

State of Colorado  
Energy & Carbon Management Commission



1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:

403666692

Date Received:

01/25/2024

**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.

Spill report taken by:

Araza, Steven

Spill/Release Point ID:

485873

**OPERATOR INFORMATION**

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

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# 403655080

Initial Report Date: 01/15/2024 Date of Discovery: 01/15/2024 Spill Type: Recent Spill

**Spill/Release Point Location:**

QTRQTR NESE SEC 25 TWP 5S RNG 96W MERIDIAN 6

Latitude: 39.583413 Longitude: -108.110642

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: OIL AND GAS LOCATION  Facility/Location ID No 335651  
 Spill/Release Point Name: WF09B-25 I25A tank leak  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	Estimated Condensate Spill Volume(bbl): >=5 and <100
Estimated Flow Back Fluid Spill Volume(bbl): 0	Estimated Produced Water Spill Volume(bbl): 0
Estimated Other E&P Waste Spill Volume(bbl): 0	Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: The operator noticed a tank was leaking into the secondary containment. The tank was isolated and the leak was contained.

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  
 Surface Owner: FEE Other(Specify):

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

The operator noticed a tank leaking into the secondary containment. The tank was isolated and the leak was contained in the secondary containment.

**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>
	BLM	Alex Provstgaard	970-3662565	email
	BLM	Vanessa Caranese	303-3784994	email
1/15/2024	Garfield County Liason	Kirby Wynn	970-6255905	email
1/15/2024	CPW	Taylor Elm	970-9869767	email
1/15/2024	COGCC	Steven Arauza	720-4985298	email

**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.): \_\_\_\_\_



## CORRECTIVE ACTIONS

#1 Supplemental Report Date: 01/25/2024

Root Cause of Spill/Release Corrosion

Other (specify)

Type of Equipment at Point of Spill/Release: Other

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

Condensate tank

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

Internal corrosion

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

The tank will be cleaned and assessed for internal corrosion conditions. To prevent reoccurrence the tank will be either internally coated or taken out of service to prevent reoccurrence of the incident.

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: Blair Rollins

Title: EHS Specialist Date: 01/25/2024 Email: brollins@caerusoilandgas.com

**COA Type****Description**

0 COA	

**Attachment List****Att Doc Num****Name**

403666841	AERIAL IMAGE
403666843	TOPOGRAPHIC MAP

Total Attach: 2 Files

**General Comments****User Group****Comment****Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)