

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:

401520075

Date Received:

01/19/2018

Spill report taken by:

CHESSON, BOB

Spill/Release Point ID:

453703

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>BONANZA CREEK ENERGY OPERATING COMPANY LLC</u>	Operator No: <u>8960</u>	Phone Numbers
Address: <u>410 17TH STREET SUITE #1400</u>		Phone: <u>(720) 4406100</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Brian Dodek</u>		Mobile: <u>()</u>
		Email: <u>BDodek@Bonanzacrk.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401508896

Initial Report Date: 01/10/2018 Date of Discovery: 01/09/2018 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWSW SEC 6 TWP 3N RNG 62W MERIDIAN 6

Latitude: 40.248383 Longitude: -104.375135

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

Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 422923
☐ 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: _____

Land Use:

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

Weather Condition: Clear, 45 degrees

Surface Owner: STATE 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):

A Bonanza Creek heater treater had a sight glass freeze overnight and rupture releasing approximately 6.75 bbls of oil. The release was contained within an earthen berm and remediation is underway. The release was reported initially via email to the COGCC on 1/10/18.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
1/9/2018	Land Owner	State Land Board	-on file	notified of release
1/10/2018	COGCC	Bob Chesson	-on file	notified of release

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 01/19/2018		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	10	0	<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>NO</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 checked="" 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): <u>10</u>		Width of Impact (feet): <u>14</u>	
Depth of Impact (feet BGS): <u>9</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
The extent was determined via visual delineation and laboratory analysis			
Soil/Geology Description:			
Valent sand, 3-9% slopes			
Depth to Groundwater (feet BGS) <u>46</u>		Number Water Wells within 1/2 mile radius: <u>2</u>	
If less than 1 mile, distance in feet to nearest		Water Well <u>770</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 _____ None <input checked="" type="checkbox"/>	Occupied Building _____ None <input checked="" type="checkbox"/>
Additional Spill Details Not Provided Above:			

Excavation was conducted from the southern extent of the release toward the heater treater foundation. The excavation was conducted in small portions and backfilled to ensure the foundation and structural integrity of the heater treater was not affected by the remediation activities. Once excavation proximity began to approach the heater treater foundation the excavation began to cave in beneath the edge of the foundation. Bonanza stopped excavation and sloped the hole from that point back up to the foundation and collected a sample (SS08) from the sloped sidewall. This is shown on the attached Figure 2 as SS08 does not appear to be at the edge of the excavation. The confirmation soil samples indicate that remaining soil is compliant with COGCC Table 910-1 concentration levels. Bonanza will also ensure that the soil is inspected below the heater treater foundation, as part of future final reclamation activities. Bonanza Creek respectfully requests a No Further Action determination.

CORRECTIVE ACTIONS

#1	Supplemental Report Date:	01/19/2018		
Cause of Spill (Check all that apply)		<input type="checkbox"/> Human Error	<input type="checkbox"/> Equipment Failure	<input type="checkbox"/> Historical-Unknown
		<input checked="" type="checkbox"/> Other (specify) <u>Natural forces/Weather</u>		
Describe Incident & Root Cause (include specific equipment and point of failure)				
<div>A cold front moved in causing the heater treater sightglass to freeze and rupture.</div>				
Describe measures taken to prevent the problem(s) from reoccurring:				
<div>BCEI pumpers were coached on draining and closing all sight glasses when equipment is shut in or a cold front is in the forecast.</div>				
Volume of Soil Excavated (cubic yards):		<u>31</u>		
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):		<u>0</u>		
Volume of Impacted Surface Water Removed (bbls):		<u>0</u>		

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: Brian Dodek

Title: Environmental Manager Date: 01/19/2018 Email: BDodek@Bonanzacrk.com

COA Type

Description

--	--

Attachment Check List

Att Doc Num

Name

401520735	ANALYTICAL RESULTS
-----------	--------------------

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)