

# 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:

402641183

Date Received:

03/27/2021

Spill report taken by:

Araza, Steven

Spill/Release Point ID:

479657

## 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>GRAND RIVER GATHERING LLC</u>	Operator No: <u>10403</u>	<b>Phone Numbers</b>  Phone: <u>( )</u> Mobile: <u>(701) 3391720</u> Email: <u>HAROLD.RHODES@SUMMITMIDSTREAM.COM</u>
Address: <u>999 18TH STREET #3400S</u>		
City: <u>DENVER</u>	State: <u>CO</u> Zip: <u>80202</u>	
Contact Person: <u>HAROLD RHODES</u>		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402632888

Initial Report Date: 03/18/2021 Date of Discovery: 03/17/2021 Spill Type: Recent Spill

#### Spill/Release Point Location:

QTRQTR nesw SEC 7 TWP 7S RNG 92W MERIDIAN 6

Latitude: 39.454340 Longitude: -107.701600

Municipality (if within municipal boundaries): \_\_\_\_\_ County: GARFIELD

#### Reference Location:

Facility Type: GAS GATHERING  
PIPELINE SYSTEM

☐ Facility/Location ID No. \_\_\_\_\_

Spill/Release Point Name: P7E ACCESS ROAD  
INTERSECTION

☐ 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): >=5 and <100

Estimated Other E&P Waste Spill Volume(bbl): >=5 and <100

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: Estimate Produced Water volume is 9.11bbbls

#### Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): \_\_\_\_\_

Weather Condition: 48 degrees

Surface Owner: OTHER (SPECIFY)

Other(Specify): KRK Ltd

#### 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):

Release was identified during ROW inspection performed by operations. Operations immediately shut in effect pipeline segment. Spill response personnel were immediately dispatched to site. Liquid and surface impact recovery underway.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
3/17/2021	land owner	KRK Ltd	970-618 0371	Land Owner Notification completed
3/17/2021	Garfield Emergency Mngt	Sherrifs Office	970-945 0453	NA

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: 03/27/2021		
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	9	9	<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 &amp; floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
<b>A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit</b>			
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): 40		Width of Impact (feet): 24	
Depth of Impact (feet BGS): 22		Depth of Impact (inches BGS): _____	
How was extent determined?			
EXTENT OF IMPACTS ARE INITIALLY IDENTIFIED UTILIZING; PHOTOIONIZATION DETECTION (VOC-BENZENE), SOIL CONDUCTIVITY, SOIL PASTE TITRATION (HACH QUANTABS-CI). FOLLOWING FIELD PARAMETER VERIFICATION CONFIRMATION LABORATORY ANALYSES WILL BE RECOVERED. DELINEATION OF IMPACTS PER TABLE 915-1, NEARBY BACKGROUND SAMPLES WILL BE RECOVERED, LAB ANALYSES DELINEATING HORIZONTAL AND VERTICAL IMPACT WILL BE INCLUDED IN SUPPLEMENTAL FORM 19 OR INITIAL FORM 27. SAMPLING SHALL BE IN COMPLIANCE WITH 915.e.2			
Soil/Geology Description:			
PARENT MATERIAL IS MIXED ALLUVIUM DERIVED FROM BASALT CONSISTENT WITH ILDEFONSO STONY LOAM IDENTIFIED BY NRCS SOIL SURVEY. THE OPEN POUR SPACE AND BONY NATURE OF BACKGROUND SOIL HAVE CONTRIBUTED TO IMPACTED VOLUME.			

Depth to Groundwater (feet BGS) 135 Number Water Wells within 1/2 mile radius: 4  
If less than 1 mile, distance in feet to nearest Water Well 879 None ☐ Surface Water 1354 None ☐  
Wetlands 1354 None ☐ Springs        None ☒  
Livestock        None ☒ Occupied Building 863 None ☐

Additional Spill Details Not Provided Above:

DEPTH TO GROUNDWATER PER DWR WELL COMPLETION. WEST MAMM (1354') AND MIDDLE MAMM (3266') ARE WITHIN 1 MILE. UN DRAINAGE 80' S, UN DRAINAGE 340'SSE, UN DRAINAGE 1583' NW, UN DRAINAGE 2897' NW. > 500 CUYD TRANSFERRED TO GREENLEAF DISPOSAL AS OF 3/26/2021. AREA OF IMPACT IS LARGELY GAS VAPOR SATURATION IN BONY ALLUVIAL SOILS.

## CORRECTIVE ACTIONS

#1 Supplemental Report Date: 03/27/2021

Root Cause of Spill/Release Corrosion

Other (specify)       

Type of Equipment at Point of Spill/Release: Gathering Line

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

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

ROOT CAUSE ANALYSIS IN PROGRESS. INITIAL INDICATIONS APPEAR CONSISTENT WITH INTERNAL CORROSION. ROOT CAUSE ANALYSES WILL BE COMPLETED PER 912.d.3

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

ROOT CAUSE ANALYSIS UNDERWAY

Volume of Soil Excavated (cubic yards): 500

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:

### CPW NOTIFICATION

Message was left at Glenwood Spring Office at 970-947-2920 at 1:53  
Followup call will be placed on 1/29/2021

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

Signed:        Print Name: HAROLD RHODES

Title: Env. Rem. Manager Date: 03/27/2021 Email: HAROLD.RHODES@SUMMITMIDSTREA  
M.COM

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

### Attachment List

<u>Att Doc Num</u>	<u>Name</u>
402641183	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402641184	SITE MAP
402641185	TOPOGRAPHIC MAP
402641186	OTHER
402641741	FORM 19 SUBMITTED

Total Attach: 5 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Environmental	Comply with COAs listed on doc #402632888.	03/29/2021

Total: 1 comment(s)