

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:

401407326

Date Received:

09/20/2017

Spill report taken by:

Kosola, Jason

Spill/Release Point ID:

451663

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: <u>NIGHTHAWK PRODUCTION LLC</u> | Operator No: <u>10399</u> | Phone Numbers |
| Address: <u>1805 SHEA CENTER DR #290</u> | | Phone: <u>(303) 407-9609</u> |
| City: <u>HIGHLANDS RANCH</u> State: <u>CO</u> Zip: <u>80129</u> | | Mobile: <u>(720) 364-6456</u> |
| Contact Person: <u>Joyce Henkin</u> | | Email: <u>joycehenkin@nighthawkenergy.com</u> |

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401369272

Initial Report Date: 08/08/2017 Date of Discovery: 08/08/2017 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESE SEC 15 TWP 6S RNG 54W MERIDIAN 6

Latitude: 39.522910 Longitude: -103.419150

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

Reference Location:

Facility Type: WELL Facility/Location ID No _____
 No Existing Facility or Location ID No.
 Well API No. (Only if the reference facility is well) 05-073-06561

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: OTHER Other(Specify): Dry land

Weather Condition: Overcast

Surface Owner: FEE Other(Specify): Rohrbaugh Interests LLP

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):

Appears that pressure gauge at the LPR (Linear Pressure Reducer) failed. Discharge side of the LPR. Spilled fluid was production water with polymer. This well is an injection well. It does not have containment. The wellhead etc is within a building on location but appears that the water did leak out onto location. The spill occurred yesterday morning. No Waters of the State were impacted. Location was wet but no real puddling of the water.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

| Date | Agency/Party | Contact | Phone | Response |
|----------|----------------|---------------|--------------|---------------------------|
| 8/8/2017 | COGCC | Jason Kosola | 719-574-8602 | Left message - Sent email |
| 8/8/2017 | COGCC | Susan Sherman | 719-775-1111 | Verbal |
| 8/8/2017 | Lincoln County | Trey James | - | Emailed |

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 09/19/2017

Cause of Spill (Check all that apply) Human Error Equipment Failure Historical-Unknown
 Other (specify) _____

Describe Incident & Root Cause (include specific equipment and point of failure)

As indicated on Doc # 401377192

Describe measures taken to prevent the problem(s) from reoccurring:

Attached please find the 3 soil analyses that were taken on location. Results show that we are high on the EC & SAR.
EC SS01 43.1 SS02 10.6 SS03 17.7 <4 limit SAR SS01 22.9 SS02 4.50 SS03 6.89 <12 limit

Volume of Soil Excavated (cubic yards): 22

Disposition of Excavated Soil (attach documentation) Offsite Disposal Onsite Treatment
 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:

Soil analysis results submitted. Please advise. Attached possible remediation process brochure if necessary.

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

Signed: _____ Print Name: Joyce Henkin

Title: Production Tech Date: 09/20/2017 Email: joycehenkin@nighthawkenegy.com

COA Type

Description

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|--|--|
| | |
|--|--|

Attachment Check List

Att Doc Num

Name

| | |
|-----------|--------------------|
| 401407372 | DISPOSAL MANIFEST |
| 401407375 | ANALYTICAL RESULTS |
| 401407378 | OTHER |
| 401407626 | ANALYTICAL RESULTS |

Total Attach: 4 Files

General Comments

User Group

Comment

Comment Date

| | | |
|--|--|---------------------|
| | | Stamp Upon Approval |
|--|--|---------------------|

Total: 0 comment(s)