

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:

402552706

Date Received:

12/12/2020

Spill report taken by:

Hughes, Jim

Spill/Release Point ID:

478786

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: BERRY PETROLEUM COMPANY LLCOperator No: 10091Address: 5201 TRUXTUN AVENUE #100City: BAKERSFIELDState: CAZip: 90339Contact Person: Don Wilbourn

Phone Numbers

Phone: (970) 285-5207Mobile: (970) 210-6693Email: dwilbourn@bry.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402546173Initial Report Date: 12/03/2020Date of Discovery: 11/25/2020Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR SESE SEC 32 TWP 5S RNG 95W MERIDIAN 6Latitude: 39.564580Longitude: -108.070872Municipality (if within municipal boundaries): _____ County: GARFIELD

Reference Location:

Facility Type: CENTRALIZED EP
WASTE MGMT FAC☒ Facility/Location ID No 430737

Spill/Release Point Name: _____

☐ 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): UnknownEstimated Condensate Spill Volume(bbl): UnknownEstimated Flow Back Fluid Spill Volume(bbl): UnknownEstimated Produced Water Spill Volume(bbl): UnknownEstimated Other E&P Waste Spill Volume(bbl): UnknownEstimated Drilling Fluid Spill Volume(bbl): Unknown

Specify: _____

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): _____

Weather Condition: Cold, clearSurface Owner: FEEOther(Specify): Caerus

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 the fall sampling of the groundwater monitoring wells at the P32 E&P waste facility a sample from MW-3 came back with high levels of methane. Following guidance from our consultant, Dave Nicholson, we had another sample taken to both verify the methane level and perform stable isotopic analysis of the methane to determine its origin. Based on the isotopic analysis, attached to this report, the methane does not appear to have a microbial source. Berry notified the COGCC upon receiving the isotopic analysis and began looking for any potential sources of the methane. The methane was found in a water well with a free surface roughly 30' bgs which is significantly deeper than any underground pipelines we have in the area, nevertheless Berry has pressure tested the closest pipeline twice in the last week with both passing. The pit is outfitted with a digital leak detection system indicating now leaks, visual inspection of system today found it to be dry. Efforts to id source ongoing.

List Agencies and Other Parties Notified:

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: _____

OPERATOR COMMENTS:

At this time Berry has yet to identify a source for the increased methane levels in the observation well. The p-32 impoundment is constructed with a double liner and leak detection which is tied into our SCADA system. The leak alarm has not been triggered and was pulled out for inspection and found to be both dry and its operation was verified during the visual inspection. Additionally, the only Berry infrastructure near this observation well is an underground gas line which has been pressure tested twice since the initial submission both of which passed. The 12" and 10" portions of the lines were isolated and tested individually on 12/3/20 using a digital guage with data collection. The pressure test results for both portions of the line are attached to this submission. Additionally, Berry had another sample collected from the well and we are currently awaiting the results. Should the testing show a persistent methane concentration Berry will test the gas from its pipeline system to determine whether or not our produced gas matches the profile of the gas in the well.

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

Signed: _____ Print Name: Jon Armstrong

Title: EH&S Rep, Sr. Date: 12/12/2020 Email: jarmstrong@bry.com

COA Type

Description

	Rule 906.b.3 states: "In addition to the Initial Report to the Director, the Operator shall make a supplemental report on Form 19 not more than 10 calendar days after the spill/release is discovered that includes an 8 1/2 x 11 inch topographic map showing the governmental section and location of the spill or an aerial photograph showing the location of the spill; all pertinent information about the spill/release known to the Operator that has not been reported previously; and information relating to the initial mitigation, site investigation, and remediation measures conducted by the Operator." Ensure that future supplemental spill reports are in compliance with this Rule.
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Attachment List

Att Doc Num	Name
402552706	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402552707	OTHER
402552708	OTHER

402557510	FORM 19 SUBMITTED
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Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)