

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:

403414059

Date Received:

05/26/2023

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

484501

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: SCOUT ENERGY MANAGEMENT LLC	Operator No: 10779	Phone Numbers
Address: 13800 MONTFORT DRIVE SUITE 100		Phone: (970) 675-3869
City: DALLAS	State: TX	Mobile: (970) 620-1580
Zip: 75240		Email: Mike.Sanford@scoutep.com
Contact Person: Mike Sanford		

☐ 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# 403406451

Initial Report Date: 05/18/2023 Date of Discovery: 05/18/2023 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR SW,NW SEC 23 TWP 2N RNG 103W MERIDIAN 6

Latitude: 40.130695 Longitude: -108.930682

Municipality (if within municipal boundaries): County: RIO BLANCO

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

Reference Location:

Facility Type: FLOWLINE SYSTEM

☐ Facility/Location ID No

Spill/Release Point Name: A.C. McLaughlin 8 flowline

☐ 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: NON-CROP LAND

Other(Specify):

Weather Condition: Clear, cool 55 degrees

Surface Owner: FEDERAL

Other(Specify):

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

At Approximately 7:05 AM, the lease operator spotted a produced water leak on the flowline riser for A.C. Mcl 8. Line was immediately shut in. Spill was contained on location within the berm. All standing water will be pulled and spill path will be water washed with clean fresh water from main water plant. All proper notifications have been made.

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>
5/18/2023	CPW	Garret Smith	-	Sent E-mail
5/18/2023	Rio Blanco County	Edward Smircena	-	Sent E-mail
5/18/2023	COGCC	Kris Neidel	970-846-5097	Left voicemail 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: _____ 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.
	<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: 05/25/2023		
----	--------------------------------------	--	--

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER		7	<input type="checkbox"/>
DRILLING FLUID	0	0	<input type="checkbox"/>
FLOW BACK FLUID	0	0	<input type="checkbox"/>
OTHER E&P WASTE	140	170	<input type="checkbox"/>

specify: Fresh water from main water plant used to water wash spill path plus standing rainwater on location.

Was spill/release completely contained within berms or secondary containment? YES Was an Emergency Pit constructed? NO

*Secondary containment, **including walls & floor regardless of construction material**, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.*

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) ☒ Soil ☐ Groundwater ☐ Surface Water ☐ Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): 15 Width of Impact (feet): 54

Depth of Impact (feet BGS): 4 Depth of Impact (inches BGS): 0

How was extent determined?

All distances above were obtained from the COGCC online GIS system. Depth of impact (line failure) was approximately 4 feet below grade.

Soil/Geology Description:

High Clay

Depth to Groundwater (feet BGS) 4468 Number Water Wells within 1/2 mile radius: 0

If less than 1 mile, distance in feet to nearest

Water Well	<u> </u>	None <input checked="" type="checkbox"/>	Surface Water	<u> </u>	None <input checked="" type="checkbox"/>
Wetlands	<u> </u>	None <input checked="" type="checkbox"/>	Springs	<u> </u>	None <input checked="" type="checkbox"/>
Livestock	<u> </u>	None <input checked="" type="checkbox"/>	Occupied Building	<u> </u>	None <input checked="" type="checkbox"/>

Additional Spill Details Not Provided Above:

Additional soil samples will also be taken along spill path and areas. Spill was contained on location, all liquids were removed with a vac-truck. Area was water washed with fresh, clean water from the main water plant. In fluids spilled Actual oil amount spilled was .19bbls, actual oil recovered .19bbls.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 05/25/2023

Root Cause of Spill/Release Corrosion

Other (specify)

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

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

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

External corrosion on 4"coated flowline riser causing a small leak that was contained on location.

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

Riser spool was replaced with a 4 inch stainless steel riser spool piece that was pressure tested.

Volume of Soil Excavated (cubic yards): 0

Disposition of Excavated Soil (attach documentation) ☐ 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:

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

Signed: Print Name: Mike Sanford

Title: HSE coordinator Date: 05/26/2023 Email: Mike.Sanford@scoutep.com

COA Type	Description
0 COA	

Attachment List

Att Doc Num **Name**

--	--

Total Attach: 0 Files

General Comments

User Group **Comment**

Comment Date

		Stamp Upon Approval
--	--	------------------------

Total: 0 comment(s)