

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

401758405

Date Received:

09/10/2018

Spill report taken by:

Arauz, Steven

Spill/Release Point ID:

457248

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: CAERUS PICEANCE LLC	Operator No: 10456	Phone Numbers Phone: (970) 285-2739 Mobile: (970) 987-4650 Email: bmiddleton@caerusoila.ndgas.com
Address: 1001 17TH STREET #1600		
City: DENVER	State: CO Zip: 80202	
Contact Person: Brett Middleton		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401751942

Initial Report Date: 09/01/2018 Date of Discovery: 08/31/2018 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NESW SEC 29 TWP 5S RNG 96W MERIDIAN 6

Latitude: 39.583285 Longitude: -108.197370

Municipality (if within municipal boundaries): County: GARFIELD

Reference Location:

Facility Type: WELL PAD ☒ Facility/Location ID No 335943

Spill/Release Point Name: 29C Flowback Release ☐ No Existing Facility or Location ID No.

Number: ☐ 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? Yes

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): >=5 and <100

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

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):

Fluid was spilled during flowback activities. Spill was contained on location. A water truck was called in and fluids were recovered.

List Agencies and Other Parties Notified:

Was there a Grade 1 Gas Leak associated with this E & P waste spill or release? Yes ☐ No ☒

If YES, enter the Document Number of the Initial Grade 1 Gas Leak Report Form 44: _____

Was there a reportable accident associated with this E & P waste spill or release? Yes ☐ No ☒

If YES, enter the Document Number of the Initial Accident Report, Form 22: _____

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 09/10/2018

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	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	10	2	<input type="checkbox"/>
OTHER E&P WASTE	0	0	<input type="checkbox"/>

specify: _____

Was spill/release completely contained within berms or secondary containment? YES 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): 100 Width of Impact (feet): 50

Depth of Impact (feet BGS): 0 Depth of Impact (inches BGS): _____

How was extent determined?

visually, the pad surface is being sampled at the point of release to determine if remediation is necessary. all free fluids were recovered on the day of the release.

Soil/Geology Description:

Parachute Irigul-Rhone association 25 to 50 percent slopes

Depth to Groundwater (feet BGS) 34 Number Water Wells within 1/2 mile radius: 2

If less than 1 mile, distance in feet to nearest Water Well 884 None ☐ Surface Water 1327 None ☐

Wetlands None ☒ Springs None ☒

Livestock None ☒ Occupied Building None ☒

Additional Spill Details Not Provided Above:

Groundwater depth was based on closest permitted water well

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:

attn: Steven Aruaza

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

Signed: _____ Print Name: Brett Middleton

Title: Sr. EHS Specialist Date: 09/10/2018 Email: bmiddleton@caerusoilandgas.com

COA Type	Description
	Remediate impacted area to Table 910-1 standards, per Rule 906.
	Operator indicates that pad surface was being sampled "at the point of release to determine if remediation was necessary" and that extent of release was determined visually. Operator shall delineate and report the horizontal and vertical extent of impacts. If analytical results indicate Table 910-1 exceedances, operator shall provide confirmation soil sampling results to document compliance of in situ material with Table 910-1 standards as well as documentation of the final disposition of E&P waste resulting from this spill.
	Operator indicates that "all free fluids were recovered on the day of the release" but report also states that 10 bbls of flow back fluid were spilled with only 2 bbls recovered. Submit a Supplemental eForm 19 to clarify the amount of fluid recovered. This supplemental report shall include a diagram of the extent of the impacted area, location of containment berms, and soil sample locations.

Attachment Check List

Att Doc Num	Name
401758405	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401758463	AERIAL PHOTOGRAPH
401758464	TOPOGRAPHIC MAP
401763997	FORM 19 SUBMITTED

Total Attach: 4 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)