

State of Colorado
Energy & Carbon Management Commission

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Document Number:

403705409

Date Received:

03/22/2024

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

484688

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.

OPERATOR INFORMATION

Name of Operator: <u>PETROSHARE CORPORATION</u>	Operator No: <u>10454</u>	Phone Numbers
Address: <u>9635 MAROON CIRCLE #400</u>		Phone: <u>(303) 894-2100</u>
City: <u>ENGLEWOOD</u> State: <u>CO</u> Zip: <u>80112</u>		Mobile: <u>(303) 905-5341</u>
Contact Person: <u>James Hix - East OWP EPS</u>		Email: <u>james.hix@state.co.us</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# 403409374

Initial Report Date: 05/22/2023 Date of Discovery: 05/19/2023 Spill Type: Historical Release

Spill/Release Point Location:

QTRQTR NESW SEC 23 TWP 1S RNG 65W MERIDIAN 6

Latitude: 39.948731 Longitude: -104.631912

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

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: FLOWLINE SYSTEM Facility/Location ID No 477958

Spill/Release Point Name: Dump line 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>Unknown</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>Unknown</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: Sunny to partly cloudy, Temp 50s F

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 historic spill/release (Spill/Release Point #484688) was discovered on the dump line from the separator to the tank battery.

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

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
5/19/2023	Adams County Oil and Gas	Greg Dean	720-523-6891	Email Message/Voice Mail
5/19/2023	Surface Owner	Carol Unruh	303-659-0137	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: _____

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.

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:

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>03/22/2024</u>		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	_____	0	<input checked="" type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	_____	0	<input checked="" type="checkbox"/>
DRILLING FLUID	0	0	<input type="checkbox"/>
FLOW BACK FLUID	0	0	<input type="checkbox"/>
OTHER E&P WASTE	0	0	<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>30</u>		Width of Impact (feet): <u>15</u>	
Depth of Impact (feet BGS): <u>4</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
Impacted soils were observed at the west separator during facility decommissioning. Analytical results indicated that concentrations of total petroleum hydrocarbons (TPH) were above 500 mg/kg in the dump line soil sample, Sample ID #DLE2-4 at 4 ft bgs, and in west separator soil sample, Sample ID #WSEP-1 at 1 ft bgs. Additional site investigation is needed to define the lateral and vertical extent of impacts.			
Soil/Geology Description:			
Soil: Loamy alluvial land (Map Unit Symbol: Lu); Geology: Quaternary age Modern Alluvium (Map Symbol: Qa)			
Depth to Groundwater (feet BGS) <u>27</u>		Number Water Wells within 1/2 mile radius: <u>2</u>	
If less than 1 mile, distance in feet to nearest		Water Well <u>315</u> None <input type="checkbox"/>	Surface Water <u>1140</u> None <input type="checkbox"/>
		Wetlands <u>1140</u> None <input type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>
		Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building <u>285</u> None <input type="checkbox"/>
Additional Spill Details Not Provided Above:			
Spill/Release Pt #484688 was at the west separator on the Unruh 13-23 (OWP) off-location flowline.			

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: 24572
 - SUSPECTED Spill/Release did not occur or was below Rule 912.a.(5) reporting thresholds.

OPERATOR COMMENTS:

The PETROSHARE CORPORATION - 10454 UPRR UNRUH #23-23 (OWP) oil and gas well (API #05-001-08340) (Location ID #320181) and UPRR-UNRUH-61S65W 23NESW (Location ID #477958) Central Tank Battery and off-location flowlines are in the ECMC Orphaned Well Program ("OWP"). This supplemental Form 19 requests closure for Spill/Release #484688 for a historical release on a dumpline from the separator to the tank battery. Soil sample DLE 2-4 collected at 4 ft bgs had total petroleum hydrocarbon (TPH) concentrations above 500 mg/kg and organic compounds above Table 915-1 soil screening levels. Site investigation and remediation will proceed under Remediation Project #24572.

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

Signed: _____ Print Name: James Hix
 Title: East OWP EPS Date: 03/22/2024 Email: james.hix@state.co.us

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

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
403705409	FORM 19 SUBMITTED
403705425	ANALYTICAL RESULTS

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)