

State of Colorado Oil and Gas Conservation Commission

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



Document Number:

402363317

Date Received:

04/07/2020

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

472995

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: VERDAD RESOURCES LLC	Operator No: 10651	Phone Numbers
Address: 5950 CEDAR SPRINGS ROAD		Phone: (720) 8456901
City: DALLAS State: TX Zip: 75235		Mobile: ()
Contact Person: Michael Cugnetti		Email: mcugnetti@verdadresources.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402335746

Initial Report Date: 03/08/2020 Date of Discovery: 03/08/2020 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWSE SEC 12 TWP 1N RNG 65W MERIDIAN 6

Latitude: 40.064786 Longitude: -104.610733

Municipality (if within municipal boundaries): County: WELD

Reference Location:

Facility Type: WELL PAD

☒ Facility/Location ID No 469568

Spill/Release Point Name: Safi 1224

☐ 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): 0

Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): 0

Estimated Other E&P Waste Spill Volume(bbl): 0

Estimated Drilling Fluid Spill Volume(bbl): >=5 and <100

Specify:

Land Use:

Current Land Use: 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):

Discharge pipe from centrifuge at the drilling rig disconnected. Allowed 20 BBLs of drilling mud to escape before discovery and spill was stopped. Dirt berms were built around area to contain spill within a 30 foot by 30 foot area. Cleanup started immediately. All impacted pad surface road base will be removed and properly disposed of.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
3/8/2020	Weld County	Weld OEM Spill Report	-	Received

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 ☐

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 04/06/2020		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	0	<input type="checkbox"/>
DRILLING FLUID	20	20	<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? 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): 30

Depth of Impact (feet BGS): 0 Depth of Impact (inches BGS): 3

How was extent determined?

Extent was determined by visual observation of the surface impact and the depth when clean up occurred. Final extent determination and verification was conducted by collecting soil samples and analyzing them. Sample details and analytical results are attached.

Soil/Geology Description:

The spill occurred on the constructed pad surface. The pad is made of 1 foot of roadbase course. No native soil was impacted.

Depth to Groundwater (feet BGS) 23 Number Water Wells within 1/2 mile radius: 15

If less than 1 mile, distance in feet to nearest Water Well 383 None ☐ Surface Water 628 None ☐

☐ ☒

Springs	None
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Occupied Building	1799	None	<input type="checkbox"/>
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CORRECTIVE ACTIONS

#1	Supplemental Report Date:	04/06/2020
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Root Cause of Spill/Release	Pipe, Weld, or Joint Failure
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Other (specify) _____

Type of Equipment at Point of Spill/Release: Other

If "Other" selected above, specify or describe here:

Centrifuge

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

The PVC pipe that connects below the centrifuge and transports clean fluids back to the mud tanks, became disengaged, and the effluent was discharged onto the ground. It is estimated that it ran like this 5 to 10 minutes before it was discovered. The machine was immediately shut off and clean up began. Pipe likely came loose from vibration.

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

Pipe reattached securely and extra operator brought onsite so someone will be observing the centrifuge operation at all times.

Volume of Soil Excavated (cubic yards): 6

Disposition of Excavated Soil (attach documentation)	<input checked="" type="checkbox"/> Offsite Disposal	Onsite Treatment
	<input type="checkbox"/> Other (specify)	

Volume of Impacted Ground Water Removed (bbls): 0

Volume of Impacted Surface Water Removed (bbbs): 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: Michael Cugnetti

Title: Director of EHS&R Date: 04/07/2020 Email: mcugnetti@verdadresources.com

COA Type

Description

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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402363324	DISPOSAL MANIFEST
402363325	DISPOSAL MANIFEST
402363326	ANALYTICAL RESULTS
402363343	OTHER
402364230	SITE MAP

Total Attach: 5 Files

General Comments

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

Total: 0 comment(s)