

FORM
22

Rev
01/20

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:
03/18/2020

Accident Tracking No.:
402346717

ACCIDENT REPORT

As required by Rule 602.d.

CONTACT INFORMATION

Initial Notice of Accident Subsequent Notice of Accident

OGCC Operator Number: <u>10071</u>	Contact Name: <u>Rusty Frishmuth</u>
Name of Operator: <u>HIGHPOINT OPERATING CORPORATION</u>	Phone: <u>(303) 312-8718</u>
Address: <u>555 17TH ST STE 3700</u>	Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>rfrishmuth@hpres.com</u>

ACCIDENT DATE, TIME, and LOCATION (Please be as specific as possible)

Date of Accident: <u>02/06/2020</u>	Time of Accident: <u>4:00 AM</u>			
API Number: 05- _____	Facility ID: <u>450230</u>	Type of Facility: <u>LOCATION</u>		
Well/Facility Name: <u>Peterson Production Pad</u>	Well/Facility Num: <u>5-63-30 SWNE</u>			
County: <u>WELD</u>				
Location: QTRQTR: <u>SWNE</u>	Sec: <u>30</u>	Twp: <u>5N</u>	Rng: <u>63W</u>	Meridian: <u>6</u>
	Lat: <u>40.373444</u>		Long: <u>-104.476803</u>	
Field Name: <u>WATTENBERG</u>	Field Number: <u>90750</u>			

Was there a reportable E & P waste spill or release associated with this accident? Yes No

If YES, enter the Document Number of the Initial Spill/Release Report, Form 19: _____

Was there a Grade 1 Gas Leak associated with this accident ? Yes No

If YES, enter the Document Number of the Initial Spill/Release Report, Form 19: 402304918

DESCRIPTION OF ACCIDENT

Number of members of the general public injured: 0

Number of workers injured: 0

Number of general public fatalities: 0

Number of worker fatalities: 0

Type of Accident (check all that apply):

- Fire
- Explosion
- Detonation
- Uncontrolled Release
- Other Description: _____

Detailed Description of Accident:

- Do not include names of injured, injuries, or medical treatment information.
- Subsequent Report must include Root Cause.

HPOC has conducted an investigation of the incident that occurred at the Peterson 5-63-30 SWNE production facility on February 6th and determined the following.

The cause of the fire was a rupture of a braided steel discharge hose on a vapor recovery unit. Investigation into the failure indicated that neither the temperature rating nor the pressure rating of the hose were exceeded at the time of the failure or any time prior to the failure. HPOC has concluded that the hose likely failed due the hose being twisted, bent beyond the allowable radius or perhaps both. Due to the condition of the hose after the failure it was not possible to determine which may have occurred.

To address the situation and prevent any instances of reoccurrence, HPOC has conducted an inspection of every braided hose in service on VRU's throughout HPOC's entire area of operation. These inspections 1) verified the pressure and temperature rating of every hose in service, including ensuring each hose is tagged with pressure rating information and identifying those not tagged, 2) verified via visual inspection that no hoses were bent beyond the minimum radius specified for each given hose by the manufacturer, 3) verified via visual inspection that no hoses were twisted or bent in multi-axial directions.

Any hose displaying any physical signs of improper installation was promptly removed from service and replaced. HPOC inspected approximately 116 VRUs during this process and replaced approximately 10 hoses. Additionally HPOC is compiling a list of hoses that are not tagged and developing a plan to either replace these hoses or place them in a formal periodic inspection program.

OTHER NOTIFICATIONS

List all parties and agencies that were notified or responded to the accident. (For example: Local Government Designee, Municipality, County, BLM, EPA, CDOT, Local Emergency Planning Coordinator, etc.)

Date	Agency	Contact	Response
02/06/2020	Weld County OEM	Roy Rudisill	Notified Roy by phone approximately 7:45 AM
02/06/2020	Weld County Sheriff	Unknown	Weld Co Sheriff dispatched by Weld County Regional Communications Center.
02/06/2020	Platte Valley Fire Dept	Unknown	PVFD dispatched by Weld County Regional Communications Center. Responded and ultimately extinguished the fire after consulting with HighPoint operations personnel

OPERATOR COMMENTS and SUBMITTAL

Supplemental submittal containing HPOC's determination of root cause and corrective actions.

This form must be signed by an authorized agent of the entity making assertion.

I certify under penalty of perjury that this report has been examined by me and to the best of my knowledge is true, correct and complete.

Print Name: Dustin Watt Email: dwatt@hpres.com
 Signature: _____ Title: Sr. EHS Specialist Date: 03/18/2020

CONDITIONS OF APPROVAL, IF ANY:

COA Type

Description

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Attachment Check List

Att Doc Num

Name

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Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)

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