

State of Colorado
Oil and Gas Conservation Commission

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 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

401484138

Date Received:

12/13/2017

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

453141

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>SRC ENERGY INC</u>	Operator No: <u>10311</u>	Phone Numbers
Address: <u>1675 BROADWAY SUITE 2600</u>		Phone: <u>(970) 4755220</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Brad Rogers</u>		Mobile: <u>(303) 2291228</u>
		Email: <u>brogers@srcenergy.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401467669

Initial Report Date: 11/26/2017 Date of Discovery: 11/25/2017 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SENE SEC 32 TWP 1N RNG 66W MERIDIAN 6

Latitude: 40.011110 Longitude: -104.792750

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

Reference Location:

Facility Type: WELL PAD ☒ Facility/Location ID No 433548
☐ 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? No

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): >=1 and <5

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: _____

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____

Weather Condition: Sunny, Clear

Surface Owner: FEE Other(Specify): Phelps

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):

An estimated 2 bbls of oil was released onto the well pad surface due to sump overflow. The sump that collects residual oil from the vapor recover tower overflowed due to valve from knockout tank being left open. Lease operator arrived on location and noticed release. Valve on knockout tank was shut-off stopping release. Roustabout crew was called out immediately to begin clean-up activity. This included using vac-truck to remove free oil from surface as well as excavating impacted soils for disposal.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
11/25/2017	COGCC	Chris Canefield	-	Email
11/25/2017	Weld County	Roy Rudisill	-	Email

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 11/30/2017		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	2	1	<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? 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): 175 Width of Impact (feet): 5

Depth of Impact (feet BGS): 18 Depth of Impact (inches BGS): _____

How was extent determined?

The extent of impact was determined by measuring surface impact and excavation activity to remove impacted soils.

Soil/Geology Description:

Wellpad construction. Sandy Clay.

Depth to Groundwater (feet BGS) 5 Number Water Wells within 1/2 mile radius: 22

If less than 1 mile, distance in feet to nearest	Water Well <u>820</u>	None <input type="checkbox"/>	Surface Water <u>560</u>	None <input type="checkbox"/>
	Wetlands <u>0</u>	None <input type="checkbox"/>	Springs <u>0</u>	None <input type="checkbox"/>
	Livestock <u>0</u>	None <input type="checkbox"/>	Occupied Building <u>1005</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

A total of 5 soil samples were collected from the impacted area. Sample SB05 showed TPH and Benzene above COGCC Table 910-1 levels. Additional excavation to remove impacted soils has been conducted. Additional sampling was conducted on 12/8/2017. Waiting on results.

CORRECTIVE ACTIONS

#1	Supplemental Report Date:	12/13/2017
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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)

The valve on the knockout pot for the vapor recovery towers was left in the open position. This caused the oil being collected in the knockout pot to flow continuously to the collection sump. The sump overflowed resulting in release oil onto surface.

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

Instruction was provided to facility operators to ensure that after draining knockout pots that valves must be placed in closed position.

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:

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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: Brad Rogers

Title: Environmental Supervisor Date: 12/13/2017 Email: brogers@srcenergy.com

COA Type

Description

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Attachment Check List

Att Doc Num	Name
401484138	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401484190	SITE MAP
401484194	ANALYTICAL RESULTS
401484196	ANALYTICAL RESULTS
401484197	DISPOSAL MANIFEST
401488293	FORM 19 SUBMITTED

Total Attach: 6 Files

General Comments

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

Total: 0 comment(s)