

State of Colorado  
Oil and Gas Conservation Commission

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Document Number:

401096233

Date Received:

08/19/2016

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

447272

### 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>GREAT WESTERN OPERATING COMPANY LLC</u> | Operator No: <u>10110</u> | <b>Phone Numbers</b><br>Phone: <u>(303) 398-0302</u><br>Mobile: <u>(303) 549-7739</u><br>Email: <u>sdonato@gwogco.com</u> |
| Address: <u>1801 BROADWAY #500</u>                           |                           |                                                                                                                           |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>       |                           |                                                                                                                           |
| Contact Person: <u>Scot Donato</u>                           |                           |                                                                                                                           |

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401093009

Initial Report Date: 08/12/2016 Date of Discovery: 08/10/2016 Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NESW SEC 20 TWP 4N RNG 67W MERIDIAN 6

Latitude: 40.298140 Longitude: -104.914920

Municipality (if within municipal boundaries): \_\_\_\_\_ County: WELD

#### Reference Location:

Facility Type: WELL  Facility/Location ID No \_\_\_\_\_  
 No Existing Facility or Location ID No.  
 Well API No. (Only if the reference facility is well) 05-123-32968

#### 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): <u>0</u>                    | Estimated Condensate Spill Volume(bbl): <u>0</u>     |
| Estimated Flow Back Fluid Spill Volume(bbl): <u>0</u>        | Estimated Produced Water Spill Volume(bbl): <u>0</u> |
| Estimated Other E&P Waste Spill Volume(bbl): <u>&gt;=100</u> | Estimated Drilling Fluid Spill Volume(bbl): <u>0</u> |

Specify: frac water

#### Land Use:

Current Land Use: OTHER Other(Specify): production pad  
Weather Condition: clear  
Surface Owner: FEE 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):

Fracing operations at another nearby well communicated with the Binder well. A slug of sand washed out a pipe nipple creating a small hole. Frac water was released on the binder pad, but didn't leave the pad. There were no visible hydrocarbons.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

| Date      | Agency/Party  | Contact    | Phone        | Response |
|-----------|---------------|------------|--------------|----------|
| 8/10/2016 | COGCC         |            | -            |          |
| 8/10/2016 | Weld County   |            | -            |          |
| 8/10/2016 | Surface Owner | Tom Binder | 970-587-2360 |          |

**SPILL/RELEASE DETAIL REPORTS**

#1 Supplemental Report Date: 08/19/2016

| FLUIDS          | BBL's SPILLED | BBL's RECOVERED | Unknown                  |
|-----------------|---------------|-----------------|--------------------------|
| OIL             | 0             | 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 | 300           | 300             | <input type="checkbox"/> |

specify: frac water

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): 50 Width of Impact (feet): 50

Depth of Impact (feet BGS): \_\_\_\_\_ Depth of Impact (inches BGS): \_\_\_\_\_

How was extent determined?

Visual determination

Soil/Geology Description:

Kim Loam, 5 to 9 percent slopes

Depth to Groundwater (feet BGS) 50 Number Water Wells within 1/2 mile radius: 6

If less than 1 mile, distance in feet to nearest

|            |             |                                          |                   |            |                                          |
|------------|-------------|------------------------------------------|-------------------|------------|------------------------------------------|
| Water Well | <u>2025</u> | None <input type="checkbox"/>            | Surface Water     | <u>325</u> | None <input type="checkbox"/>            |
| Wetlands   | <u>325</u>  | None <input type="checkbox"/>            | Springs           | _____      | None <input checked="" type="checkbox"/> |
| Livestock  | _____       | None <input checked="" type="checkbox"/> | Occupied Building | <u>780</u> | None <input type="checkbox"/>            |

Additional Spill Details Not Provided Above:

Frac water was released on the Binder pad, but didn't leave the pad. There were no visible hydrocarbons. Further documentation of soil sampling will be provided. No soil has been excavated pending soil sample results.

### CORRECTIVE ACTIONS

#1 Supplemental Report Date: 08/19/2016

Cause of Spill (Check all that apply)  Human Error  Equipment Failure  Historical-Unknown  
 Other (specify) \_\_\_\_\_

Describe Incident & Root Cause (include specific equipment and point of failure)

Fracing operations at another nearby well communicated with the Binder well. A slug of sand washed out a pipe nipple creating a small hole.

Describe measures taken to prevent the problem(s) from reoccurring:

Changes to Standard Operating Procedures during frac operations. GWOC will make sure there are no bumper springs and no plungers left at the well that can get stuck and keep master valve from closing. They will also bypass production iron and use flowback iron.

Volume of Soil Excavated (cubic yards): 0

Disposition of Excavated Soil (attach documentation)  Offsite Disposal  Onsite Treatment  
 Other (specify) \_\_\_\_\_

Volume of Impacted Ground Water Removed (bbls): 0

Volume of Impacted Surface Water Removed (bbls): 0

### 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: Rachel Peterson  
Title: Senior Project Manager Date: 08/19/2016 Email: petersonr@agwco.com

| <u>COA Type</u> | <u>Description</u> |
|-----------------|--------------------|
|                 |                    |

### Attachment Check List

| <u>Att Doc Num</u> | <u>Name</u> |
|--------------------|-------------|
|                    |             |

Total Attach: 0 Files

### General Comments

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

Total: 0 comment(s)