

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:

400972719

Date Received:

01/18/2016

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: <u>PROSPECT ENERGY LLC</u>	Operator No: <u>10312</u>	Phone Numbers
Address: <u>500 DALLAS STREET SUITE 1800</u>		Phone: <u>(307) 382-6738</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77002</u>		Mobile: <u>(307) 389-8755</u>
Contact Person: <u>Dene Martin</u>		Email: <u>dmartin@memorialrd.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400972719

Initial Report Date: 01/18/2016 Date of Discovery: 01/17/2016 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENW SEC 30 TWP 8N RNG 68W MERIDIAN 6

Latitude: 40.637692 Longitude: -105.053397

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

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No 333086
 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 Estimated Condensate Spill Volume(bbl): 0

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: _____

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____

Weather Condition: 21 degrees, cloudy, wind WNW 3 mph

Surface Owner: FEE Other(Specify): Operator owned

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 leak of produced water was identified at the Fort Collins production water gun barrel tank. Leak was near the bottom of the tank at a 3" welded tank nipple. After the source of the leak was found, it was clamped shut. The earthen tank berm contained all but approximately 5 bbls of the release. A vacuum truck recovered 120 bbls of the 125 bbls of production water. All production water was contained on location.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
1/18/2016	City of Ft Collins	Dan Weinheimer	970-416-2253	Left voice mail
1/18/2016	COGCC	Rick Allison	970-461-2970	Left voice mail

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:

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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 C Griggs

Title: Reg/Environmental Manager Date: 01/18/2016 Email: mary.griggs@memorialrd.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

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Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)