

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:

402378513

Date Received:

04/23/2020

Spill report taken by:

Araza, Steven

Spill/Release Point ID:

475449

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 INFORMATON

Name of Operator: <u>CAERUS PICEANCE LLC</u>	Operator No: <u>10456</u>	<b>Phone Numbers</b>
Address: <u>1001 17TH STREET #1600</u>		Phone: <u>(970) 285-2720</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Jake Janicek</u>		Mobile: <u>(970) 778-2314</u>
		Email: <u>jjanicek@caerusoilandgas.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402368627

Initial Report Date: 04/13/2020 Date of Discovery: 04/13/2020 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR swnw SEC 9 TWP 6s RNG 96w MERIDIAN 6

Latitude: 39.539307 Longitude: -108.118518

Municipality (if within municipal boundaries): \_\_\_\_\_ County: GARFIELD

Reference Location:

Facility Type: FLOWLINE SYSTEM  Facility/Location ID No 335856

Spill/Release Point Name: E09 10D-697 flowline release  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? No

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): 0 Estimated Condensate Spill Volume(bbl): Unknown

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): Unknown

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: partly cloudy with 5mph winds

Surface Owner: FEE Other(Specify): caerus

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):

flow line failed pressure test beening investigated.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
4/13/2020	Cogcc	Steven Arauza	720-498-5298	voicemail
4/13/2020	Garfield county	Kirby wynn	970-987- 2557	submit form 19

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: 04/23/2020

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	2	0	<input type="checkbox"/>
DRILLING FLUID	0	0	<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): \_\_\_\_\_ Width of Impact (feet): \_\_\_\_\_

Depth of Impact (feet BGS): \_\_\_\_\_ Depth of Impact (inches BGS): \_\_\_\_\_

How was extent determined?

The extent was limited to the area immediately adjacent to the point of release. The extent was determined through field observations and laboratory analytical.

Soil/Geology Description:

Rock outcrop-Torriorthents complex, very steep

Depth to Groundwater (feet BGS) 120 Number Water Wells within 1/2 mile radius: 2

If less than 1 mile, distance in feet to nearest

Water Well	<u>982</u>	None <input type="checkbox"/>	Surface Water	<u>1207</u>	None <input type="checkbox"/>
Wetlands	<u>1207</u>	None <input type="checkbox"/>	Springs		None <input checked="" type="checkbox"/>
Livestock		None <input checked="" type="checkbox"/>	Occupied Building	<u>810</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

On 4/16/2020, soil samples (20200416-E09 696 (POR) @ 8' and 20200416-E09 696 (Stockpile)) were collected from the soil adjacent to the point of release (POR) and the stockpile of removed soil. Both samples were submitted for laboratory analysis of all analytes listed in COGCC Table 910-1. Laboratory analytical results indicate that the soil sample (20200416-E09 696 (POR) @ 8') collected at the POR was compliant with all COGCC Table 910-1 Concentration Levels or below background concentrations for arsenic. The soil sample (20200416-E09 696 (Stockpile)) collected from the stockpile of removed soil exhibited arsenic, benzene, and EC exceedances of their associated COGCC Table 910-1 Concentration Levels. Table 1 summarizes analytical results and reports are attached. Please see Figure 1 which depicts soil sampling locations and other pertinent site info. The stockpile of removed soil will be transported to Greenleaf Environmental Services for disposal. Signed Waste Manifests will be submitted to the COGCC once they are received. In order to address the arsenic exceedances exhibited in soil sample 20200416-E09 696 (POR) @ 8', Caerus is requesting consideration for the COGCC Table 910-1 Concentration Level for arsenic under guidelines set forth under FAQ 31. Caerus believes the request for FAQ 31 consideration is acceptable as the arsenic result for the soil sample was below background samples for arsenic collected at the site in November of 2010. Table 1 summarizes background analytical results and reports are attached. Please see Figure 2 which depicts background soil sampling locations.

### CORRECTIVE ACTIONS

#1	Supplemental Report Date: <u>04/23/2020</u>
Root Cause of Spill/Release	<u>Equipment Failure</u>
Other (specify)	_____
Type of Equipment at Point of Spill/Release:	<u>Wellhead Line</u>
If "Other" selected above, specify or describe here:	<div style="border: 1px solid black; height: 30px; width: 100%;"></div>
Describe Incident & Root Cause (include specific equipment and point of failure)	<div style="border: 1px solid black; padding: 5px;">The failed portion of flowline was between the wellhead for the N. Parachute MF 10B E09 696 well and the associated meter skid. After inspecting the flowline, it was determined that the failure was due to external corrosion.</div>
Describe measures taken to prevent the problem(s) from reoccurring:	<div style="border: 1px solid black; padding: 5px;">The failed portion of flowline was replaced with brand new pipe.</div>
Volume of Soil Excavated (cubic yards):	<u>15</u>
Disposition of Excavated Soil (attach documentation)	<input checked="" type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment <input type="checkbox"/> Other (specify) _____
Volume of Impacted Ground Water Removed (bbls):	_____
Volume of Impacted Surface Water Removed (bbls):	_____

### 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:

A COA listed on the Initial Form 19 for this release requested that a representative fluid sample be collected from the well associated with the failed flowline. Caerus requests relief from this COA due to the technical infeasibility associated with the failed flowline being part of a three-phase process system that is connected directly into a three-phase pipeline instead of a production tank. Under this process system, a sufficient amount of sample fluid would not be able to be collected to fulfill the requirement.

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: 04/23/2020 Email: jjanicek@caerusoilandgas.com

**COA Type**

**Description**

--	--

**Attachment Check List**

**Att Doc Num**

**Name**

402378517	TOPOGRAPHIC MAP
402378769	SITE MAP
402378790	SITE MAP
402378799	ANALYTICAL RESULTS
402378852	ANALYTICAL RESULTS
402378876	ANALYTICAL RESULTS
402378880	ANALYTICAL RESULTS

Total Attach: 7 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
--	--	---------------------

Total: 0 comment(s)