

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:

403178115

Date Received:

09/26/2022

Spill report taken by:

Graber, Candice
(Nikki)

Spill/Release Point ID:

482927

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>KP KAUFFMAN COMPANY INC</u>	Operator No: <u>46290</u>	Phone Numbers Phone: <u>(303) 8254822</u> Mobile: <u>(720) 4342215</u> Email: <u>rgorka@kpk.com</u>
Address: <u>1700 LINCOLN ST STE 4550</u>		
City: <u>DENVER</u>	State: <u>CO</u> Zip: <u>80203</u>	
Contact Person: <u>Ray Gorka</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# 403169700

Initial Report Date: 09/17/2022 Date of Discovery: 09/16/2022 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWSW SEC 34 TWP 2N RNG 67W MERIDIAN 6Latitude: 40.093320 Longitude: -104.886290Municipality (if within municipal boundaries): Ft. Lupton 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: OFF-LOCATION FLOWLINE☒ Facility/Location ID No 478843Spill/Release Point Name: Pete Montoya B1-#2☐ 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): >0 and <1Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): >0 and <1Estimated Other E&P Waste Spill Volume(bbl): 0Estimated 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: CROP LAND

Other(Specify): _____

Weather Condition: Sunny warmSurface Owner: FEE

Other(Specify): _____

Ft. Lupton FD responded to a call of a leak; KPK responded and shut in the wells, lines associated with the release. KPK notified all appropriate Parties, including the Surface Owner and coordinated field efforts to determine the cause and the impact. Field personnel found oil stained soil at 40.09332 / -104.88629. A berm was built around the exposed hole in the ground and a temporary orange construction fence put up around it to prevent un-authorized entry to excavation. Field personnel took a soil sample at the point of release and a background sample. The samples were sent to Summit labs; no results yet. KPK removed stain soil manifest is attached. At present, KPK's initial determination is the steel consolidation line corroded on the bottom, but the investigation is still on-going. A review of the DWR database represents groundwater is greater than 10'. Form will not allow add of additional parties notified: Surface owner Western Midstream was notified on 9/19/22.

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
9/17/2022	Weld County	Jason Maxey	303-857-6694	oged@weldgov.com
9/17/2022	Weld Co.		-	564 report
9/17/2022	Local Government Designee	Todd Hodges	303-857-6694	email
9/16/2022	COGCC	Mike Leonard	719-3430130	notification of incident

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

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: Threatened to Impair

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.
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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? _____

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:
	<input type="checkbox"/> The presence of free product or hydrocarbon sheen Surface Water <input type="checkbox"/> The presence of free product or hydrocarbon sheen on Groundwater <input type="checkbox"/> The presence of contaminated soil in contact with Groundwater <input type="checkbox"/> The presence of contaminated soil in contact with Surface water
Yes	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.
	<input 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: 09/26/2022		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL			<input checked="" 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>YES</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>12</u>	
		Width of Impact (feet): <u>12</u>	
Depth of Impact (feet BGS): <u>3</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
Currently the extent is undetermined. The initial field measurements have been included, additional assessment is on-going.			
Soil/Geology Description:			
Silty/Sand			
Depth to Groundwater (feet BGS) <u>12</u>		Number Water Wells within 1/2 mile radius: <u>44</u>	
If less than 1 mile, distance in feet to nearest	Water Well <u>1670</u>	None <input type="checkbox"/>	Surface Water _____ None <input checked="" type="checkbox"/>
	Wetlands _____	None <input checked="" type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>
	Livestock _____	None <input checked="" type="checkbox"/>	Occupied Building _____ None <input checked="" type="checkbox"/>
Additional Spill Details Not Provided Above:			

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:

Attached is all the information I have on the Pete Montoya spill. Please let me know what I missed. Thank you

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

Signed: _____ Print Name: Ray Gorka
 Title: Env. Mngr. Date: 09/26/2022 Email: rgorka@kpk.com

<u>COA Type</u>	<u>Description</u>
	In accordance with 913.d.(1) Operator will investigate impacts to soil, Groundwater, and surface water as soon as the impacts are discovered.
	Operator shall collect confirmation soil samples as described in the Rule 915.e.(2) Guidance Document. Operator will analyze soil samples for TPH (C6-C36), Table 915-1 Organic Compounds in Soil, Table 915-1 metals, and Table 915-1 Soil Suitability for Reclamation (Electrical conductivity, Sodium adsorption ratio, and pH by saturated paste method, boron (hot water soluble)).
	Pursuant to Rule 912.b.(6) Operator is required to submit a Form 19 Supplemental Report for the associated spill within 90 days of the spill date requesting closure pursuant to Rule 913.h and supported by adequate documentation to demonstrate that the Spill or Release has been fully cleaned up and complies with Table 915-1; or A Form 27 if any of the criteria listed in Rules 912.b.(6).B.i-iii apply. If Remediation will continue under an approved Form 27, the Operator will also submit a Form 19 – Supplemental which requests closure of the Spill or Release and includes the Remediation project number assigned by the Director.
	Per COA on Doc [#403169700] On the next Form 19 subsequent operator is to provide the root cause of the incident and preventative measures that will be taken to prevent reoccurrence on this and other flowlines at this location. Please give the location of the failure (i.e. 6 O'clock position) and if the root cause is corrosion explain if it is external or internal. Note: this information has not been provided.
	Spill/Release Detail Report indicates oil only spill however the Initial Spill reports indicates oil and produced water. Operator shall clarify this discrepancy on the next Form 19.
5 COAs	

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
403178115	SPILL/RELEASE REPORT(SUPPLEMENTAL)
403178132	DISPOSAL MANIFEST
403178531	PHOTO DOCUMENTATION
403178534	TOPOGRAPHIC MAP
403244410	FORM 19 SUBMITTED

Total Attach: 5 Files

General Comments

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

Total: 0 comment(s)