

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:

402652654

Date Received:

04/08/2021

Spill report taken by:

Arauz, Steven

Spill/Release Point ID:

479806

## SPILL/RELEASE REPORT (INITIAL)

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: CAERUS PICEANCE LLC	Operator No: 10456	<b>Phone Numbers</b> Phone: (970) 778-2314 Mobile: (970) 778-2314 Email: jjanicek@caerusoilandgas.com
Address: 1001 17TH STREET #1600		
City: DENVER	State: CO Zip: 80202	
Contact Person: Jake Janicek		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402652654

Initial Report Date: 04/08/2021 Date of Discovery: 04/05/2021 Spill Type: Recent Spill

#### Spill/Release Point Location:

QTRQTR SENW SEC 23 TWP 5S RNG 96W MERIDIAN 6

Latitude: 39.601650 Longitude: -108.140369

Municipality (if within municipal boundaries): County: GARFIELD

#### Reference Location:

Facility Type: OTHER ☒ Facility/Location ID No 335667  
Spill/Release Point Name: F23-596 (14A-23) Flowline 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): 0 Estimated Condensate Spill Volume(bbl): >=1 and <5

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): >=1 and <5

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: Clear 70

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):

A release from the flowline associated with the 14A-23 well was discovered through routine production trending.

List Agencies and Other Parties Notified:

### OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
4/5/2021	Landowner - Caerus	Jake Janicek	-	Internal email sent to all pertinent Caerus personnel
4/5/2021	COGCC	Steven Arauza	-	no response at time of reporting
4/5/2021	Garfield County	Kirby Wynn	-	confirmed receipt of email
4/5/2021	BLM	Wesley Toews	-	confirmed receipt of email
4/5/2021	CPW	Taylor Elm	-	no response at time of reporting

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 ☐

### OPERATOR COMMENTS:

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

Signed: \_\_\_\_\_ Print Name: Jake Janicek  
Title: EHS Specialist Date: 04/08/2021 Email: jjanicek@caerusoilandgas.com

## Condition of Approval

<u>COA Type</u>	<u>Description</u>
	Within 90 days of spill discovery date, Operator shall comply with Spill/Release closure requirements outlined in Rule 912.b.(6).
	Submit photo documentation, as described in Rule 912.b.(4).B, via a Supplemental eForm 19.
	Operator shall collect sample(s) from comparable, nearby non-impacted native soil for purposes of establishing background soil conditions including pH, electrical conductivity (EC) and sodium adsorption ratio (SAR), per Rule 915.e.(2).D.
	Delineate horizontal and vertical extent of impacted area using the Table 915-1 Protection of Groundwater Soil Screening Level Concentrations and remediate impacts to Table 915-1 standards. Provide documentation in either a Supplemental eForm 19 if cleaned up immediately and/or Initial eForm 27 if additional site investigation and remediation is required OR if groundwater is encountered during cleanup operations. Documentation must include a figure showing spill area with sample locations plus laboratory results.
	In the Supplemental eForm 19, identify the root cause of the failure and explain how reoccurrence on this flowline and the other flowlines associated with this pad will be prevented, per Rule 912.d.(3). Operator shall coordinate with COGCC Western Integrity Inspector, Richard Murray, regarding flowline excavation, assessment, and repair.
	Assess nature and extent of contamination with confirmation soil samples. The operator shall comply with Rule 915.e.(2) for collection of soil samples. The operator shall notify the COGCC and comply with Rule 915.e.(3) if groundwater is encountered during cleanup operations.
	Additional information required by Rule 912.b.(4) shall be submitted on a supplemental spill report no later than ten days after discovery (reported Discovery Date: 4/5/2021).
7 COAs	

## Attachment List

<u>Att Doc Num</u>	<u>Name</u>
402652654	SPILL/RELEASE REPORT(INITIAL)
402655269	FORM 19 SUBMITTED

Total Attach: 2 Files

## General Comments

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

Total: 0 comment(s)