

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:

402427081

Date Received:

06/21/2020

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: KP KAUFFMAN COMPANY INC	Operator No: 46290	Phone Numbers
Address: 1675 BROADWAY, STE 2800		Phone: (303) 825-4822
City: DENVER State: CO Zip: 80202		Mobile: (720) 317-8161
Contact Person: Max Knop		Email: mknop@kpk.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402427081

Initial Report Date: 06/21/2020 Date of Discovery: 06/20/2020 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWNE SEC 20 TWP 2N RNG 66W MERIDIAN 6

Latitude: 40.129360 Longitude: -104.798787

Municipality (if within municipal boundaries): County: WELD

Reference Location:

Facility Type: OFF-LOCATION
FLOWLINE

☐ Facility/Location ID No

Spill/Release Point Name: NESSSU
CONSOLIDATION

☐ 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): >=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: CROP LAND

Other(Specify):

Weather Condition: Cloudy, Warm Temp

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):

KPK was notified of a flowline release at approximately 9:15 pm on 6/20/2020 by the surface owner. Entire flowline system was shut-in on 6/20/2020 in response to the notification. Release occurred in a corn field affecting at least one row of corn in the field. Additional investigation is needed to confirm the root cause of the flowline failure. Initial excavation and hydrovac'ing was performed to remove any pooled liquids present at the time of response to the flowline release notification. Based on historical release information, release has occurred at the location of spill/release point 470915 & REM project #15409.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
6/20/2020	Surface Owner	Brittny White	720-648-7600	reported release to KPK
6/21/2020	Weld County	OEM	-	On-line Spill Report

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:

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

Signed: _____ Print Name: Max Knop

Title: Gen Mangr of Air Quality Date: 06/21/2020 Email: mknop@kpk.com

COA Type **Description**

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Attachment Check List

Att Doc Num **Name**

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Total Attach: 0 Files

General Comments

User Group **Comment** **Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)