

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

401649137

Date Received:

06/04/2018

Spill report taken by:

LUJAN, CARLOS

Spill/Release Point ID:

453360

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>CAERUS PICEANCE LLC</u>	Operator No: <u>10456</u>	Phone Numbers
Address: <u>1001 17TH STREET #1600</u>		Phone: <u>(970) 285-2925</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>		Mobile: <u>(970) 640-6919</u>
Contact Person: <u>Blair Rollins</u>		Email: <u>brollins@caerusoilandgas.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401484512

Initial Report Date: 12/13/2017 Date of Discovery: 12/12/2017 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SENW SEC 23 TWP 5S RNG 96W MERIDIAN 6

Latitude: 39.601888 Longitude: -108.140833

Municipality (if within municipal boundaries): _____ County: GARFIELD

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No 335667

Spill/Release Point Name: F23 596 Produced Water 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? 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): >=5 and <100

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: Cloudy 30

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):

A lease operator at the F23 596 well pad discovered that the line connecting the onsite pump to the tank battery had a failure and was leaking produced water inside secondary containment. The lease operator isolated the line, called his supervisor, and then had a water truck mobilized to the site to remove the fluid from containment. All frozen portions of the released fluid were taken to the NPR Solidification Facility (COGCC Facility ID 426582) for ultimate disposal at a licensed disposal facility.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
12/13/2017	Garfield County	Kirby Wynn	970-625-5905	No response at time of reporting

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: 05/21/2018

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	<u>0</u>	<u>0</u>	<input type="checkbox"/>
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>
PRODUCED WATER	<u>15</u>	<u>13</u>	<input type="checkbox"/>
DRILLING FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
FLOW BACK FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
OTHER E&P WASTE	<u>0</u>	<u>0</u>	<input type="checkbox"/>

specify: _____

Was spill/release completely contained within berms or secondary containment? NO Was an Emergency Pit constructed? NO

Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.

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) Soil Groundwater Surface Water Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): 30 Width of Impact (feet): 10

Depth of Impact (feet BGS): _____ Depth of Impact (inches BGS): 4

How was extent determined?

Caerus collected an initial soil sample from the point of release where the secondary containment liner failed to contain the produced water, see attached laboratory analytical data spreadsheet. Laboratory analytical results identified exceedances to COGCC Table 910-1 standards for TPH, benzene, EC, and SAR. Following identification of impacted soil, Caerus utilized a hydrovac excavator to remove approximately three cubic yards of impacted soil. The excavated soil was transported to Caerus' North Solidification Facility for solidification and offsite disposal, see attached disposal manifest. A soil sample was collected from the excavation to confirm removal of all impacted soil. The confirmation sample was analyzed for TPH and BTEX. Results from the characterization sample identified no additional impacts present due to the spill, see attached laboratory data spreadsheet. Exceedances to EC and SAR will be buried below at least three feet of native material at the end of the life of the pad.

Soil/Geology Description:

Nihill Channery Loam, 6-25% slopes (soil map unit symbol 47).

Depth to Groundwater (feet BGS) 30 Number Water Wells within 1/2 mile radius: 2

If less than 1 mile, distance in feet to nearest Water Well 175 None Surface Water 205 None

Wetlands 205 None

Springs 1200 None

Livestock _____ None

Occupied Building _____ None

Additional Spill Details Not Provided Above:

Empty rectangular box for additional spill details.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 05/21/2018

Cause of Spill (Check all that apply) Human Error Equipment Failure Historical-Unknown
 Other (specify) _____

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

The produced water line failed due to corrosion. The produced water line was replaced and returned to service.

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

The spill exited the lined secondary containment due to holes in the liner. The liner was patched to ensure adequate secondary containment for the tanks on the location.

Volume of Soil Excavated (cubic yards): 3

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:

Attention Carlos Lujan.

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

Signed: _____ Print Name: Blair Rollins

Title: EHS Contractor Date: 06/04/2018 Email: brollins@caerusoilandgas.com

COA Type

Description

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Attachment Check List

Att Doc Num	Name
401649237	ANALYTICAL RESULTS
401662072	DISPOSAL MANIFEST
401662091	OTHER
401662175	ANALYTICAL RESULTS

Total Attach: 5 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)