

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:

401185919

Date Received:

01/17/2017

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

438422

SPILL/RELEASE REPORT (SUPPLEMENTAL)

This form is to be submitted by the party responsible for the oil and gas spill or release. Refer to COGCC Rule 906.b. for reporting requirements of spills or releases of E&P Waste or produced fluids. Submit a Site Investigation and Remediation Workplan (Form 27) when requested by the Director.

OPERATOR INFORMATION

Name of Operator: TEP ROCKY MOUNTAIN LLC	Operator No: 96850	<b>Phone Numbers</b>
Address: PO BOX 370		Phone: (970) 263-2760
City: PARACHUTE	State: CO Zip: 81635	Mobile: ( )
Contact Person: Michael Gardner		Email: MGardner@terraep.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400655574

Initial Report Date: 08/02/2014 Date of Discovery: 08/02/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWSW SEC 35 TWP 6S RNG 94W MERIDIAN 6

Latitude: 39.475862 Longitude: -107.863391

Municipality (if within municipal boundaries): County: GARFIELD

Reference Location:

Facility Type: WELL PAD  Facility/Location ID No 334873  
 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? No

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): >=1 and <5

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: warm, dry, sunny

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):

A buried produced water pipeline failed resulting in a produced water spill. The discovery of the spill occurred when approximately 2/3 of a barrel of produced water migrated to the surface. None of the fluids have left the pad. The impacted area will be excavated and confirmation samples, for the spill remediation, will be collected at that time.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
8/2/2014	COGCC	Stan Spencer	970-625-2497	Initial Form 19
8/2/2014	County	Kirby Wynn	970-625-5905	Email
8/2/2014	Fire Department	Chad Harris	970-625-1243	Email
8/2/2014	Fire Department	Orin Moon	970-625-1242	Email
8/2/2014	Surface Owner		-	Phone call

**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:**

Please forward onto Stan Spencer for review

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: TEP Environmental Date: 01/17/2017 Email: MGardner@terraep.com

<b>COA Type</b>	<b>Description</b>

**Attachment Check List**

<b>Att Doc Num</b>	<b>Name</b>
401185962	ANALYTICAL RESULTS

Total Attach: 1 Files

**General Comments**

<b>User Group</b>	<b>Comment</b>	<b>Comment Date</b>
		Stamp Upon Approval

Total: 0 comment(s)