

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:

401786951

Date Received:

10/08/2018

Spill report taken by:

Arauz, Steven

Spill/Release Point ID:

457869

SPILL/RELEASE REPORT (INITIAL)

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>LARAMIE ENERGY LLC</u>	Operator No: <u>10433</u>	Phone Numbers
Address: <u>1401 SEVENTEENTH STREET #1400</u>		Phone: <u>(970) 8125311</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(970) 2106889</u>
Zip: <u>80202</u>		Email: <u>lprescott@laramie-energy.com</u>
Contact Person: <u>Lorne C Prescott</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401786951

Initial Report Date: 10/08/2018 Date of Discovery: 09/21/2018 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 10 TWP 8s RNG 98W MERIDIAN 6Latitude: 39.379777 Longitude: -108.322205Municipality (if within municipal boundaries): _____ County: GARFIELD

Reference Location:

Facility Type: WELL PAD ☒ Facility/Location ID No 432260Spill/Release Point Name: 9-41 Legacy 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? No

*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): UnknownEstimated Condensate Spill Volume(bbl): UnknownEstimated Flow Back Fluid Spill Volume(bbl): UnknownEstimated Produced Water Spill Volume(bbl): UnknownEstimated Other E&P Waste Spill Volume(bbl): UnknownEstimated Drilling Fluid Spill Volume(bbl): UnknownSpecify: During delineation of spill 457569, material was uncovered 2" below surf

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): _____

Weather Condition: dry, 75 degSurface Owner: FEDERAL

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 the deliniation of spill 457569 2 inches of soil was removed at the eastern boundary of the spill. Laramie discovered a dark material in the soil. There was no sifnificant odor by staff was concerned about the constituent levels of the material since it appeared to be significantly different from the surrounding soils. Samples were collected and sent to a lab for analysis. The resultant analytical data indicates TPH DRO at 1690 mg/kg, Barium at 26,000 and SAR at 35.2. Laramie has communicated with the landowner (BLM, Jim Byers) on this discovery. Our intent would be to resolve/remediate spill 457569 (since the primary constituents of concern are SAR and EC) and address the legacy spill as a separate project.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
9/21/2018	BLM	Jim Byers	970-319-2532	acknowledged

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: _____

OPERATOR COMMENTS:

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

Signed: _____ Print Name: Lorne C Prescott

Title: Reg & Enviro Compliance Date: 10/08/2018 Email: lprescott@laramie-energy.com

COA Type **Description**

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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401786951	SPILL/RELEASE REPORT(INITIAL)
401787056	AERIAL PHOTOGRAPH
401787059	ANALYTICAL RESULTS
401787060	ANALYTICAL RESULTS
401795146	FORM 19 SUBMITTED

Total Attach: 5 Files

General Comments

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

Total: 0 comment(s)