

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:

403301609

Date Received:

01/25/2023

Spill report taken by:

Spill/Release Point ID:

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 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>D90 ENERGY LLC</u>	Operator No: <u>10706</u>	Phone Numbers
Address: <u>952 ECHO LANE SUITE 480</u>		Phone: <u>(970) 896-5665</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77024</u>		Mobile: <u>()</u>
Contact Person: <u>Rikki Ross</u>		Email: <u>rikki.ross@fulcrumeo.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 403301609

Initial Report Date: 01/25/2023 Date of Discovery: 01/24/2023 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NENW SEC 32 TWP 8N RNG 80W MERIDIAN 6

Latitude: 40.627697 Longitude: -106.397825

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

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 436007
 Spill/Release Point Name: Valve to storage tank 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>0</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: 150 bbl

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

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____
 Weather Condition: 18 degrees, Overcast
 Surface Owner: FEE Other(Specify): _____

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

At approximately 1:30 PM, pumper found the line broken at the inlet to the water tank. The valve at the inlet of the water tank failed due to freeze. It's estimated that all 120 bbls produced water plus yesterday's production of 30 bbls produced water spilled within the tank's lined containment area. A truck was called to capture as much spilled water as possible, although the water is mostly frozen. Spill has been contained and valve has been replaced.

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

Data not required

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: _____

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.

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 daylights 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.

OPERATOR COMMENTS:

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

Signed: _____ Print Name: Rikki Ross

Title: EHS Field Advisor Date: 01/25/2023 Email: rikki.ross@fulcrumeo.com

COA Type	Description
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0 COA	

Attachment List

Att Doc Num	Name
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Total Attach: 0 Files

General Comments

User Group	Comment	Comment Date
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		Stamp Upon Approval
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Total: 0 comment(s)