

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:

402590214

Date Received:

02/03/2021

Spill report taken by:

YOUNG, ROB

Spill/Release Point ID:

479285

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>WESCO OPERATING INC</u>	Operator No: <u>95520</u>	Phone Numbers
Address: <u>120 S DURBIN STREET</u>		Phone: <u>(307) 5775329</u>
City: <u>CASPER</u> State: <u>WY</u> Zip: <u>82602</u>		Mobile: <u>()</u>
Contact Person: <u>Dave Weinert</u>		Email: <u>davew@kirkwoodcompanies.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402587379

Initial Report Date: 01/31/2021 Date of Discovery: 01/30/2021 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NE SE SEC 27 TWP 3S RNG 51W MERIDIAN 6

Latitude: 39.762535 Longitude: -103.067703

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

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No _____

Spill/Release Point Name: Rudnik injection pump 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? Yes

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>0</u>
Estimated Flow Back Fluid Spill Volume(bbl): <u>0</u>	Estimated Produced Water Spill Volume(bbl): <u>>=5 and <100</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

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):

The packing on the injection pump failed. All spilled fluid stayed within containment. The spill volume is approximately 33 barrels of produced water. Fluid is being recovered by a vac truck and will be placed back into the on site tanks.

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

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 02/03/2021

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	50	50	<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? YES Was an Emergency Pit constructed? NO

Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.

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) Soil Groundwater Surface Water Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): 123 Width of Impact (feet): 47

Depth of Impact (feet BGS): _____ Depth of Impact (inches BGS): _____

How was extent determined?

The horizontal area is estimated by pumper (see the attached map provided by the pumper). The vertical depth is highly estimated as no excavation was completed as part of the spill cleanup.

Soil/Geology Description:

Water well location and depth to groundwater information taken from the Colorado DWR Well Permit Research Map Viewer. Well data is only for registered wells and has not been field verified. Depth to Groundwater is taken from the 1968 Water Well Filing for the nearest registered well. Soils information provided below was taken from NRCS Web Soil Survey. The soils are expected to be sandy loam and silt loam. Based on the information provided by the NRCS Web Soil Survey, the typical profile is 0-6" - sandy loam, 6-35 inches - sandy clay loam, 35-80 inches - sandy loam.

Depth to Groundwater (feet BGS) 115 Number Water Wells within 1/2 mile radius: 0

If less than 1 mile, distance in feet to nearest	Water Well	3250	None <input type="checkbox"/>	Surface Water	1500	None <input type="checkbox"/>
	Wetlands		None <input checked="" type="checkbox"/>	Springs		None <input checked="" type="checkbox"/>
	Livestock	3300	None <input type="checkbox"/>	Occupied Building	1900	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

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:

A produced water analysis is included.

Two photos of the spill are included.

A map of the spill area that was provided by the pumper is attached.

Per the approved Form 19, Wesco will collect four soil samples for analysis of pH, EC, SAR and Boron. Three of the samples will be collected within the spill area as shown on the attached map. The fourth sample will be a background sample collected within the berm, but outside of the spill area as indicated on the attached map. All of the soil samples will be collected from a depth of 0 - 4 inches below ground surface. The samples will be collected the week of February 8th - 12th.

The results of the analysis will be submitted to the COGCC via a form 19s.

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

Signed: _____ Print Name: Dave Weinert

Title: HSE Coordinator Date: 02/03/2021 Email: davew@kirkwoodcompanies.com

COA Type

Description

<u>COA Type</u>	<u>Description</u>

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
402590214	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402590390	ANALYTICAL RESULTS
402590391	OTHER
402590891	OTHER
402591095	FORM 19 SUBMITTED

Total Attach: 5 Files

General Comments

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

Total: 0 comment(s)