

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
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Document Number:  
402199421  
Date Received:  
10/04/2019  
Spill report taken by:  
Araza, Steven  
Spill/Release Point ID:  
457248

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: CAERUS PICEANCE LLC Operator No: 10456 Phone Numbers  
Address: 1001 17TH STREET #1600 Phone: (970) 778-2314  
City: DENVER State: CO Zip: 80202 Mobile: (970) 778-2314  
Contact Person: Jake Janicek Email: jjanicek@caerusoilandgas.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401751942

Initial Report Date: 09/01/2018 Date of Discovery: 08/31/2018 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NESW SEC 29 TWP 5S RNG 96W MERIDIAN 6  
Latitude: 39.583285 Longitude: -108.197370  
Municipality (if within municipal boundaries): County: GARFIELD

Reference Location:

Facility Type: WELL PAD  Facility/Location ID No 335943  
Spill/Release Point Name: 29C Flowback Release  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): 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: Clear  
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):

Fluid was spilled during flowback activities. Spill was contained on location. A water truck was called in and fluids were recovered.

**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: \_\_\_\_\_

**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: 14344

**OPERATOR COMMENTS:**

Per the COA listed on COGCC Document 401797050, Caerus was to elaborate on the method in which the extent of the spill was determined. The horizontal extent of the spill is well documented via the site map identified by COGCC Document ID 401814547 attached to Form 19 identified by COGCC Document ID 401797050. The edges of the spill path were still visible during initial spill response activities. These edges were considered the horizontal extent of the spill.

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

Signed: \_\_\_\_\_ Print Name: Jake Janicek

Title: EHS Specialist Date: 10/04/2019 Email: jjanicek@caerusoilandgas.com

**COA Type**

**Description**

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**Attachment Check List**

**Att Doc Num**

**Name**

402199421	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402201250	FORM 19 SUBMITTED

Total Attach: 2 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

Environmental	This spill is being closed with work proceeding under Remediation Project #14344. See remediation project files for closure documentation.	10/07/2019
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Total: 1 comment(s)