

**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:

401112061

Date Received:

09/19/2016

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

447806

## SPILL/RELEASE REPORT (INITIAL)

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>PDC ENERGY INC</u>	Operator No: <u>69175</u>	<b>Phone Numbers</b>
Address: <u>1775 SHERMAN STREET - STE 3000</u>		Phone: <u>(970) 5069273</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(970) 3739267</u>
Zip: <u>80203</u>		Email: <u>Jason.thron@pdce.co</u>
Contact Person: <u>Jason Thron</u>		<u>m</u>

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401112061

Initial Report Date: 09/19/2016      Date of Discovery: 09/16/2016      Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESE SEC 20 TWP 6N RNG 63W MERIDIAN 6Latitude: 40.470180 Longitude: -104.451300Municipality (if within municipal boundaries): \_\_\_\_\_ County: WELD

#### Reference Location:

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

*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: CROP LAND

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

Weather Condition: Clear and sunnySurface Owner: OTHER (SPECIFY)Other(Specify): Steve Wells/Cook Farm

#### 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 fiberglass produced water vault was raised by a heavy localized rain event which led to a crack in the fiberglass tank and a produced water release inside secondary containment. The valve to the fiberglass vault was closed immediately upon discovery and cleanup efforts were initiated.

List Agencies and Other Parties Notified:

### OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
9/16/2016	COGCC	Rick Allison	-	email response

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: Jason Thron

Title: EHS Supervisor Date: 09/19/2016 Email: Jason.thron@pdce.com

### COA Type

### Description

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### Attachment Check List

### Att Doc Num

### Name

401112061	FORM 19 SUBMITTED
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Total Attach: 1 Files

### General Comments

### User Group

### Comment

### Comment Date

Environmental	Revised Lat/Long and changed related facility from well APi to "No related facility" - release occurred at a tank battery with no COGIS location ID.	9/19/2016 1:58:52 PM
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Total: 1 comment(s)