

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:

402455022

Date Received:

07/28/2020

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

477603

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

**INITIAL SPILL/RELEASE REPORT**

Initial Spill/Release Report Doc# 402455022

Initial Report Date: 07/28/2020 Date of Discovery: 07/27/2020 Spill Type: Recent Spill

**Spill/Release Point Location:**

QTRQTR NWNE SEC 1 TWP 1N RNG 68W MERIDIAN 6

Latitude: 40.086061 Longitude: -104.948976

Municipality (if within municipal boundaries): Dacono County: WELD

**Reference Location:**

Facility Type: OFF-LOCATION FLOWLINE

Facility/Location ID No \_\_\_\_\_

Spill/Release Point Name: Peltier #2 Flowline

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? No

*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): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): >0 and <1

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, warm

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 at 7:27pm via emergency contact line that a release was observed near the Peltier #2 well (API #05-123-09060). KPK responded to the emergency call and immediately shut-in the to prevent any further release. After the well was shut-in, area was inspected and a trace amount of produced water was found to have surfaced via the 1" vent line near the rotary. Local fire department had also responded to the release notification and left location once it was confirmed the release had been stopped.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
7/28/2020	Weld County	OEM	-	On-line spill report
7/28/2020	Surface Owner	LAYG Investments, LLC	-	email notification

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:**

\_\_\_\_\_

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: 07/28/2020 Email: mknop@kpk.com

**COA Type**

**Description**

COA Type	Description

**Attachment Check List**

**Att Doc Num**

**Name**

402455022	SPILL/RELEASE REPORT(INITIAL)
402460546	FORM 19 SUBMITTED

Total Attach: 2 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

Environmental	Did the operator provide notification to the local government as required by Rule 906.b.(6)? If yes, then state so in the operator comment field on a Form 19 Supplemental Report. If no, provide that notification and verify having done so on a Form 19 Supplemental Report.	08/05/2020
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Total: 1 comment(s)