

# State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
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Document Number:

401664030

Date Received:

06/05/2018

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

455336

## 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: <u>TEP ROCKY MOUNTAIN LLC</u>	Operator No: <u>96850</u>	<b>Phone Numbers</b>
Address: <u>PO BOX 370</u>		Phone: <u>(970) 263-2760</u>
City: <u>PARACHUTE</u>	State: <u>CO</u>	Mobile: <u>(970) 623-4875</u>
Zip: <u>81635</u>		Email: <u>mgardner@terraep.com</u>
Contact Person: <u>Michael Gardner</u>		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401664030

Initial Report Date: 06/05/2018 Date of Discovery: 06/04/2018 Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESW SEC 29 TWP 6s RNG 95w MERIDIAN 6

Latitude: 39.489747 Longitude: -108.023362

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

#### Reference Location:

Facility Type: WELL PAD

☒ Facility/Location ID No 335238

Spill/Release Point Name: \_\_\_\_\_ ☐ No Existing Facility or Location ID No.

Number: \_\_\_\_\_ ☐ Well API No. (Only if the reference facility is well) 05- -

#### 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): 0

Estimated Other E&P Waste Spill Volume(bbl): 0

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: ~ 4.0 bbls condensate

#### Land Use:

Current Land Use: NON-CROP LAND

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

Weather Condition: Clear, hot, breezy

Surface Owner: FEDERAL

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):

Corroded thermo-well on a low-pressure separator failed resulting in the release of approximately 4 bbls of condensate at the location. The release was confined to a small area immediately surrounding the low-pressure separator. Upon discovery, the separator was immediately shut in, and a hydro-vac truck was dispatched to the site to hydro-excavate as much of the impacted soil as possible. If the vac truck cannot sufficiently clean the impacted area, the separator will be moved and soils will be excavated using heavy equipment. Impacted soils will be taken to an approved off-site facility for disposal.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
6/5/2018	COGCC	Stan Spencer	970-987-2891	Initial Form 19
6/5/2018	BLM	Jim Byers	970-319-2532	Initial Form 19 and email
6/5/2018	GarCo	Kirby Wynn	970-987-2557	email
6/5/2018	GVFPD	David Blain	970-285-9119	

Was there a Grade 1 Gas Leak associated with this E & P waste spill or release? Yes ☐ No ☒

If YES, enter the Document Number of the Initial Grade 1 Gas Leak Report Form 44: \_\_\_\_\_

Was there a reportable accident associated with this E & P waste spill or release? Yes ☐ No ☒

If YES, enter the Document Number of the Initial Accident Report, Form 22: \_\_\_\_\_

**OPERATOR COMMENTS:**

No off-site impacts are expected. No surface or ground water sources nearby. Impacts limited to area immediately around separator.

Please route to Stan Spencer for review.

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

Signed: \_\_\_\_\_ Print Name: Michael Gardner

Title: TEP Environmental Date: 06/05/2018 Email: mgardner@terraep.com

**Condition of Approval**

**COA Type** **Description**

0 COA	

**Attachment List**

**Att Doc Num** **Name**

401664030	SPILL/RELEASE REPORT(INITIAL)
401665596	FORM 19 SUBMITTED

Total Attach: 2 Files

**General Comments**

User Group	Comment	Comment Date
Environmental	Assess nature and extent of contamination with confirmation soil samples. Remediate to Table 910-1 standards and provide documentation in a either a Supplemental F-19 if cleaned up immediately and/or F-27 if extended remediation such as landfarming contaminated soil is required. Landfarming must also be approved by surface owner. Documentation must include a figure showing spill area with sample locations plus laboratory results.	06/06/2018

Total: 1 comment(s)