

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:

400926013

Date Received:

10/28/2015

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

443747

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: KOCH EXPLORATION COMPANY, LLCOperator No: 49100Address: 950 17TH STREET #1900City: DENVERState: COZip: 80202Contact Person: Jordan Radin

Phone Numbers

Phone: (720) 201-4941Mobile: (720) 201-4941Email: radinj@kochind.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400926013Initial Report Date: 10/28/2015Date of Discovery: 10/24/2015Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWSE SEC 29 TWP 2N RNG 96W MERIDIAN 6Latitude: 40.110970 Longitude: -108.186900Municipality (if within municipal boundaries): _____ County: RIO BLANCO

Reference Location:

Facility Type: WELL☐ Facility/Location ID No _____☐ No Existing Facility or Location ID No.☒ Well API No. (Only if the reference facility is well) 05-103-10113

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): UnknownEstimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): UnknownEstimated 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: Clear, mildSurface Owner: FEDERALOther(Specify): Bureau of Land Management

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 cause of the spill is not yet known but will be the subject of a formal investigation. The spill originated from the disposal well tank battery and was 100% contained inside secondary containment. The spilled fluids were recovered by a vacuum truck within 8 hours of the spill. As this spill occurred on a Saturday not all details are immediately available. Details of oil and produced water spill volume estimates and how the spill was stopped will be provided in Supplemental Form 19.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
10/24/2015	BLM	Bud Thompson	970-878-3828	Happy that we were cleaning it up quickly. Asked us to call Justin Wilson (BLM) on Monday 10/26.
10/24/2015	COGCC	Kyle Granahan	970-878-3247	Left Message
10/25/2015	COGCC	Stan Spencer	970-878-2891	Left Message
10/25/2015	Rio Blanco County	Mark Sprague	970-878-9580	Left Message

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 10/28/2015		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	5	5	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	220	220	<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 checked="" 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>95</u>		Width of Impact (feet): <u>47</u>	
Depth of Impact (feet BGS): <u>0</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
Visual Observation			
Soil/Geology Description:			
Clay loam			
Depth to Groundwater (feet BGS) <u>50</u>		Number Water Wells within 1/2 mile radius: <u>0</u>	
If less than 1 mile, distance in feet to nearest		Water Well _____ None <input checked="" type="checkbox"/>	Surface Water _____ None <input checked="" type="checkbox"/>
		Wetlands _____ None <input checked="" type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>
		Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building _____ None <input checked="" type="checkbox"/>

Additional Spill Details Not Provided Above:

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 10/28/2015

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)

Two siphon valves (between gun barrel and water charge tank) were shut by 3rd party water truck driver to pull water from the charge tank for rig use. Valves were errantly left closed, causing produced water to overfill the gunbarrel tanks and escape through the suction vents that are part of the water siphon vent line. Most of the overflow occurred at the suction vents. A small amount of oil came from the top of the oil tank when the siphon valves were opened on 10/24 (due to a rapid influx of fluid to the oil tank).

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

Review operating procedures with site and water truck operators. Evaluating practicality of high-level alarm system for the gunbarrel tanks.

Volume of Soil Excavated (cubic yards): 0

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: _____

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: Darlene Tadlock

Title: E&P Technician Date: 10/28/2015 Email: tadlockd@kochind.com

COA Type

Description

Attachment Check List

Att Doc Num

Name

400926013	FORM 19 SUBMITTED
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Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)