

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:

402659847

Date Received:

04/15/2021

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

479484

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: KP KAUFFMAN COMPANY INC	Operator No: 46290	Phone Numbers Phone: (303) 8254822 Mobile: () Email: jrickard@kpk.com
Address: 1675 BROADWAY, STE 2800		
City: DENVER	State: CO Zip: 80202	
Contact Person: Jeff Rickard		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402607886

Initial Report Date: 02/23/2021 Date of Discovery: 02/22/2021 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NENE SEC 34 TWP 2N RNG 68W MERIDIAN 6

Latitude: 40.100834 Longitude: -104.982908

Municipality (if within municipal boundaries): Frederick County: WELD

Reference Location:

Facility Type: OFF-LOCATION
FLOWLINE

☒ Facility/Location ID No 318500

Spill/Release Point Name: Woolley#1

☐ 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): >=1 and <5

Estimated Condensate Spill Volume(bbl): 0

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: 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):

On 2/22/2021 a third party excavator not associated with KPK was performing utility removal work and struck the off-location flowline. The excavation company notified KPK and the valves to the flowlines were immediately shut off as soon as KPK staff arrived.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
2/22/2021	Weld County/LEPC	Weld County OEM	-	Weld County OPM was notified.
2/22/2021	Surface Owner	Town Of Frederick	-	Town of Frederick is surface owner, notified via OPM

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 ☐

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:

KPK is requesting closure of Spill #479484. No groundwater was encountered in the removal of the impacted soil. The removal of the impacted soil has been completed and confirmed by discrete sample results. The excavation was over excavated for utility removal and flowline repair as noted in the sample location figure. Flowline repair was confirmed by a pressure test (attached).

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

Signed: _____ Print Name: Jeff Rickard

Title: Regulatory Date: 04/15/2021 Email: jrickard@kpk.com

COA Type

Description

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Attachment List

Att Doc Num	Name
402659851	ANALYTICAL RESULTS
402659852	ANALYTICAL RESULTS
402659853	SOIL SAMPLE LOCATION MAP
402659854	OTHER
402659855	DISPOSAL MANIFEST
402659871	PHOTO DOCUMENTATION

Total Attach: 6 Files

General Comments

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

Total: 0 comment(s)