

State of Colorado Oil and Gas Conservation Commission

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Document Number:

401609685

Date Received:

04/16/2018

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

454027

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>GRYNBERG* JACK DBA GRYNBERG PETROLEUM CO</u>	Operator No: <u>36200</u>	Phone Numbers
Address: <u>3600 S. YOSEMITE ST - STE 900</u>		Phone: <u>(303) 850-7490</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(970) 834-3580</u>
Zip: <u>80237-1830</u>		Email: <u>r.edelen@grynberg.co</u>
Contact Person: <u>Randy Edelen</u>		<u>m</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401541084

Initial Report Date: 02/08/2018 Date of Discovery: 02/07/2018 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENW SEC 26 TWP 9N RNG 62W MERIDIAN 6

Latitude: 40.724920 Longitude: -104.289840

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

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) 05-123-21426

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): Unknown

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: 25 F, 10 m, wind E6

Surface Owner: FEE 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):

Discovered a vegetation kill while preparing for a MIT.

List Agencies and Other Parties Notified:

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:

All flowlines at the location were flushed and capped.
Stained soil was excavated and test results and map of the area are attached.

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

Signed: _____ Print Name: Randy Edelen

Title: Regulatory Manager Date: 04/16/2018 Email: r.edelen@grynberg.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

401609827	SITE MAP
401609939	ANALYTICAL RESULTS

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)