

# 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:

401315299

Date Received:

06/23/2017

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: GREAT WESTERN OPERATING COMPANY LLC

Operator No: 10110

Address: 1801 BROADWAY #500

City: DENVER

State: CO

Zip: 80202

Contact Person: Scot Donato

#### Phone Numbers

Phone: (303) 398-0537

Mobile: ( )

Email: sdonato@gwogco.com

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401315299

Initial Report Date: 06/21/2017

Date of Discovery: 06/21/2017

Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESE SEC 34 TWP 1N RNG 67W MERIDIAN 6

Latitude: 40.004141 Longitude: -104.869291

Municipality (if within municipal boundaries): County: WELD

#### Reference Location:

Facility Type: TANK BATTERY

☒ Facility/Location ID No 440806☐ 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): &gt;=5 and &lt;100

Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): 0

Estimated Other E&amp;P Waste Spill Volume(bbl): 0

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: 25 bbls oil inside lined containment, no contact with ground; 25 bbls recovered

#### Land Use:

Current Land Use: CROP LAND

Other(Specify):

Weather Condition: Warm and clear

Surface Owner: FEE

Other(Specify): C. Marcus

#### 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):

Automated dump valve on bottom of LACT unit bullet tank stuck open and dumped all the fluid to the water pit causing pit to overflow approximately 25 bbls of oil inside the lined containment. No contact with the ground. Vac trucks were utilized to recover 25 bbls oil. No further action requested.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

| <u>Date</u> | <u>Agency/Party</u> | <u>Contact</u> | <u>Phone</u> | <u>Response</u> |
|-------------|---------------------|----------------|--------------|-----------------|
| 6/21/2017   | Landowner           | C. Marcus      | 303-368-5415 | Verbal          |
| 6/21/2017   | Weld County         | Tom Parko      | 970-353-6100 | Email           |
| 6/21/2017   | Weld County         | Roy Rudisill   | 970-304-6540 | Email           |
| 6/21/2017   | Weld County         | Troy Swain     | 970-353-6100 | Email           |
| 6/21/2017   | Weld County         | Gracie marquez | 970-304-6540 | Email           |
| 6/21/2017   | Weld County         | Jay McDonald   | 970-304-3750 | Email           |

**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: Nikki Graber  
Title: Project Geologist Date: 06/23/2017 Email: ngrab@olssonassociates.com

**COA Type**

**Description**

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**Attachment Check List**

**Att Doc Num**

**Name**

|           |                   |
|-----------|-------------------|
| 401317453 | TOPOGRAPHIC MAP   |
| 401317454 | AERIAL PHOTOGRAPH |

Total Attach: 2 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

|  |  |                        |
|--|--|------------------------|
|  |  | Stamp Upon<br>Approval |
|--|--|------------------------|

Total: 0 comment(s)