

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:

402479946

Date Received:

09/01/2020

Spill report taken by:

Araza, Steven

Spill/Release Point ID:

476992

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: <u>LARAMIE ENERGY LLC</u>	Operator No: <u>10433</u>	Phone Numbers
Address: <u>1401 SEVENTEENTH STREET #1401</u>		Phone: <u>(970) 263-3641</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Joan Proulx</u>		Mobile: <u>()</u>
		Email: <u>jproulx@laramie-energy.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402425778

Initial Report Date: 06/18/2020 Date of Discovery: 06/17/2020 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR SWNW SEC 28 TWP 9S RNG 93W MERIDIAN 6

Latitude: 39.250660 Longitude: -107.779118

Municipality (if within municipal boundaries): _____ County: MESA

Reference Location:

Facility Type: OIL AND GAS LOCATION Facility/Location ID No 334427

Spill/Release Point Name: Piceance 28-05 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? 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): >=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: Sunny and Warm

Surface Owner: FEE Other(Specify): Laramie Energy, LLC

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):

During normal operations, pumper discovered the 3" nipple between the produced water tank and load out valve was leaking, the tank was isolated and the produced water transferred to another tank in the containment ring. The nipple was thrn removed and a corrosion hole was discovered in the threaded section (see attached photo). Initial estimate is 1-5 bbls leaked into the containment. Approximately one bbl or less leaked out of the containment on to the ground. Fluids in side the containment will be place back into the produced water tanks. Laramie is investigating the cause of the discharge including pulling the tank out of containmnet and pulling the liner back to determine impact below liner. Laramie will inspect the tank for any additional possibility of holes and if found the tank will be replaced and Laramie will follow-up with a Form 19 supplemental with the results of the investigation.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
6/18/2020	COGCC	Alex Fischer	303-894-2100	File Form 19 and investigate
6/18/2020	Mesa County	Jeff Hofman	970-254-4152	E-mail notification with this Form 19 attached.

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:	09/01/2020		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown	
OIL	0	0	<input type="checkbox"/>	
CONDENSATE	0	0	<input type="checkbox"/>	
PRODUCED WATER	8	6	<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? <u>NO</u> Was an Emergency Pit constructed? <u>NO</u>				
<i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>				
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) <input checked="" type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature				
Surface Area Impacted:		Length of Impact (feet): <u>27</u>	Width of Impact (feet): <u>11</u>	
		Depth of Impact (feet BGS): <u>1</u>	Depth of Impact (inches BGS): _____	
How was extent determined?				
Extent was determined through sampling results/visual input.				
Soil/Geology Description:				
Hesperus-Empedrado, mois-Pagoda complex 5 to 35% slopes.				
Depth to Groundwater (feet BGS) <u>47</u>		Number Water Wells within 1/2 mile radius: <u>1</u>		

If less than 1 mile, distance in feet to nearest
 Water Well 2169 None Surface Water 631 None
 Wetlands _____ None Springs _____ None
 Livestock _____ None Occupied Building 2350 None

Additional Spill Details Not Provided Above:

Total volume leaked 8 bbls produced water. 6 bbls recovered and place back in tanks, two barrels outside containment.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 09/01/2020

Root Cause of Spill/Release Corrosion

Other (specify) _____

Type of Equipment at Point of Spill/Release: Peripheral Piping

If "Other" selected above, specify or describe here:

Describe Incident & Root Cause (include specific equipment and point of failure)

Root cause of failure was corrosion in the pipe fitting exiting the tank prior to the load line valve. The liner compromise appears to be from a lack of sufficient sand padding under the liner and pad gravel, allowing a hole to be worn through the liner after repeated rubbing of the pea gravel on top of the liner and the rocks underneath. Four of the tanks were pulled the week of 6/20/20 and the containment was pulled and reduced in size to hold four tanks due to the decreased production on the pad.

Describe measures taken to prevent the problem(s) from reoccurring:

The tank was one of the four removed and in the future heavier gauge fittings will be used exiting tanks and between valves. Regarding the liner, liner padding will be of sufficient size to insure separation between the liner and the pad gravel.

Volume of Soil Excavated (cubic yards): _____

Disposition of Excavated Soil (attach documentation) Offsite Disposal Onsite Treatment
 Other (specify) _____

Volume of Impacted Ground Water Removed (bbls): 0

Volume of Impacted Surface Water Removed (bbls): 0

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: 15898

OPERATOR COMMENTS:

The final volume of impacted soil removed from the pad and sent to Greenleaf will be included on a Supplemental Form 27.

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

Signed: _____ Print Name: Joan Proulx

Title: Regulatory Analyst Date: 09/01/2020 Email: jproulx@laramie-energy.com

COA Type

Description

COA Type	Description

Attachment Check List

Att Doc Num **Name**

--	--

Total Attach: 0 Files

General Comments

User Group **Comment**

Comment Date

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

Total: 0 comment(s)