

State of Colorado  
Oil and Gas Conservation Commission

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



Document Number:

402034280

Date Received:

05/07/2019

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

464277

## 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: Max Knop

#### Phone Numbers

Phone: (303) 825-4822

Mobile: (720) 317-8161

Email: mknop@kpk.com

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402031540

Initial Report Date: 05/03/2019

Date of Discovery: 05/02/2019

Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESE SEC 15 TWP 2N RNG 67W MERIDIAN 6

Latitude: 40.132730 Longitude: -104.869960

Municipality (if within municipal boundaries): County: WELD

#### Reference Location:

Facility Type: TANK BATTERY

☐ Facility/Location ID No

Spill/Release Point Name: Parker #44-15

☒ 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): Unknown

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:

#### Land Use:

Current Land Use: 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):

COGCC Inspector Randy Silver performed a Field Inspection at the Parker 44-15 facility on May 2, 2019. During Mr. Silver's inspection he recorded that the ground around the produced water tank was saturated. Mr. Silver noted that the saturation was observed at a minimum of a 40 square foot area, at a depth of 12 inches below ground surface. KPK will inspect the location on May 3, 2019 to further investigate the issue surrounding the fluid release. Once additional details are collected, they will be provided in a supplemental Form 19.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
5/3/2019	Weld County	Dave Burns	970-400-3993	Weld County Spill Report Form (Email)
5/3/2019	Land Owner	Front Range Dairy	970-534-1047	Notified David Deehan about the release. Followed up with email notification.

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: 05/07/2019		
<b>FLUIDS</b>	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? YES Was an Emergency Pit constructed? NO			
Secondary containment, <b>including walls &amp; floor regardless of construction material</b> , must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.			
<b>A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit</b>			
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): 25		Width of Impact (feet): 20	
Depth of Impact (feet BGS): 4		Depth of Impact (inches BGS): _____	
How was extent determined?			
Extent based on visual observation of the release and gradient of the surrounding area. Excavation needed to fully determine the extent of impacted area. Contaminated soil will be excavated removed from site. Final vertical and horizontal extent of excavation area will be based collected grab soil samples and field screening results from ambient temperature head space measurementson. Soil samples will be analyzed for TPH - DRO, GRO & ORO, BTEX, pH, EC, and SAR.			
Soil/Geology Description:			
Vona loamy sand; 3 to 5 percent slopes.			
Depth to Groundwater (feet BGS) 28		Number Water Wells within 1/2 mile radius: 5	
If less than 1 mile, distance in feet to nearest Water Well 1710 None <input type="checkbox"/>		Surface Water 1438 None <input type="checkbox"/>	

Wetlands \_\_\_\_\_ None ☒Springs \_\_\_\_\_ None ☒Livestock \_\_\_\_\_ 960 None ☐Occupied Building \_\_\_\_\_ 820 None ☐

Additional Spill Details Not Provided Above:

**CORRECTIVE ACTIONS**

#1 Supplemental Report Date: 05/07/2019

Cause of Spill (Check all that apply) ☐ Human Error ☒ Equipment Failure ☐ Historical-Unknown☐ Other (specify) \_\_\_\_\_

Describe Incident &amp; Root Cause (include specific equipment and point of failure)

Base of produced water tank located at the Parker #44-15 tank battery has failed at an unknown location causing a release of an unknown amount of fluid.

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

Produced water tank has been disconnected from service and will be inspected to determine location of failure point. Once failure point is located, the storage tank will be assessed to determine if repairs are possible or if a new storage tank is needed.

Volume of Soil Excavated (cubic yards): 0

Disposition of Excavated Soil (attach documentation) ☒ Offsite Disposal ☐ Onsite Treatment☐ 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:**

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

Signed: \_\_\_\_\_ Print Name: Max Knop

Title: Gen Mangr of Air Quality Date: 05/07/2019 Email: mknop@kpk.com

**COA Type****Description****Attachment Check List****Att Doc Num****Name**

402034280	FORM 19 SUBMITTED
402034347	SITE MAP
402039081	SPILL/RELEASE REPORT(SUPPLEMENTAL)

Total Attach: 3 Files

General Comments

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

Total: 0 comment(s)