

**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:

401063799

Date Received:

06/16/2016

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

446143

## 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>TEP ROCKY MOUNTAIN LLC</u>	Operator No: <u>96850</u>	<b>Phone Numbers</b>
Address: <u>PO BOX 370</u>		Phone: <u>(970) 263-2760</u>
City: <u>PARACHUTE</u>	State: <u>CO</u>	Mobile: <u>(970) 623-4875</u>
Zip: <u>81635</u>		Email: <u>michael.gardner@wpixenergy.com</u>
Contact Person: <u>Michael Gardner</u>		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401061550

Initial Report Date: 06/11/2016      Date of Discovery: 06/10/2016      Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESE SEC 23 TWP 1S RNG 98W MERIDIAN 6Latitude: 39.943532 Longitude: -108.353996Municipality (if within municipal boundaries): \_\_\_\_\_ County: RIO BLANCO

#### Reference Location:

Facility Type: PIPELINE☐ Facility/Location ID No \_\_\_\_\_☐ No Existing Facility or Location ID No.☒ Well API No. (Only if the reference facility is well) 05-103-11979

#### **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): 0Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): >=5 and <100Estimated 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: hot, sunny, no windSurface Owner: FEDERAL

Other(Specify): \_\_\_\_\_

#### **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 spill was caused by equipment failure. During fracing operation on the RGU 33-23-198 well, a union on an above ground frac line washed out and approximately 7 bbls of produced water sprayed off location on the pipeline right of way located southeast of the pad. The impacted area was mapped and screened for hydrocarbons. Initial screening indicated that the hydrocarbon impacts are below the COGCC cleanup standards. Two confirmation samples were collected and will be sent to a lab on Monday, June 13, 2016.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
6/11/2016	COGCC	Stan Spencer	970-625-2497	Initial Form 19
6/11/2016	Rio Blanco County	Lannie Massey	970-878-9586	Email
6/11/2016	BLM	James Roberts	970-878-3873	Voicemail
6/11/2016	Fire Department	Marshall Cook	-	Email

**SPILL/RELEASE DETAIL REPORTS**

#1	Supplemental Report Date: 06/16/2016		
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	7	7	<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>NO</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, including walls &amp; floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
<b>A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit</b>			
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): 192		Width of Impact (feet): 38	
Depth of Impact (feet BGS): 0		Depth of Impact (inches BGS): _____	
How was extent determined?			
GPS and field observation			
Soil/Geology Description:			
73—Rentsac channery loam, 5 to 50 percent slopes			
Depth to Groundwater (feet BGS) 100		Number Water Wells within 1/2 mile radius: 9	
If less than 1 mile, distance in feet to nearest		Water Well 383	None <input type="checkbox"/>
		Wetlands 363	None <input type="checkbox"/>
		Livestock _____	None <input checked="" type="checkbox"/>
		Surface Water 363	None <input type="checkbox"/>
		Springs _____	None <input checked="" type="checkbox"/>
		Occupied Building 3364	None <input type="checkbox"/>
Additional Spill Details Not Provided Above:			

The impacted area was mapped and screened for hydrocarbons. Initial screening indicated that the hydrocarbon impacts are below the COGCC cleanup standards. Two confirmation samples were collected. Future remediation will be determined based upon sampling results.

## CORRECTIVE ACTIONS

#1	Supplemental Report Date:	06/16/2016		
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)				
<div>The spill was caused by equipment failure. During fracing operation on the RGU 33-23-198 well, a union on an above ground frac line washed out and approximately 7 bbls of produced water sprayed off location on the pipeline right of way located southeast of the pad. O-ring on the swivel failed and caused leak.</div>				
Describe measures taken to prevent the problem(s) from reoccurring:				
<div>Corrective actions include inspecting equipment and lines for wear and deterioration.</div>				
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:

I hereby certify all statements made in this form are to the best of my knowledge true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: Michael Gardner

Title: EHS Date: 06/16/2016 Email: michael.gardner@wpenergy.com

## COA Type

## Description

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## Attachment Check List

### Att Doc Num

### Name

401063799	FORM 19 SUBMITTED
401063839	AERIAL PHOTOGRAPH

Total Attach: 2 Files

## General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Agency	Assess nature and extent of contamination with confirmation soil samples. Remediate to Table 910-1 standards and provide documentation in a either another Supplemental F-19 if cleaned up immediately or F-27 if extended remediation is required. Also include any information that operator has available concerning pipeline failure analysis, integrity/pressure testing, and any data concerning the root causes of the spill. Provide all pipeline integrity data to the COGCC Pipeline Supervisor, Mark Schlagenhauf, at (303) 894-2100 x5177 or mark.schlagenhauf@state.co.us	6/16/2016 2:25:40 PM

Total: 1 comment(s)