

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:

402601356

Date Received:

02/17/2021

Spill report taken by:

Arauzo, Steven

Spill/Release Point ID:

479377

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 17TH STREET SUITE #1400</u>		Phone: <u>(970) 9019007</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Matt Kasten</u>		Mobile: <u>(970) 9019007</u>
		Email: <u>mkasten@laramie-energy.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402599319

Initial Report Date: 02/14/2021 Date of Discovery: 02/11/2021 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR SWNE SEC 24 TWP 9S RNG 94W MERIDIAN 6

Latitude: 39.264722 Longitude: -107.831136

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

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No 450791

Spill/Release Point Name: 24-06A Tank Battery 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): 0 Estimated Condensate Spill Volume(bbl): 0

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

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: Cold/Snow

Surface Owner: FEE Other(Specify): Ben Nichols

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 lease operator inspections, a release was identified from a tank failure. The wells were shut in and recovery contractors notified to immediately begin removing all free fluids. 24-06A has a spray in lined secondary containment and no fluids migrated from outside containment. Stormwater and release produced fluids will be recovered and put back into the system. The failed tank will be inspected and root cause will be supplied in supplemental form 19. After successful recovery efforts, a supplemental Form 19 will be submitted with supporting documents and closure will be requested.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
2/13/2021	COGCC	Alex Fisher	-	Email
2/13/2021	COGCC	Steven Arauza	-	Email
2/13/2021	Land Owner	Ben Nichols	970-9860447	Phone
2/14/2021	GJ City/Fire	Brandi Mannuppella	-	email: brandim@ci.grandjct.co.us
2/14/2021	Mesa County	Jeff Hoffman	-	email: Jeff.Hofman@mesacounty.us

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:	02/17/2021		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown	
OIL	0	0	<input type="checkbox"/>	
CONDENSATE	0	0	<input type="checkbox"/>	
PRODUCED WATER	70	80	<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: 10 extra bbl of recovery was stormwater within lined containment				
Was spill/release completely contained within berms or secondary containment?		YES	Was an Emergency Pit constructed? NO	
<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 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):		0	Width of Impact (feet): 0	
Depth of Impact (feet BGS):		0	Depth of Impact (inches BGS):	
How was extent determined?				
All free fluids remained within lined secondary containment				

Soil/Geology Description:

NA

Depth to Groundwater (feet BGS) 40

Number Water Wells within 1/2 mile radius: 1

If less than 1 mile, distance in feet to nearest

Water Well 1927 None

Surface Water 1920 None

Wetlands _____ None

Springs _____ None

Livestock _____ None

Occupied Building 4280 None

Additional Spill Details Not Provided Above:

Released fluids were recovered via vac truck and put back into system.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 02/17/2021

Root Cause of Spill/Release Corrosion

Other (specify) _____

Type of Equipment at Point of Spill/Release: Other

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

Tank

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

Corrosion was identified approximately 1' up on sidewall of tank. See attached photo

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

Laramie is looking into adding anodes into tanks to introduce cathodic protection. This tank was removed and replaced. A pilot test with dye in some tanks is taking place to see if stormwater within lined containment will present a color change before corrosion gets worse.

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:

Laramie is requesting closure/NFA of SPILL 479377Nichols 24-06A lined containment was cleaned immediately upon discovery. All fluids recovered were put back into the system.

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

Signed: _____ Print Name: Matt Kasten

Title: Project Manager Date: 02/17/2021 Email: mkasten@laramie-energy.com

COA Type

Description

	Based on review of information presented it appears that no further action 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

402601356	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402601365	OTHER
402601369	OTHER
402601572	FORM 19 SUBMITTED

Total Attach: 4 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)