

# 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:

401142675

Date Received:

11/03/2016

Spill report taken by:

Spill/Release Point ID:

## 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: MARALEX RESOURCES, INC	Operator No: 53255	<b>Phone Numbers</b>
Address: P O BOX 338		Phone: (970) 563-4000
City: IGNACIO State: CO Zip: 81137		Mobile: (970) 563-4116
Contact Person: Kerry Tahmahkera		Email: maralextech@gmail.com

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401142675

Initial Report Date: 11/03/2016 Date of Discovery: 11/02/2016 Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENE SEC 24 TWP 6S RNG 102W MERIDIAN 6

Latitude: 39.532743 Longitude: -108.707175

Municipality (if within municipal boundaries): County: GARFIELD

#### 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) 05-045-06050

#### 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? No

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): 0 Estimated Condensate Spill Volume(bbl): >0 and <1

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): >=1 and <5

Estimated Other E&P Waste Spill Volume(bbl): Unknown Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: up to 3bbls of volume, 2" soil saturation 6-8ft in diameter around wellhead

#### Land Use:

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

Weather Condition: Sunny/Clear

Surface Owner: FEE Other(Specify): High Lonesome Ranch

#### 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 initial discovery was made by BLM representative Greg Rios. He called after 3pm on 11/2/2016 to inform the Maralex Operations Manager, who promptly contacted the land owner (High Lonesome Ranch) and/or their representatives. Access to their property is very restricted, but they did grant a one day access despite their upcoming hunting season which begins on the 5th. Following an assessment and measurement of the impact, Greg Rios re-visited the site and will confirm that the leak has been stopped and is contained to the area around the wellhead with a soil saturation depth of 2". A follow-up to the BLM will be sent, although the incident is below the BLM reportable quantity.

List Agencies and Other Parties Notified:

### OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
11/2/2016	High Lonesome Ranch	Ranch Manager	970-283-9420	Personal Info Proprietary- Front desk call as well LVM with Ranch Manager

OPERATOR COMMENTS:

Please Route to Carlos LUJAN

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

Signed: \_\_\_\_\_ Print Name: Kerry Tahmahkera

Title: Production Technician Date: 11/03/2016 Email: maralextech@gmail.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

		Stamp Upon Approval
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Total: 0 comment(s)