

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:

401280590

Date Received:

05/12/2017

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.

Spill report taken by:  
GINTAUTAS, PETER

Spill/Release Point ID:  
450249

OPERATOR INFORMATION

Name of Operator: <u>CRESTONE PEAK RESOURCES OPERATING LLC</u>	Operator No: <u>10633</u>	<b>Phone Numbers</b>
Address: <u>1801 CALIFORNIA STREET #2500</u>		Phone: <u>(720) 410-8478</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>		Mobile: <u>(720) 410-8478</u>
Contact Person: <u>Ryan Bruner</u>		Email: <u>ryan.bruner@crestonepr.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401276029

Initial Report Date: 05/05/2017 Date of Discovery: 05/04/2017 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENW SEC 26 TWP 2N RNG 66W MERIDIAN 6

Latitude: 40.114902 Longitude: -104.746590

Municipality (if within municipal boundaries): Weld County: WELD

Reference Location:

Facility Type: WELL  Facility/Location ID No 331933  
 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? 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 and <1 Estimated Produced Water Spill Volume(bbl): >0 and <1

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

Specify: \_\_\_\_\_

Land Use:

Current Land Use: OTHER Other(Specify): Pasture

Weather Condition: 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):

Flowline failure

List Agencies and Other Parties Notified:

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
5/4/2017	Weld County	Troy Swain	970-3564016	none

**SPILL/RELEASE DETAIL REPORTS**

#1 Supplemental Report Date: 05/11/2017

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	_____	_____	<input checked="" type="checkbox"/>
CONDENSATE	_____	_____	<input checked="" type="checkbox"/>
PRODUCED WATER	_____	_____	<input checked="" type="checkbox"/>
DRILLING FLUID	0	0	<input type="checkbox"/>
FLOW BACK FLUID	0	0	<input type="checkbox"/>
OTHER E&P WASTE	0	0	<input type="checkbox"/>

specify: \_\_\_\_\_

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): 33 Width of Impact (feet): 20

Depth of Impact (feet BGS): 6 Depth of Impact (inches BGS): \_\_\_\_\_

How was extent determined?

Excavation activities commenced and hydrocarbon impacted soil was encountered. Groundwater was not encountered in the excavation. Due to weather conditions, the site has not been fully delineated. Excavation activities will resume once field conditions improve. Confirmation soil samples will be collected from the a base and sidewalls of the final extent of the excavation and submitted for laboratory analysis of benzene, toluene, ethylbenzene, and total xylenes (BTEX) and total petroleum hydrocarbons (TPH) - gasoline range organics (GRO) by USEPA Method 8260, TPH - diesel range organics (DRO) by USEPA Method 8015. Final excavation reports and laboratory analytical results will be provided upon completion of the excavation.

Soil/Geology Description:

Olney loamy sand

Depth to Groundwater (feet BGS) 463 Number Water Wells within 1/2 mile radius: 11

If less than 1 mile, distance in feet to nearest

Water Well	<u>855</u>	None <input type="checkbox"/>	Surface Water	_____	None <input checked="" type="checkbox"/>
Wetlands	_____	None <input checked="" type="checkbox"/>	Springs	_____	None <input checked="" type="checkbox"/>
Livestock	<u>100</u>	None <input type="checkbox"/>	Occupied Building	<u>640</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

## CORRECTIVE ACTIONS

#1	Supplemental Report Date:	05/11/2017
Cause of Spill (Check all that apply) <input type="checkbox"/> Human Error <input type="checkbox"/> Equipment Failure <input checked="" type="checkbox"/> Historical-Unknown		
<input type="checkbox"/> Other (specify) _____		
Describe Incident & Root Cause (include specific equipment and point of failure)		
A leak was discovered in the flowline from the Rodman Bruntz 26H-C266 well pad location. The line was excavated, the corroded section removed, and repaired. Line corrosion appears to be the cause of the release.		
Describe measures taken to prevent the problem(s) from reoccurring:		
The corroded section of flowline has been removed. A new section of line will be installed and pressure tested prior to be placed into service.		
Volume of Soil Excavated (cubic yards): _____		
Disposition of Excavated Soil (attach documentation) <input checked="" type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment		
<input type="checkbox"/> 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: Ryan Bruner  
Title: Regulatory Analyst Date: 05/12/2017 Email: ryan.bruner@crestonepr.com

## COA Type

## Description

	Provide documentation justifying closure request within 90 days of release via supplemental form 19. If investigation and remediation require further actions beyond 90 days then submit form 27 for approval within 90 days of spill (2August2017).
--	--

## Attachment Check List

Att Doc Num	Name
401280590	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401295852	FORM 19 SUBMITTED

Total Attach: 2 Files

## General Comments

**User Group**

**Comment**

**Comment Date**

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

Total: 0 comment(s)