

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:

402346878

Date Received:

03/23/2020

Spill report taken by:

Spill/Release Point ID:

SPILL/RELEASE REPORT (INITIAL)

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: SANDRIDGE EXPLORATION & PRODUCTION LLC | Operator No: 10598 | Phone Numbers |
| Address: 123 ROBERT S KERR AVE | | Phone: (405) 4921324 |
| City: OKLAHOMA CITY | State: OK | Zip: 73102 |
| Contact Person: JOHN MAYNE | | Mobile: () |
| | | Email: JMAYNE@SANDRIDG EENERGY.COM |

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402346878

Initial Report Date: 03/19/2020 Date of Discovery: 03/16/2020 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWNW SEC 16 TWP 7N RNG 80W MERIDIAN 6

Latitude: 40.584779 Longitude: -106.386400

Municipality (if within municipal boundaries): County: JACKSON

Reference Location:

Facility Type: WELL Facility/Location ID No 439603

Spill/Release Point Name: Gregory Pad Well API No. (Only if the reference facility is well) 05- -

No Existing Facility or Location ID No.

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): >=1 and <5 | Estimated Condensate Spill Volume(bbl): 0 |
| Estimated Flow Back Fluid Spill Volume(bbl): 0 | Estimated Produced Water Spill Volume(bbl): >=1 and <5 |
| 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: WINTER

Surface Owner: OTHER (SPECIFY) Other(Specify): PRIVATE

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):

4:00pm 16 Mar 20 we discovered a leak coming from the Janet pad dualpac. I had the well shut in and isolated the leak. Within 20 min had a Vac truck pull all standing fluid inside and outside the building. Total amount of fluid we determined was around 8bbbls with 5 being contained within the building's sump and 3 spilling out of the building on the surrounding ground. Continuing excavation of all contaminated soil. When Cleanup is complete I have instructed Absaroka Energy and Environmental Solutions, LLC. To conduct soil samples.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

| Date | Agency/Party | Contact | Phone | Response |
|-----------|--------------|--------------|--------------|--|
| 3/20/2020 | COGCC | Kris Neidel | 970-8465097 | |
| 3/20/2020 | Landowner | Greg Ray | 970-219-3561 | Informed of spill and cleanup procedures |
| 3/20/2020 | County | Kent Crowder | 970-723-4660 | Informed of spill and cleanup procedures |

Was there a Grade 1 Gas Leak? Yes No

If YES, enter the Document Number of the Grade 1 Gas Leak Report Form 44: _____

Was there a reportable accident associated with either a Grade 1 Gas Leak or an E&P waste spill or release? Yes No

If YES, enter the Document Number of the Initial Accident Report, Form 22: _____

Was there damage during excavation? Yes No

If YES, was CO 811 notified prior to excavation? Yes No

OPERATOR COMMENTS:

Please contact me with any questions.

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

Signed: _____ Print Name: JOHN MAYNE

Title: Facilities Foreman Date: 03/23/2020 Email: JMAYNE@SANDRIDGEENERGY.COM

| COA Type | Description |
|----------|-------------|
| | |

Attachment Check List

| Att Doc Num | Name |
|-------------|------|
| | |

Total Attach: 0 Files

General Comments

| User Group | Comment | Comment Date |
|------------|---------|---------------------|
| | | Stamp Upon Approval |

Total: 0 comment(s)