

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:

403430459

Date Received:

06/14/2023

Spill report taken by:

Araza, Steven

Spill/Release Point ID:

483471

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>CAERUS PICEANCE LLC</u>	Operator No: <u>10456</u>	Phone Numbers
Address: <u>1001 17TH STREET #1600</u>		Phone: <u>(970) 285-2925</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>		Mobile: <u>(970) 640-6919</u>
Contact Person: <u>Blair Rollins</u>		Email: <u>brollins@caerusoilandgas.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# 403263316

Initial Report Date: 12/16/2022 Date of Discovery: 12/15/2022 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWNW SEC 20 TWP 6S RNG 96W MERIDIAN 6

Latitude: 39.513903 Longitude: -108.138574

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

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

Reference Location:

Facility Type: PIPELINE Facility/Location ID No 335161
 Spill/Release Point Name: D20 Gas Lateral 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>0</u>
Estimated Other E&P Waste Spill Volume(bbl): <u>0</u>	Estimated Drilling Fluid Spill Volume(bbl): <u>0</u>

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: Cloudy and snowing
 Surface Owner: FEE Other(Specify): Chevron

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

The LDAR team was conducting FLIR inspections on the well pad when they identified gas leaking near the separator. The gas was leaking from the gas pipeline lateral between the separator and pig launcher on location. The wells were shut in to control the incident.

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

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
12/16/2022	CPW	Taylor Elm	970-986-9767	
12/16/2022	Garfield County	Kirby Wynn	970-987-2557	
12/15/2022	COGCC	Steven Arauca	720-498-5298	
12/15/2022	Landowner	Land Department	-	

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.

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? _____
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: <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
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
Yes	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.

CORRECTIVE ACTIONS

#1	Supplemental Report Date: <u>06/14/2023</u>
Root Cause of Spill/Release	<u>Corrosion</u> Other (specify) _____
Type of Equipment at Point of Spill/Release:	<u>Process Piping</u>
If "Other" selected above, specify or describe here:	<div style="border: 1px solid black; height: 30px; width: 100%;"></div>
Describe Incident & Root Cause (include specific equipment and point of failure)	<div style="border: 1px solid black; padding: 5px;">The incident was due to internal corrosion of the pipe.</div>
Describe measures taken to prevent the problem(s) from reoccurring:	<div style="border: 1px solid black; padding: 5px;">Caerus is in the process of determining which measures will be used to prevent the problem from reoccurring.</div>
Volume of Soil Excavated (cubic yards):	<u>2500</u>
Disposition of Excavated Soil (attach documentation)	<input checked="" type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment <input type="checkbox"/> Other (specify) _____
Volume of Impacted Ground Water Removed (bbls):	<u>0</u>
Volume of Impacted Surface Water Removed (bbls):	<u>0</u>

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: 29498
 - SUSPECTED Spill/Release did not occur or was below Rule 912.a.(5) reporting thresholds.

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: Blair Rollins
Title: EHS Specialist Date: 06/14/2023 Email: brollins@caerusoilandgas.com

<u>COA Type</u>	<u>Description</u>
0 COA	

0 COA	
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Attachment List

<u>Att Doc Num</u>	<u>Name</u>
403432991	PHOTO DOCUMENTATION

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)