FORM 19 Rev 8/13

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109

400928465

Date Received:

Document Number:

10/31/2015

Spill report taken by:

Spill/Release Point ID:

SPILL/RELEASE REPORT (INITIAL)

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 INFORMATON

Name of Operator: ENCANA OIL & GAS (USA) INC				Operator No:100185		Phone Numbers		
Address: 370 1	7TH ST STE 1700						Phone:	(970) 675-4439
City: DENVER		State:	СО	Zip:	802	02-5632	Mobile:	(970) 290-2912
Contact Person:	Steven Hale						Email:	steven.hale@encana.c om

Location of Spill/Release: QTRQTR NESW SEC 36 TWP 7S RNG 96W MERIDIAN 6 Latitude: 39.390552 Longitude: -108.061925 Municipality (if within municipal boundaries): County: GARFIELD Reference Location: Facility Type: WATER GATHERING SYSTEM/LINE Well API No. (Only if the reference facility is well) 05- Well API No. (Only if the reference facility is well) 05- Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to con 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 Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): >=100 Estimated Other E&P Waste Spill Volume(bbl): 0 Estimated Drilling Fluid Spill Volume(bbl): 0 Specify: TBD.	nitiai Keport Date.	40/04/0045	D-1f	D:	40/00/0045	O-: III T	D + O	:11
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and Use:	Estimated Total Spill Vo	olume: use same rai mated Oil Spill Volui	nges as othe	0		-	· · · · · · · · · · · · · · · · · · ·	
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Weather Condition: partly cloudy, fair	Estimated Total Spill Vo Estimated Flow B Estimated Other E& Specify: TBD.	olume: use same rai mated Oil Spill Volui Back Fluid Spill Volui &P Waste Spill Volui	nges as otherme(bbl):me(bbl):	0 0 0	Estimated Produ Estimated Di	ced Water Spill Volur	me(bbl):	>=100
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Check if impacted or threatened by spill/Release (please answer Yes/No to all that apply):	Estimated Total Spill Von Estimated Flow Bright Estimated Other Estimated Othe	olume: use same rai mated Oil Spill Volui Back Fluid Spill Volui &P Waste Spill Volui NON-CROP LAND partly cloudy, fair	nges as otherme(bbl):me(bbl):	0 0 0 Other(S	Estimated Produ Estimated Di	ced Water Spill Volur	me(bbl):	>=100
Waters of the State 🗵 Residence/Occupied Structure 🔲 Livestock 🔲 Public Byway 🔲 Surface Water Supply A	Estimated Total Spill Volume Estimated Flow B Estimated Other	olume: use same rai mated Oil Spill Volui Back Fluid Spill Volui RP Waste Spill Volui NON-CROP LAND partly cloudy, fair FEE	nges as otherme(bbl):me(bbl):	0 0 0 Other(S	Estimated Produ Estimated Di Specify): Encana	ced Water Spill Volur	me(bbl):	>=100

Describe what is	known about the spill	release event (what happened -	- including how it v	vas stopped, contained,	and recovered):			
to surrounding a flow and prevent	area on slope, approxion t surface flow of release as removed at injection	allace Creek 12" Water pipeline of mately 300 yards above Pete and se from reaching the creek. Pro in facility, C17OU. No surface fl	d Bill Creek. Imme duced water was o	ediate measures were ta Irawn out of the vault an	ken to isolate line, stop d remaining static			
List Agencies a	nd Other Parties Not	ified:						
OTHER NOTIFICATIONS								
<u>Date</u>	Agency/Party	Contact	<u>Phone</u>	Response				
10/30/2015	NRC	Antony Greer	800-424-8802	report # 1132158				
10/30/2015	COGCC	Carlos Lujan	970-286-3292	left voice mail				
OPERATOR C	OMMENTS:		•					
ATTENTON Carl	los Lujan: Investigatio	on of this spill is on-going. Supp	lement information	will be submitted Monda	ay, November 2, 2015.			
I hereby certify	all statements made in	n this form are to the best of my	knowledge true, co	orrect, and complete.				
Signed:			Print Name:	Steven Hale				
Title: Environ	mental Specialist	Date: 10/31/201	15 Email:	steven.hale@encana	ı.com			
Attachment Check List								
Att Doc Num	<u>Name</u>							
Total Attach: 0 F	iles							
General Comments								
User Group	Comment				Comment Date			

Total: 0 comment(s)