

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

401904706

Date Received:

01/15/2019

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

460527

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: KP KAUFFMAN COMPANY INC

Operator No: 46290

Address: 1675 BROADWAY, STE 2800

City: DENVER

State: CO

Zip: 80202

Contact Person: Susana Lara-Mesa

Phone Numbers

Phone: (303) 825-4822

Mobile: ()

Email: slaramesa@kpk.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401896600

Initial Report Date: 01/08/2019

Date of Discovery: 01/07/2019

Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWSW SEC 29 TWP 2N RNG 67W MERIDIAN 6

Latitude: 40.104043 Longitude: -104.921219

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

Reference Location:

Facility Type: FLOWLINE

☐ Facility/Location ID No

Spill/Release Point Name: CO. Nat Bank trust 2 flowline

☒ 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? No

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

Estimated Oil Spill Volume(bbl): >0 and <1

Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): >0 and <1

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, dry

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):

While cleaning a small non-reportable release caused by high line pressure in a flowline, KPK uncovered a historical release near the wellhead. Upon discovery of the recent release, the well was shut in, the flowline was flushed, and fluids were removed via vacuum truck. The historical contamination is currently being excavated and disposed of at a certified landfill.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
1/8/2019	Town of Frederic	Jennifer Simmons	-	Email
1/8/2019	Weld County	Jason Maxley	-	Email
1/8/2019	Surface Owner		-	

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: 01/10/2019		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL			<input checked="" type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER			<input checked="" 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): 20 Width of Impact (feet): 25

Depth of Impact (feet BGS): 11 Depth of Impact (inches BGS): _____

How was extent determined?

Initial visual observation with field screening. Samples were collected and analyzed to confirm clean boundaries had been reached

Soil/Geology Description:

Olney fine sandy loam, 3 to 5 percent slope

Depth to Groundwater (feet BGS) 15 Number Water Wells within 1/2 mile radius: 5

If less than 1 mile, distance in feet to nearest Water Well 1732 None ☐ Surface Water 3134 None ☐

Wetlands _____ None ☒Springs _____ None ☒Livestock _____ None ☒Occupied Building 470 None ☐

Additional Spill Details Not Provided Above:

CORRECTIVE ACTIONS#1 Supplemental Report Date: 01/10/2019Cause 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)

High pressure in the sales line resulted in higher line pressure in the flowline, which cause the like to leak.

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

KPK is working with the midstream purchaser to address high line pressure events and prevent future damage to existing infrastructure

Volume of Soil Excavated (cubic yards): 203Disposition of Excavated Soil (attach documentation) ☒ Offsite Disposal ☐ Onsite Treatment
☐ Other (specify) _____

Volume of Impacted Ground Water Removed (bbls): _____

Volume of Impacted Surface Water Removed (bbls): _____

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 27Form 27 Remediation Project No: 12070**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: Susana Lara-MesaTitle: VP Engineering Date: 01/15/2019 Email: slaramesa@kpk.com**COA Type****Description**

	Submit first supplemental form 27 report with respect to site investigationby 12February2019
	Based on review of the information submitted in project 12070, it appears that the proposed investigation activities and proposed remedial actions in the approved site investigation and remediation plan will be adequate to remediate impacted soils at the site of the spill. However, should future conditions at the site indicate contaminant concentrations in soils exceeding COGCC standards or if ground water is found to be significantly impacted, further investigation and/or remediation activities may be required at the site.

Attachment Check List

Att Doc Num**Name**

401904706	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401904710	SITE MAP
401904711	TOPOGRAPHIC MAP
401905189	FORM 19 SUBMITTED

Total Attach: 4 Files

General Comments

User Group**Comment****Comment Date**

Environmental	spill name in COGCC records should reflect that spill was at COLORADO NAT. BANK TRUSTEE #1 05-123-08676 site investigation project at that well is 12070 (and not 12072 as initially submitted) spill was not at the COLORADO NAT. BANK TRUSTEE #2 05-123-08814	01/15/2019
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Total: 1 comment(s)