

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:

401350937

Date Received:

07/24/2017

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

451490

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: 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): >=5 and <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&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

Date	Agency/Party	Contact	Phone	Response
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

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 07/24/2017		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	25	25	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	0	<input 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? <u>YES</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
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) <input type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): _____		Width of Impact (feet): _____	
Depth of Impact (feet BGS): _____		Depth of Impact (inches BGS): _____	
How was extent determined?			
Not applicable			
Soil/Geology Description:			
Nunn loam, 1 to 3 percent slopes			
Depth to Groundwater (feet BGS) 25		Number Water Wells within 1/2 mile radius: 8	
If less than 1 mile, distance in feet to nearest Water Well 590		None <input type="checkbox"/>	Surface Water 1694
Wetlands _____		None <input checked="" type="checkbox"/>	Springs _____
			None <input checked="" type="checkbox"/>

Livestock _____ None ☒Occupied Building 580 None ☐

Additional Spill Details Not Provided Above:

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:

Closure requested on initial electronic Form 19 submitted on 6/23/17.

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

Signed: _____ Print Name: Jason DavidsonTitle: Senior Geologist Date: 07/24/2017 Email: jdavidson@olssonassociates.com**COA Type****Description**

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Attachment Check List**Att Doc Num****Name**

401350937	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401379826	FORM 19 SUBMITTED

Total Attach: 2 Files

General Comments**User Group****Comment****Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)