

State of Colorado Oil and Gas Conservation Commission

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



Document Number:

400943823

Date Received:

11/26/2015

Spill report taken by:

CHESSON, BOB

Spill/Release Point ID:

444065

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>BARRETT CORPORATION* BILL</u>	Operator No: <u>10071</u>	Phone Numbers
Address: <u>1099 18TH ST STE 2300</u>		Phone: <u>(303) 312-8718</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Rusty Frishmuth</u>		Mobile: <u>()</u>
		Email: <u>rfrishmuth@hotmail.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400941180

Initial Report Date: 11/22/2015 Date of Discovery: 11/21/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWM| SEC 15 TWP 4N RNG 62W MERIDIAN 6
NE

Latitude: 40.318705 Longitude: -104.307443

Municipality (if within municipal boundaries): _____ County: WELD

Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 439461
☐ 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? No

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): >=1 and <5

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: NON-CROP LAND Other(Specify): _____

Weather Condition: Clear and cold

Surface Owner: FEE Other(Specify): Anschutz Equus Farms

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):

A check valve, subsequently found to be cross threaded, leaked overnight and released approximately 3.5 bbls of oil to nearby surface soils. A roustabout crew was mobilized to remove impacted surface soils and snow.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS				
Date	Agency/Party	Contact	Phone	Response
11/28/2015	Weld Co OEM	Gracie Marquez	-	via e-mail
11/23/2015	Landowner	On file	-	via phone

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 11/26/2015

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	3	0	<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? NO Was an Emergency Pit constructed? NO

Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.

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) ☒ Soil ☐ Groundwater ☐ Surface Water ☐ Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): 70 Width of Impact (feet): 40

Depth of Impact (feet BGS): 0 Depth of Impact (inches BGS): 4

How was extent determined?

Visual observation of initial area of spray, and excavation during cleanup activities.

Soil/Geology Description:

Local native soils are Valent sands, however area of impact was on the pad which is gravel and roadbase.

Depth to Groundwater (feet BGS) 40 Number Water Wells within 1/2 mile radius: 3

If less than 1 mile, distance in feet to nearest

Water Well	1790	None <input type="checkbox"/>	Surface Water	3696	None <input type="checkbox"/>
Wetlands	3696	None <input 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:

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: Rusty Frishmuth

Title: Env Mgr Date: 11/26/2015 Email: rfrishmuth@hotmail.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

400943824	TOPOGRAPHIC MAP
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)