

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:

401230823

Date Received:

03/10/2017

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. 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: <u>VANGUARD OPERATING LLC</u>	Operator No: <u>10531</u>	Phone Numbers
Address: <u>5847 SAN FELIPE #3000</u>		Phone: <u>(970) 876-1959</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77057</u>		Mobile: <u>()</u>
Contact Person: <u>Scott Ghan</u>		Email: <u>sghan@vnrllc.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401230823

Initial Report Date: 03/10/2017 Date of Discovery: 03/09/2017 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENE SEC 36 TWP 6S RNG 92W MERIDIAN 6

Latitude: 39.488790 Longitude: -107.610570

Municipality (if within municipal boundaries): _____ County: GARFIELD

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No 159159

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? Yes

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): Unknown

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: Sunny 55 degrees

Surface Owner: FEE Other(Specify): Clark Scott

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 release occurred at a weld , near a loadout valve, on a produced water tank located inside a lined secondary containment. There was stormwater present both inside and outside the secondary containment at the time of the release. It is suspected that the synthetic liner along the perimeter of the containment may be compromised in two isolated locations, but this was difficult to determine due to the presence of stormwater outside the containment. The suspected spill path will be sampled to verify. The release was not observed by the SWD operator during his 0600 tank inspections, but was later identified by our lease operator at 1130. Based on these observations, it appears the release was short in duration at a minimal flowrate. The tank was isolated and emptied and all the water was removed from inside the secondary containment via vacuum truck. All pooling water along the suspected spill path was also recovered during the response activities.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
3/9/2017	COGCC	Carlos Lujan	-	approved of response activities
3/9/2017	GarCo	Kirby Wynn	-	notified via email
3/9/2017	landowner	Clark Scott	970-618-3828	approved of response activities

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: Scott Ghan
Title: Senior EHS Specialist Date: 03/10/2017 Email: sghan@vnrlc.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)