

State of Colorado
Oil and Gas Conservation Commission

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 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

401919186

Date Received:

01/26/2019

Spill report taken by:

CHESSON, BOB

Spill/Release Point ID:

461248

SPILL/RELEASE REPORT (INITIAL /w 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: HIGHPOINT OPERATING CORPORATIONOperator No: 10071Address: 1099 18TH ST STE 2300City: DENVERState: COZip: 80202Contact Person: Rusty Frishmuth

Phone Numbers

Phone: (303) 2939100Mobile: ()Email: rfrishmuth@hpres.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401919186Initial Report Date: 01/26/2019Date of Discovery: 01/25/2019Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 33 TWP 4N RNG 62W MERIDIAN 6Latitude: 40.274328 Longitude: -104.336444Municipality (if within municipal boundaries): _____ County: WELD

Reference Location:

Facility Type: TANK BATTERY☒ Facility/Location ID No 437854Spill/Release Point Name: AEF 4-62-33 NWNW
LACT spill☐ 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): >=1 and <5Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): 0Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Land Use:

Current Land Use: OTHEROther(Specify): Oil and gas production facilityWeather Condition: clear/coldSurface 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):

LACT unit valve was left partially open, resulting in a 5bbl crude oil spill.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
1/26/2019	Weld County OEM	Gracie Marquez	-	via email
	Landowner	On file	-	via telephone

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: 01/26/2019

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	5	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? 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): 30

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

How was extent determined?

Field measurements, visual observation

Soil/Geology Description:

Compacted roadbase with underlying Osgood sand

Depth to Groundwater (feet BGS) 115 Number Water Wells within 1/2 mile radius: 0

If less than 1 mile, distance in feet to nearest Water Well _____ None ☒ Surface Water _____ None ☒

Wetlands _____ None ☒ Springs _____ None ☒

Occupied Building ☒ None ☐

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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.

 Work proceeding under an approved Form 27

Form 27 Remediation Project No:

Bob - We couldn't get eForms to allow us to upload our Figure 1 site location map. I've emailed it to you separately to see if you can attach it. Sorry!

Signed: _____ Print Name: Dustin Watt

Title: Sr. EHS Specialist Date: 01/26/2019 Email: dwatt@hpres.com

<u>COA Type</u>	<u>Description</u>

Att Doc Num	Name
401919186	SPILL/RELEASE REPORT(I/S)
401920496	FORM 19 SUBMITTED

Total Attach: 2 Files

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

Total: 0 comment(s)