

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:

402496299

Date Received:

01/07/2021

Spill report taken by:

Arauzo, Steven

Spill/Release Point ID:

477097

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>CAERUS PICEANCE LLC</u>	Operator No: <u>10456</u>	Phone Numbers
Address: <u>1001 17TH STREET #1600</u>		Phone: <u>(970) 285-2925</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>		Mobile: <u>(970) 640-6919</u>
Contact Person: <u>Blair Rollins</u>		Email: <u>brollins@caerusoilandgas.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402432944

Initial Report Date: 06/26/2020 Date of Discovery: 06/26/2020 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWSW SEC 16 TWP 6S RNG 96W MERIDIAN 6

Latitude: 39.519440 Longitude: -108.122330

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

Reference Location:

Facility Type: PIPELINE Facility/Location ID No 335206
 Spill/Release Point Name: Unocal 1 dumpline release 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): <u>0</u>	Estimated Condensate Spill Volume(bbl): <u>Unknown</u>
Estimated Flow Back Fluid Spill Volume(bbl): <u>0</u>	Estimated Produced Water Spill Volume(bbl): <u>Unknown</u>
Estimated Other E&P Waste Spill Volume(bbl): <u>0</u>	Estimated Drilling Fluid Spill Volume(bbl): <u>0</u>

Specify: _____

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____
 Weather Condition: sunny clear
 Surface Owner: FEE Other(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):

Dumpline pressure testing failed, the pipeline has not been excavated to date and the volume of spill is currently undetermined. Once the pipeline is excavated a volume will be generated through calculation if possible and a point of release sample will be collected to assess potential impacts.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
6/26/2020	COGCC	Steven Arauza	720-498.5298	shared information
6/26/2020	Garfield Co	Kirby Wynn	970-625.5905	emailed form 19
6/26/2020	landowner	Caerus	-	

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:	09/23/2020		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown	
OIL	0	0	<input type="checkbox"/>	
CONDENSATE	2	0	<input type="checkbox"/>	
PRODUCED WATER	8	0	<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): _____	Width of Impact (feet): _____	
		Depth of Impact (feet BGS): _____	Depth of Impact (inches BGS): _____	
How was extent determined?				
Caerus is in the process of determining the extent of contamination under COGCC Remediation Number 15973.				
Soil/Geology Description:				
Rock outcrop - Torriorthents complex, very steep. Map unit symbol 62.				

Depth to Groundwater (feet BGS) 200 Number Water Wells within 1/2 mile radius: 0
 If less than 1 mile, distance in feet to nearest Water Well 2950 None Surface Water 2500 None
 Wetlands 2500 None Springs _____ None
 Livestock 2500 None Occupied Building 3450 None

Additional Spill Details Not Provided Above:

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 09/23/2020

Root Cause of Spill/Release Corrosion
 Other (specify) _____

Type of Equipment at Point of Spill/Release: Dump Line
 If "Other" selected above, specify or describe here:

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

The dumpline failure was due to internal corrosion of a threaded fitting.

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

The section of threaded pipe was removed and replaced with coated steel pipe with welded fittings.

Volume of Soil Excavated (cubic yards): 15

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: 15973

OPERATOR COMMENTS:

A representative spilled fluid sample has not been collected to date as the tank was emptied during the initial spill identification. Caerus requests relief from this COA as available fluids for sample collection were not available at the time of initial spill response and assessment.

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

Signed: _____ Print Name: Blair Rollins
 Title: EHS Specialist Date: 01/07/2021 Email: brollins@caerusoilandgas.com

COA Type**Description**

	Based on review of information presented it appears that no additional spill reporting via the eForm 19 is necessary at this time, and COGCC approves the closure request. However, should future conditions at the site indicate contaminant concentrations in soils exceeding COGCC standards or if surface and/or ground water is found to be impacted, then further investigation and/or remediation activities will be required at the site.
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Attachment List**Att Doc Num****Name**

402496299	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402572516	FORM 19 SUBMITTED

Total Attach: 2 Files

General Comments**User Group****Comment****Comment Date**

Environmental	Based on the information provided, the Operator's request for relief from the fluids sampling COA included on doc #402432944 is conditionally approved.	01/12/2021
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Total: 1 comment(s)