

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:

401773948

Date Received:

09/25/2018

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

451116

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: SRC ENERGY INC	Operator No: 10311	Phone Numbers
Address: 1675 BROADWAY SUITE 2600		Phone: (970) 4755220
City: DENVER State: CO Zip: 80202		Mobile: ()
Contact Person: Dave Castro		Email: dcastro@srcenergy.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401310873

Initial Report Date: 06/16/2017 Date of Discovery: 06/14/2017 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SENE SEC 23 TWP 6N RNG 66W MERIDIAN 6

Latitude: 40.475524 Longitude: -104.736213

Municipality (if within municipal boundaries): County: WELD

Reference Location:

Facility Type: PARTIALLY-BURIED VESSEL Facility/Location ID No 323547

Spill/Release Point Name: Eldridge No Existing Facility or Location ID No.

Number: 4-23 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): 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: CROP LAND Other(Specify):

Weather Condition: sunny

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):

During removal of existing concrete water vault at location, a historical release was discovered. Currently excavating impacted soils and determining extent. Soil samples and groundwater samples will be collected and analyzed for impacts.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
6/14/2017	COGCC	Rick Allison	970-6230850	Email / Left Voicemail
6/14/2017	Weld County	Troy Swain	-	
6/14/2017	Weld County	Roy Rudisill	-	

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: _____

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: 10672

OPERATOR COMMENTS:

This SF19 is to request closure of the spill because remediation work has been proceeding under remediation project number 10672. The previous SF19 for this spill, document 401317243, submitted by SRC on 6/24/17, mistakenly did not request for closure due to work proceeding under the Form 27 remediation process.

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

Signed: _____ Print Name: Dave Castro

Title: Sr. Env. Specialist Date: 09/25/2018 Email: dcastro@srcenergy.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

401773948	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401777775	FORM 19 SUBMITTED

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)