

State of Colorado
Energy & Carbon Management Commission



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Document Number:

403709158

Date Received:

03/06/2024

SPILL/RELEASE REPORT (SUPPLEMENTAL)

This form is to be submitted by the party responsible for the oil and gas spill or release. Refer to ECMC 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:

Waggoner, Kyle

Spill/Release Point ID:

484182

OPERATOR INFORMATION

Name of Operator: <u>PADCO LLC</u>	Operator No: <u>24500</u>	Phone Numbers
Address: <u>16508 ARMINTA STREET</u>		Phone: <u>(918) 6309912</u>
City: <u>VAN NUYS</u>	State: <u>CA</u> Zip: <u>91406</u>	Mobile: <u>(918) 6309912</u>
Contact Person: <u>Dan Richmond</u>		Email: <u>dan@dsrinc.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# 403353422

Initial Report Date: 03/22/2023 Date of Discovery: 03/22/2023 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR nnnw SEC 25 TWP 1n RNG 54w MERIDIAN 6

Latitude: 40.029230 Longitude: -103.374920

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

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

Check this box if this spill/release is related to a loss of integrity of a flowline, pipeline, crude oil transfer line, or produced water transfer line.

Reference Location:

Facility Type: WELL Facility/Location ID No _____
 Spill/Release Point Name: Venrick 1A Well API No. (Only if the reference facility is well) 05-121-08071
 No Existing Facility or Location ID No.

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): <u>>=1 and <5</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>>=5 and <100</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: CROP LAND Other(Specify): _____
 Weather Condition: overcast, dry
 Surface Owner: FEE Other(Specify): _____

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

Gate valve at ground level of flowline froze and cracked; fluids from flowline back-flowed from the header at the tank battery; flow was stopped, valve was replaced. Vac truck recovered 20 bbls of fluid from around the well; backhoe has been called to recover contaminated soil, stockpile and contain for disposal; soil samples will be evaluated as soon as possible.

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>
3/22/2023	Washington County designee	Halley Thompson	-	
3/22/2023	surface owner	Micky Venrick	-	
3/22/2023	COGCC	Susan Sherman	719-775-1111	

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

Yes	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>03/06/2024</u>		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	<u>3</u>	<u>2</u>	<input type="checkbox"/>
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>
PRODUCED WATER	<u>25</u>	<u>18</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>190</u>		Width of Impact (feet): <u>60</u>	
Depth of Impact (feet BGS): <u>0</u>		Depth of Impact (inches BGS): <u>4</u>	
How was extent determined?			
Measured			
Soil/Geology Description:			
sandy/silt			
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 <u>3350</u> None <input type="checkbox"/>	Surface Water _____ None <input checked="" type="checkbox"/>
		Wetlands _____ None <input checked="" type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>
		Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building <u>3350</u> None <input type="checkbox"/>
Additional Spill Details Not Provided Above:			

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 03/06/2024

Root Cause of Spill/Release Other

Other (specify) Freezing weather

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

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

[Empty box for specifying details]

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

Gate valve at ground level of flowline froze and cracked; fluids from flowline back-flowed from the header at the tank battery; flow was stopped, valve was replaced.

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

Replaced the valve with a new one. Manifold valve at the tank battery is being closed when the well is not producing.

Volume of Soil Excavated (cubic yards): 230

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: [X] Corrective Actions Completed (documentation attached, check all that apply)

[X] Horizontal and Vertical extents of impacts have been delineated.

[X] Documentation of compliance with Table 915-1 is attached.

[X] 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 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: Ty J Smith

Title: Consultant Date: 03/06/2024 Email: tysmith@lesair.com

COA Type

Description

0 COA	
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Attachment List

Att Doc Num	Name
403709159	AERIAL IMAGE
403709160	SOIL SAMPLE LOCATION MAP
403709162	PHOTO DOCUMENTATION
403709163	DISPOSAL MANIFEST
403709164	SOIL SAMPLE LOCATION MAP
403709165	ANALYTICAL RESULTS
403709166	ANALYTICAL RESULTS
403709167	CORRESPONDENCE

Total Attach: 8 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)