

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:

402560783

Date Received:

12/28/2020

Spill report taken by:

Hughes, Jim

Spill/Release Point ID:

478512

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>SIMCOE LLC</u>	Operator No: <u>10749</u>	Phone Numbers
Address: <u>THREE ALLEN CENTER, 333 CLAY ST SUITE 3900</u>		Phone: <u>(505) 330-9179</u>
City: <u>HOUSTON</u>	State: <u>TX</u>	Zip: <u>77002</u>
Contact Person: <u>Steve Moskal</u>		Mobile: <u>(505) 330-9179</u>
		Email: <u>smoskal@ikavenergy.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402527600

Initial Report Date: 11/07/2020 Date of Discovery: 11/06/2020 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NENW SEC 30 TWP 33N RNG 7W MERIDIAN N

Latitude: 37.080441 Longitude: -107.654247

Municipality (if within municipal boundaries): _____ County: LA PLATA

Reference Location:

Facility Type: FLOWLINE SYSTEM ☒ Facility/Location ID No 215421

Spill/Release Point Name: Simms E 1 ☐ 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? Yes

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): >=100

Estimated Other E&P Waste Spill Volume(bbl): 0

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: Approximately 245 bbls of produced water on pad, with minimal leaving edge of well pad

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): Well Pad

Weather Condition: Clear, 70F

Surface Owner: FEE

Other(Specify): Private

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):

Produced water release from underground flowline, flowed accross pad to rock rundown, where operators stopped the release with a small berm.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
11/7/2020	Landowner	Private	--	BP Land negotiator to contact landowner
11/6/2020	COGCC	Jim Hughes	970-903-4072	Left Voicemail
11/7/2020	La Plata Co	Shawna Legarza	---	Email with response
11/6/2020	SUIT	Doug Krueger	970-769-3017	Left voicemail as a courtesy 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 ☐

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 12/28/2020

Root Cause of Spill/Release Pipe, Weld, or Joint Failure

Other (specify) _____

Type of Equipment at Point of Spill/Release: Horizontal Heated Separator

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

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

1" nipple on separator failed due to physical stress, resulting in release.

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

Piping was replaced and corrected alignment to reduce stress.

Volume of Soil Excavated (cubic yards): 0

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: _____

OPERATOR COMMENTS:

SS06 (24-28") was collected near SS03 (0-6"), and indicated a reduction in SAR from 16.5 to 2.18 and a reduction in conductivity from 3.780 mmhos/cm to 0.550 mmhos/cm.

SS05 (24-28") was collected near SS01 (0-6"), and indicated a reduction in SAR from 12.0 to 1.30 and a reduction in conductivity from 2.120 mmhos/cm to 0.995 mmhos/cm.

All impacts remain on pad and demonstrate no need for further remedial action.

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

Signed: _____ Print Name: Steve Moskal

Title: Enviro Coord Date: 12/28/2020 Email: smoskal@ikavenergy.com

COA Type

Description

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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402560795	ANALYTICAL RESULTS
402560798	ANALYTICAL RESULTS
402560800	SITE MAP
402560802	OTHER
402560804	ANALYTICAL RESULTS
402560805	ANALYTICAL RESULTS

Total Attach: 6 Files

General Comments

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

Total: 0 comment(s)