

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:

401880399

Date Received:

12/19/2018

Spill report taken by:

FISCHER, ALEX

Spill/Release Point ID:

459792

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: <u>UTAH GAS OP LTD DBA UTAH GAS CORP</u>	Operator No: <u>10539</u>	Phone Numbers
Address: <u>1125 ESCALANTE DR</u>		Phone: <u>(970) 675-4400</u>
City: <u>RANGELY</u> State: <u>CO</u> Zip: <u>81648</u>		Mobile: <u>(970) 290-2912</u>
Contact Person: <u>Steven Hale</u>		Email: <u>shale@utahgascorp.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401870624

Initial Report Date: 12/11/2018 Date of Discovery: 12/11/2018 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWSW SEC 5 TWP 3S RNG 101W MERIDIAN 6

Latitude: 39.815622 Longitude: -108.762570

Municipality (if within municipal boundaries): _____ County: RIO BLANCO

Reference Location:

Facility Type: WELL Facility/Location ID No _____

Spill/Release Point Name: Douglas Creek Unit #1 No Existing Facility or Location ID No.

Number: 1 Well API No. (Only if the reference facility is well) 05-103-05083

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): 0 Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): Unknown

Estimated Other E&P Waste Spill Volume(bbl): 0 Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: more accurate estimate to be determined during investigation

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____

Weather Condition: Clear

Surface 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 normal operations of the DCU #1 SWD well location, the lease operator discovered a release of produced water near the Salt Water Disposal well head, from an apparent failure of the flow line between the injection pump and the well head. The line was not under pressure at the time of discovery, but was isolated to prevent further release. Initial estimate of volume released is approximately 5 barrels, with more accurate determination to be made after flow line is excavated. Evidence of moist soil from the release extended from the well area on the working surface, and into stormwater diversion and containment. No release was made off pad location.

List Agencies and Other Parties Notified:

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:	12/19/2018		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown	
OIL	0	0	<input type="checkbox"/>	
CONDENSATE	0	0	<input type="checkbox"/>	
PRODUCED WATER	5	0	<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? <u>YES</u> Was an Emergency Pit constructed? <u>NO</u>				
<i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>				
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) <input checked="" type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature				
Surface Area Impacted: Length of Impact (feet): <u>113</u>		Width of Impact (feet): <u>3</u>		
Depth of Impact (feet BGS): <u>6</u>		Depth of Impact (inches BGS): _____		
How was extent determined?				
Full extent has not been determined. Surface moisture indicated that release surfaced directly above pinhole in flowline near well head and extended across frozen soil to Stormwater BMP berm, then into Sediment basin. Ongoing excavation and sampling is contained. Laboratory results from initial grab samples are included.				
Soil/Geology Description:				
Rock Outcrop - high percentage clay, very minimal sand				
Depth to Groundwater (feet BGS) <u>30</u>		Number Water Wells within 1/2 mile radius: <u>0</u>		
If less than 1 mile, distance in feet to nearest		Water Well _____ None <input checked="" type="checkbox"/>	Surface Water <u>600</u>	None <input type="checkbox"/>
		Wetlands _____ None <input checked="" type="checkbox"/>	Springs _____	None <input checked="" type="checkbox"/>
		Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building _____	None <input checked="" type="checkbox"/>
Additional Spill Details Not Provided Above:				
An estimated 5 bbl of produced water was released. Initial excavation was done to expose and repair line. Approximately 24 cubic yards of affected soil was removed and hauled to a commercial waste facility. Due to the repeated failure of this flowline, corrosion and metal integrity analysis is being conducted, in accordance to COA on initial form 19. Ongoing excavation and sampling are proceeding and a Form 27 will be drafted/submitted to choose the best remediation approach.				

CORRECTIVE ACTIONS

#1	Supplemental Report Date:	12/19/2018	
Cause of Spill (Check all that apply)			
<input type="checkbox"/> Human Error <input checked="" type="checkbox"/> Equipment Failure <input type="checkbox"/> Historical-Unknown			
<input type="checkbox"/> Other (specify) _____			
Describe Incident & Root Cause (include specific equipment and point of failure)			
The Lease Operator arrived to the DCU 1 Salt Water Disposal location on Dec. 11th, 2018 and noticed moisture staining at surface near well head. It was discovered that from during the last injection run, a pinhole had developed in the flow line between the pump and the well, resulting in approximately 5 bbl of Produced Water to be released primarily in the soil near the point of release. As with the previous related incident in December of 2016, a pinhole was found on the same 2 inch flowline.			
Describe measures taken to prevent the problem(s) from reoccurring:			
Produced Water testing is in progress and the failed flowline is being analyzed for corrosion and metal integrity. Initial repairs have been made with affected portion of line replaced and pressure tested (witnessed by COGCC staff on site - Inspection 401874064). Appropriate corrective actions will be taken after results of water and metal testing is complete.			
Volume of Soil Excavated (cubic yards): 24			
Disposition of Excavated Soil (attach documentation)			
<input checked="" type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment			
<input type="checkbox"/> Other (specify) _____			
Volume of Impacted Ground Water Removed (bbls): 0			
Volume of Impacted Surface Water Removed (bbls): 0			

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: _____

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: Steven Hale

Title: Environmental Specialist Date: 12/19/2018 Email: shale@utahgascorp.com

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

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401880399	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401880580	ANALYTICAL RESULTS
401880639	SITE MAP
401880802	OTHER
401882417	FORM 19 SUBMITTED

Total Attach: 5 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Environmental	Assess nature and extent of contamination with confirmation soil samples. Remediate to Table 910-1 standards and provide documentation in a either a Supplemental F-19 if cleaned up immediately and/or F-27 if extended remediation such as landfarming contaminated soil is required. Landfarming must also be approved by surface owner. If contamination remains above Yable 910-1, submit a plan for in situ remediaation and confirmation sampling to assess the effiiciency. Documentation must include a figure showing spill area with sample locations plus laboratory results. Also include any information that operator has available concerning pipeline failure analysis, integrity/pressure testing, and any data concerning the root causes of the spill. Provide all pipeline integrity data to the COGCC Pipeline Supervisor, Mark Schlagenhauf, at (303) 894-2100 x5177 or mark.schlagenhauf@state.co.us	12/20/2018

Total: 1 comment(s)