

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:

402402654

Date Received:

05/26/2020

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

453141

## 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: PDC ENERGY INC	Operator No: 69175	<b>Phone Numbers</b>
Address: 1775 SHERMAN STREET - STE 3000		Phone: ( )
City: DENVER	State: CO	Mobile: ( )
Zip: 80203	Contact Person: Phillip Porter	Email: COGCCSpillRemediation@pdce.com

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401467669

Initial Report Date: 11/26/2017 Date of Discovery: 11/25/2017 Spill Type: Recent Spill

#### Spill/Release Point Location:

QTRQTR SENE SEC 32 TWP 1N RNG 66W MERIDIAN 6

Latitude: 40.011110 Longitude: -104.792750

Municipality (if within municipal boundaries): County: WELD

#### Reference Location:

Facility Type: WELL PAD

☒ Facility/Location ID No 433548

Spill/Release Point Name: Phelps

☐ 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): >=1 and <5

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): 0

Specify:

#### Land Use:

Current Land Use: NON-CROP LAND

Other(Specify):

Weather Condition: Sunny, Clear

Surface Owner: FEE

Other(Specify): Phelps

#### 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):

An estimated 2 bbls of oil was released onto the well pad surface due to sump overflow. The sump that collects residual oil from the vapor recover tower overflowed due to valve from knockout tank being left open. Lease operator arrived on location and noticed release. Valve on knockout tank was shut-off stopping release. Roustabout crew was called out immediately to begin clean-up activity. This included using vac-truck to remove free oil from surface as well as excavating impacted soils for disposal.

List Agencies and Other Parties Notified:

### OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
11/25/2017	COGCC	Chris Canefield	-	Email
11/25/2017	Weld County	Roy Rudisill	-	Email

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: 05/20/2020		
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	2	1	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	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): 175 Width of Impact (feet): 5

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

How was extent determined?

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
402402654	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402403003	ANALYTICAL RESULTS
402403004	SITE MAP

402405390	ANALYTICAL RESULTS
402405421	FORM 19 SUBMITTED

Total Attach: 5 Files

**General Comments**

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

Total: 0 comment(s)