739
		Email: sdonato@gwogco.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400884003

Initial Report Date: 08/13/2015 Date of Discovery: 08/10/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESE SEC 34 TWP 1N RNG 67W MERIDIAN 6

Latitude: 40.002783 Longitude: -104.868047

Municipality (if within municipal boundaries): County: WELD

Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 440806
☐ 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): >=100

Estimated Condensate Spill Volume(bbl): 0

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: CROP LAND Other(Specify):

Weather Condition: clear

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):

Rose Rock Oil truck was loading oil when it was discovered that a valve was missing on one of the sections of load line allowing oil to run out of the line. The missing valve was on the opposite end of the line from where the driver was loading. The release was found after the driver had completed his normal loading procedures and did a quick walk around the battery.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
8/11/2015	COGCC	Chris Canfield	-	notified by email
8/11/2015	Weld County	Troy Swain	-	notified by email
8/11/2015	surface owner	Carroll Marcus	303-638-5415	GWOC spoke to by phone

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 08/13/2015		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	140	140	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	0	<input type="checkbox"/>
DRILLING FLUID	0	0	<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? <u>YES</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
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) <input type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): <u>70</u>		Width of Impact (feet): <u>72</u>	
Depth of Impact (feet BGS): <u>0</u>		Depth of Impact (inches BGS): <u>0</u>	
How was extent determined?			
All oil was released inside of the lined tank containment. There was no contact with underlying soils.			
Soil/Geology Description:			
No soils were impacted by this release			
Depth to Groundwater (feet BGS) <u>20</u>		Number Water Wells within 1/2 mile radius: <u>7</u>	
If less than 1 mile, distance in feet to nearest	Water Well <u>900</u> None <input type="checkbox"/>	Surface Water <u>1650</u> None <input type="checkbox"/>	
	Wetlands <u>1650</u> None <input type="checkbox"/>	Springs <u>0</u> None <input type="checkbox"/>	
	Livestock <u>0</u> None <input type="checkbox"/>	Occupied Building <u>700</u> None <input type="checkbox"/>	
Additional Spill Details Not Provided Above:			

GWOC had a vac truck on site and immediately began sucking up the oil out of the containment and put it back into a tank. 135 bbls were recovered and the remaining 5 bbls were disposed of with the pea gravel. Full recovery with no impact to the soil. Pea gravel inside the berm was removed, and the berm and all equipment within were cleaned.

CORRECTIVE ACTIONS

#1	Supplemental Report Date: 08/13/2015
Cause of Spill (Check all that apply) <input checked="" type="checkbox"/> Human Error <input checked="" type="checkbox"/> Equipment Failure <input type="checkbox"/> Historical-Unknown <input type="checkbox"/> Other (specify) _____	
Describe Incident & Root Cause (include specific equipment and point of failure) <div>Rose Rock Oil truck was loading oil when it was discovered that a valve was missing on one of the sections of load line allowing oil to run out of the line. The missing valve was on the opposite end of the line from where the driver was loading. The release was found after the driver had completed his normal loading procedures and did a quick walk around the battery.</div>	
Describe measures taken to prevent the problem(s) from reoccurring: <div>Additional employee and contractor training</div>	
Volume of Soil Excavated (cubic yards): 0	
Disposition of Excavated Soil (attach documentation) <input type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment <input type="checkbox"/> 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: _____

OPERATOR COMMENTS:

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

Signed: _____ Print Name: Rachel Peterson

Title: Project Manager Date: 08/13/2015 Email: petersonr@agwassenaar.com

Attachment Check List

Att Doc Num	Name
400884033	OTHER

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)