

State of Colorado Oil and Gas Conservation Commission

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Document Number:

403188203

Date Received:

11/09/2022

Spill report taken by:

Spill/Release Point ID:

483043

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: FUNDARE RESOURCES OPERATING COMPANY LLC	Operator No: 10773	Phone Numbers
Address: 5251 DTC PKWY STE 950		Phone: (303) 910-4511
City: GREENWOOD VILLAGE	State: CO	Zip: 80111
Contact Person: Sydney Smith		Mobile: ()
		Email: ssmith@fundareresources.com

☐ 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# 403177095

Initial Report Date: 09/25/2022 Date of Discovery: 09/24/2022 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NENW SEC 4 TWP 9N RNG 59W MERIDIAN 6

Latitude: 40.785820 Longitude: -103.985890

Municipality (if within municipal boundaries): N/A County: WELD

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

Reference Location:

Facility Type: WELL SITE

☐ Facility/Location ID No

Spill/Release Point Name: Wildhorse 04-0424H

☒ Well API No. (Only if the reference facility is well) 05-123-34896☐ No Existing Facility or Location ID No.

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

Estimated Oil Spill Volume(bbl): >0 and <1

Estimated Condensate Spill Volume(bbl): 0

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:

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

Land Use:

Current Land Use: OTHER

Other(Specify): Well Site

Weather Condition: Clear 82 degrees

Surface Owner: FEE

Other(Specify):

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

Less than a bbl of oil released out the flare due to an upset condition. The release left the pad and caused a small fire approximately 10ftx10ft. The fire was immediately extinguished and no equipment or personnel were harmed. Clean up has commenced.

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>
9/25/2022	Surface Owner	Timbro Ranch	-	Pending
9/25/2022	CPW	Brandon Marrett	-	Pending
9/25/2022	Weld County	Jason Maxey	-	Submitted

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: n/a Public Water System: n/a
- Residence or Occupied Structure: n/a Livestock: n/a
- Wildlife: n/a Publicly-Maintained Road: n/a
- No 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.
- No 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? No
- 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 daylights from the subsurface.
Yes	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.
	<input checked="" type="checkbox"/> Areas offsite of Oil & Gas Location <input type="checkbox"/> 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.

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 10/05/2022		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	1	1	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	0	<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 & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit			
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): <u>10</u>		Width of Impact (feet): <u>10</u>	
Depth of Impact (feet BGS): <u>0</u>		Depth of Impact (inches BGS): <u>1</u>	
How was extent determined?			
Extent was determined by visual inspection.			
Soil/Geology Description:			
11 - Badland, 27 - Epping silt loam, 31 - Kim Mitchell complex			
Depth to Groundwater (feet BGS) <u>114</u>		Number Water Wells within 1/2 mile radius: <u>0</u>	
If less than 1 mile, distance in feet to nearest	Water Well <u>4600</u> None <input type="checkbox"/>	Surface Water <u>425</u> None <input type="checkbox"/>	
	Wetlands <u>0</u> None <input type="checkbox"/>	Springs <u>0</u> None <input type="checkbox"/>	
	Livestock <u>0</u> None <input type="checkbox"/>	Occupied Building <u>0</u> None <input type="checkbox"/>	
Additional Spill Details Not Provided Above:			
The cause of the spill was determined to be due to an upset condition on the pad.			

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 10/05/2022

Root Cause of Spill/Release Equipment Failure

Other (specify)

Type of Equipment at Point of Spill/Release: Flare

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

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

The cause of the spill was determined to be due to an upset condition on the pad that resulted in pressure building up in the line and causing a release to escape through the top of the flare. The fire that occurred as a result was extinguished naturally prior to discovery.

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

Volume of Soil Excavated (cubic yards): 0

Disposition of Excavated Soil (attach documentation) ☐ Offsite Disposal ☐ Onsite Treatment ☒ Other (specify) None

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, 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:

Upon further communication and confirmation of the fire that occurred as a result of the release was determined to be extinguished without the use of extinguishers and prior to crew arriving on site. It was determined to be a fire due to the burnt grass surrounding the area. Picture documentation is attached for reference. The Form 22 Doc #403192681. Weld County, the CPW and surface owners were all notified on 9.25.2022 following the discovery of the incident. The exact time the fire/spill occurred is unknown as it was discovered once it had extinguished its self.

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

Signed: _____ Print Name: Sydney Smith

Title: Director EHSR Date: 11/09/2022 Email: ssmith@fundareresources.com

COA Type**Description**

0 COA	

Attachment List**Att Doc Num****Name**

403192663	PHOTO DOCUMENTATION
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Total Attach: 1 Files

General Comments**User Group****Comment****Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)