

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:

402361173

Date Received:

04/24/2020

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

474081

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: SANDRIDGE EXPLORATION & PRODUCTION LLC	Operator No: 10598	Phone Numbers
Address: 123 ROBERT S KERR AVE		Phone: (405) 492-6470
City: OKLAHOMA CITY	State: OK	Zip: 73102
Contact Person: David Boyer		Mobile: ()
		Email: dboyer@sandridgeenergy.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

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: 15465

OPERATOR COMMENTS:

As requested by the COGCC (Form 19 Supplemental Report 402352928 COA) the spill location coordinates are Latitude 40.584789, Longitude -106.387541. SandRidge is requesting to close this Form 19 and proceed with remediation under a Form 27 Work Plan.

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

Signed: _____ Print Name: Joel Mason

Title: Project Manager Date: 04/24/2020 Email: joel.mason@absarokasolutions.com

COA Type

Description

--	--

Attachment Check List

Att Doc Num	Name
402362257	TOPOGRAPHIC MAP
402362259	SITE MAP
402362263	SITE MAP

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Environmental	COGCC staff updated the "Spill/Release Point Location" based on information provided here.	04/06/2020

Total: 1 comment(s)