

State of Colorado
Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402785100

Date Received:

08/25/2021

Spill report taken by:

YOUNG, ROB

Spill/Release Point ID:

480165

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 912.b. for reporting requirements of spills or releases of E&P Waste, produced Fluids, or unauthorized Releases of natural gas. Submit a Site Investigation and Remediation Workplan (Form 27) if Rule 913.c. applies.

OPERATOR INFORMATION

| | | |
|---|---------------------------|---------------------------------|
| Name of Operator: <u>CITATION OIL & GAS CORP</u> | Operator No: <u>17180</u> | Phone Numbers |
| Address: <u>14077 CUTTEN RD</u> | | Phone: <u>(281) 8911550</u> |
| City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77069</u> | | Mobile: <u>(713) 7027534</u> |
| Contact Person: <u>Bob Redweik</u> | | Email: <u>BRedweik@COGC.com</u> |

Transfer of Operatorship: Pursuant to Rule 912.f, this Supplemental Form 19 is being submitted to designate the Buying Operator as the responsible Operator for this Spill and Release.

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402717135

Initial Report Date: 06/14/2021 Date of Discovery: 06/11/2021 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NENW SEC 7 TWP 9N RNG 52W MERIDIAN 6

Latitude: 40.774699 Longitude: -103.221102

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

Enter Lat./long measurement of the actual Spill/Release Point. Lat./Long. Data shall meet standards of Rule 216.

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No 443427
 Spill/Release Point Name: Dubois Tank Battery Well API No. (Only if the reference facility is well) 05- -
 No Existing Facility or Location ID No.

Estimated Total Spill Volume: use same ranges as others for values

| | |
|--|---|
| Estimated Oil Spill Volume(bbl): <u>>=5 and <100</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>>=100</u> |
| Estimated Other E&P Waste Spill Volume(bbl): <u>0</u> | Estimated Drilling Fluid Spill Volume(bbl): <u>0</u> |

Specify: _____

Has the subject Spill/Release been controlled at the time of reporting? Yes

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): Grazing
 Weather Condition: 70F, sunny and dry
 Surface Owner: FEE Other(Specify): Norma Dickinson

Describe what is known about the spill/release event (what happened -- including how it was stopped, contained, and recovered):

The check valve on the injection pump failed, allowing fluids to bypass the pump and re-enter the produced water storage tanks. The facility's callout system failed and no high-level alarm notifications were made to the operator. The produced water tanks overflowed into oil storage tanks. Once all facility liquid storage was utilized, all tanks overflowed and total of 168 barrels (BBLs) of fluid were released. 154 BBLs of produced water and six (6) BBLs of oil were held within containment. Four (4) BBLs of produced water and four (4) BBLs of oil overtopped the containment and flowed off of the location to the southwest. Upon discovery, the tank battery and all associated wells were shut-in to stop production. A vactruck was used to remove all free liquids; 158 BBLs of produced water and ten (10) BBLs of oil were recovered.

List of Agencies and Other Parties Notified Pursuant to Rule 912.b.(7)-(11):

OTHER NOTIFICATIONS

| <u>Date</u> | <u>Agency/Party</u> | <u>Contact</u> | <u>Phone</u> | <u>Response</u> |
|-------------|--------------------------|-----------------|--------------|----------------------------------|
| 6/11/2021 | COGCC | Robert Young | 303-252-0126 | Left voicemail |
| 6/11/2021 | Citation Oil & Gas Corp. | Lee Laneheart | 281-891-1464 | |
| 6/11/2021 | COGCC | Kym Schure | 970-520-3832 | Left voicemail |
| 6/11/2021 | Landowner | Norma Dickinson | 970-580-1547 | |
| 6/14/2021 | Logan County | Jerry Casebolt | 970-520-0991 | Requested copy of Form 19 Report |
| 6/14/2021 | CPW-Brush, CO Office | Larry Conger | 970-768-7831 | Requested copy of Form 19 Report |

REPORT CRITERIA

Rule 912.b.(1) Report to the Director (select all criteria that apply):

No Rule 912.b.(1).A: A Spill or Release of any size that impacts or threatens to impact any Waters of the State, Public Water System, residence or occupied structure, livestock, wildlife, or publicly-maintained road.

Waters of the State: _____ Public Water System: _____
 Residence or Occupied Structure: _____ Livestock: _____
 Wildlife: _____ Publicly-Maintained Road: _____

Yes Rule 912.b.(1).B: A Spill or Release in which 1 barrel or more of E&P Waste or produced fluids is spilled or released outside of berms or other secondary containment.

Yes Rule 912.b.(1).C: A Spill or Release of 5 barrels or more of E&P Waste or produced Fluids regardless of whether the Spill or Release is completely contained within berms or other secondary containment.

No Rule 912.b.(1).D: Within 6 hours of discovery, a Grade 1 Gas Leak. For a Grade 1 Gas Leak from a Flowline, the Operator also must submit the Form 19 – Initial, document number on a Form 44, Flowline Report, for the Grade 1 Gas Leak

Enter the approximate time of discovery _____ (HH:MM)
 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? _____
 Enter the Document Number of the Initial Accident Report, Form 22 _____
 Was there damage during excavation? _____
 Was CO 811 notified prior to excavation? _____

No Rule 912.b.(1).E: The discovery of 10 cubic yards or more of impacted material resulting from a current or historic Spill or Release. Discovery and reporting will not be contingent upon confirmation samples demonstrating exceedance of Table 915-1 standards.

Estimated Volume of Impacted Solids (cu. yd.): _____

No Rule 912.b.(1).F: The discovery of impacted Waters of the State, including Groundwater. Discovery and reporting will not be contingent upon confirmation samples demonstrating exceedance of Table 915-1 standards. The presence of free product or hydrocarbon sheen on Groundwater or surface water is reportable. The presence of contaminated soil in contact with Groundwater or surface water is reportable. Check all that apply:

The presence of free product or hydrocarbon sheen Surface Water

The presence of free product or hydrocarbon sheen on Groundwater

The presence of contaminated soil in contact with Groundwater

The presence of contaminated soil in contact with Surface water

No Rule 912.b.(1).G: A suspected or actual Spill or Release of any volume where the volume cannot be immediately determined, including a spill or release of any volume that daylight from the subsurface.

No Rule 912.b.(1).H: Spill or Release resulting in vaporized hydrocarbon mists that leave the Oil and Gas Location or Off-Location Flowline right of way from an Oil and Gas Location and impacts or threatens to impact off-location property.

Areas offsite of Oil & Gas Location Off-Location Flowline right of way

No Rule 912.b.(1).I: A Release of natural gas that results in an accumulation of soil gas or gas seeps.

No Rule 912.b.(1).J: A Release that results in natural gas in Groundwater.

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, check all that apply)

Horizontal and Vertical extents of impacts have been delineated.

Documentation of compliance with Table 915-1 is attached.

All E&P Waste has been properly treated or disposed.

Work proceeding under an approved Form 27 (Rule 912.c).

Form 27 Remediation Project No: _____

SUSPECTED Spill/Release did not occur or was below Rule 912.a.(5) reporting thresholds.

OPERATOR COMMENTS:

Please see the attached incident investigation and soil sampling report.

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

Signed: _____ Print Name: Randolph Moses

Title: Agent Date: 08/25/2021 Email: randolph.moses@absarokasolutions.com

| COA Type | Description |
|----------|-------------|
| | |

Attachment List

| Att Doc Num | Name |
|-------------|-------|
| 402791600 | OTHER |

Total Attach: 1 Files

General Comments

| User Group | Comment | Comment Date |
|------------|---------|---------------------|
| | | Stamp Upon Approval |

Total: 0 comment(s)