

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:

401972916

Date Received:

03/14/2019

Spill report taken by:

Spill/Release Point ID:

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: SANDRIDGE EXPLORATION & PRODUCTION LLC	Operator No: 10598	Phone Numbers
Address: 123 ROBERT S KERR AVE		Phone: (405) 4296518
City: OKLAHOMA CITY State: OK Zip: 73102		Mobile: (405) 4208415
Contact Person: Spence Laird		Email: slaird@sandridgeenergy.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401972916

Initial Report Date: 03/14/2019 Date of Discovery: 03/14/2019 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENW SEC 9 TWP 6N RNG 80W MERIDIAN 6

Latitude: 40.509980 Longitude: -106.384040

Municipality (if within municipal boundaries): County: JACKSON

Reference Location:

Facility Type: WELL PAD Facility/Location ID No 445005

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

Number: 0680 /S9 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? 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: 15F, Light Snow Fog/Mist and Breezy

Surface Owner: FEE Other(Specify): North Park Registered Herefords

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):

At 1000 this morning (3/14/2019) flowback crews found an approximately 10 to 15 bbl spill of flowback water on the SU 9 pad. The crews had shut down the site on 3/13/2019 and given escort off-site back to Walden due to severe snowstorm. When they arrived back on-site today they found that two frac tanks storing flowback water had failed valves. The valves slowly leaked out flowback water onto the pad. Frac tanks had earthen berms constructed around them so no fluid left the secondary containment area and no fluid left the pad site. However, the area under the tanks are not lined. Flowback crews isolated and plugged the leaking valves. Hydro vac was dispatched to recover the fluids spilled and snow melt within the bermed area. Approximately 12 barrels were recovered from the spill.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
3/14/2019	Landowner	Greg Ray	970-846-4901	24 hour initial phone call
3/14/2019	COGCC	Kris Neidel	970-846-5097	24 hour initial phone call & email
3/14/2019	COGCC	Alex Fischer	303-894-2100	24 hour initial email
3/14/2019	Jackson County Administrator	Kent Crowder	970-723-4660	24 hour initial email

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:

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

Signed: _____ Print Name: Spence Laird

Title: EHS&R Date: 03/14/2019 Email: slaird@sandridgeenergy.com

COA Type **Description**

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Attachment Check List

Att Doc Num	Name
401973079	SITE MAP
401973082	TOPOGRAPHIC MAP

Total Attach: 2 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)