

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

403340564

Date Received:

03/08/2023

Spill report taken by:

Kosola, Jason

Spill/Release Point ID:

483534

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>MULL DRILLING COMPANY INC</u>	Operator No: <u>61250</u>	Phone Numbers
Address: <u>1700 N WATERFRONT PKWY B#1200</u>		Phone: <u>(316) 2646366</u>
City: <u>WICHITA</u> State: <u>KS</u> Zip: <u>67206-6637</u>		Mobile: <u>(316) 3649203</u>
Contact Person: <u>James Beilman James Beilman</u>		Email: <u>JBeilman@mulldrilling.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# 403271190

Initial Report Date: 12/24/2022 Date of Discovery: 12/23/2022 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR SWSW SEC 24 TWP 13S RNG 43W MERIDIAN 6

Latitude: 38.901984 Longitude: -102.183673

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

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

Reference Location:

Facility Type: OIL AND GAS LOCATION Facility/Location ID No 440267

Spill/Release Point Name: NWAU #1 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 <1 Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): >=5 and <100

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): All on Existing Lease

Weather Condition: Snow and Cold weather

Surface Owner: FEE Other(Specify): _____

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

A flowline located in/adjacent to existing tank battery froze and released approximately 10-15 bbls of produced water/oil onto existing lease and or lease road.
 The release was stopped shortly after it occurred. All existing, assumed impacted soils will be segregated onsite via excavation for disposal to county landfill because of relatively low chloride levels at location. The assumption of disposal method will be confirmed with prior analytical. All excavated areas will be refilled with new soils and gravels from an exterior location.

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

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
12/24/2022	COGCC	Jason Kosola	17-719.641.0291	Message

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

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.
	<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: <u>03/08/2023</u>		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	<u>1</u>	<u>1</u>	<input type="checkbox"/>
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>
PRODUCED WATER	<u>15</u>	<u>15</u>	<input type="checkbox"/>
DRILLING FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
FLOW BACK FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
OTHER E&P WASTE	<u>0</u>	<u>0</u>	<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>13</u>		Width of Impact (feet): <u>13</u>	
Depth of Impact (feet BGS): <u>3</u>		Depth of Impact (inches BGS): <u>36</u>	
How was extent determined?			
Assumed Impacted due to Saturation; are currently taking subsequent sampling to verify complete capture, nature of any remaining impacts.			
Soil/Geology Description:			
<u>Silty Clay</u>			
Depth to Groundwater (feet BGS) <u>50</u>		Number Water Wells within 1/2 mile radius: <u>0</u>	
If less than 1 mile, distance in feet to nearest		Water Well _____ None <input checked="" type="checkbox"/>	Surface Water <u>3534</u> None <input 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:			
Please Look to attached supplemental report for details of spill with figure and current activities.			

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 03/08/2023

Root Cause of Spill/Release Pipe, Weld, or Joint Failure

Other (specify)

Type of Equipment at Point of Spill/Release: Gathering Line

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

Empty text box for specifying other equipment details.

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

Pipe froze due to extreme temperature.

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

Proper Burial depth and maintenance of line. See attached Report for graphical representations of spill area/magnitude.

Volume of Soil Excavated (cubic yards): 3

Disposition of Excavated Soil (attach documentation) [X] Offsite Disposal [] Onsite Treatment [] Other (specify)

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:

Empty text box for operator comments.

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

Signed: Print Name: James Beilman

Title: Director, Safety & Env. Date: 03/08/2023 Email: JBeilman@mulldrilling.com

Table with 2 columns: COA Type, Description. Row 1: 0 COA

Attachment List

Att Doc Num

Name

403340598

OTHER

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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

Total: 0 comment(s)