

State of Colorado Oil and Gas Conservation Commission

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Document Number:

400994400

Date Received:

02/26/2016

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

444586

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: PROSPECT ENERGY LLC Operator No: 10312 Address: 500 DALLAS STREET SUITE 1800 City: HOUSTON State: TX Zip: 77002 Contact Person: Sydney Smith Phone Numbers: Phone: (720) 359-1598 Mobile: (303) 910-4511 Email: ssmith@progressivepc.s.net

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 NWNW 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 333083 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**

Date	Agency/Party	Contact	Phone	Response
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

**SPILL/RELEASE DETAIL REPORTS**

#1 Supplemental Report Date: 02/26/2016

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	<u>0</u>	<u>0</u>	<input type="checkbox"/>
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>
PRODUCED WATER	<u>125</u>	<u>120</u>	<input type="checkbox"/>
DRILLING FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
FLOW BACK FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
OTHER E&P WASTE	<u>0</u>	<u>0</u>	<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): 40 Width of Impact (feet): 20

Depth of Impact (feet BGS): 1 Depth of Impact (inches BGS): 12

How was extent determined?

The extent of the spill was determined by visual inspection and the amount of fluids that was contained and recovered within the berm.

Soil/Geology Description:

The location of the spill is used for a Tank Battery and the surface soil is road base and fill. The sub-soil is clay, approximately 6 feet beneath the surface.

Depth to Groundwater (feet BGS) 20 Number Water Wells within 1/2 mile radius: 19

If less than 1 mile, distance in feet to nearest

Water Well	<u>320</u>	None <input type="checkbox"/>	Surface Water	<u>964</u>	None <input type="checkbox"/>
Wetlands	<u>392</u>	None <input type="checkbox"/>	Springs		None <input checked="" type="checkbox"/>
Livestock		None <input checked="" type="checkbox"/>	Occupied Building	<u>420</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

## CORRECTIVE ACTIONS

#1	Supplemental Report Date:	02/26/2106
Cause of Spill (Check all that apply)		
<input 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)		
The 3in nipple attached to the tank became corroded as it was in direct contact with the acid that was being used to treat the tank at the time resulting in the nipple to fail and the leak to occur.		
Describe measures taken to prevent the problem(s) from reoccurring:		
Since the leak occurred a 3ft stinger has been placed in the tank so the acid no longer comes in contact with the nipple. The berm will be relined with bentonite.		
Volume of Soil Excavated (cubic yards): _____		
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): _____		
Volume of Impacted Surface Water Removed (bbls): _____		

### 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: Sydney Smith

Title: Regulatory Analyst Date: 02/26/2016 Email: ssmith@progressivepcs.net

<u>COA Type</u>	<u>Description</u>

### Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400996599	ANALYTICAL RESULTS
400996611	TOPOGRAPHIC MAP
400996628	SITE MAP

Total Attach: 3 Files

### General Comments

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

Total: 0 comment(s)