

State of Colorado
Energy & Carbon Management Commission



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Document Number:

403800733

Date Received:

07/30/2024

Spill report taken by:

Arauzo, Steven

Spill/Release Point ID:

486544

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>CAERUS PICEANCE LLC</u>	Operator No: <u>10456</u>	Phone Numbers
Address: <u>1001 17TH STREET #1600</u>		Phone: <u>(970) 902-3598</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>		Mobile: <u>(970) 902-3598</u>
Contact Person: <u>Andrew Verbonitz</u>		Email: <u>averbonitz@caerusoila ndgas.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# 403773900

Initial Report Date: 04/30/2024 Date of Discovery: 04/30/2024 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWSW SEC 29 TWP 5S RNG 95W MERIDIAN 6

Latitude: 39.582928 Longitude: -108.085657

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.

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 SITE

Facility/Location ID No 335607

Spill/Release Point Name: L29

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): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): >=1 and <5

Estimated Other E&P Waste Spill Volume(bbl): 0

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: Underground flow line leak

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

Surface Owner: FEE

Other(Specify): _____

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

On April 30, 2024, the operator identified a leak in the flowline to the N. PARACHUTE #EF06D L29 595 wellhead (API: 05-045-11643) through trending data. The well was shut in, and proper notifications were completed.

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>
4/30/2024	Garfield County	Kirby Wynn	970-9872557	email
4/30/2024	CPW	Taylor Elm	970-9869767	email
4/30/2024	COGCC	Steven Arauca	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.

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>06/17/2024</u>		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	<u>0</u>	<u>0</u>	<input type="checkbox"/>
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>
PRODUCED WATER	<u>4</u>	<u>0</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 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>0</u>		Width of Impact (feet): <u>0</u>	
Depth of Impact (feet BGS): _____		Depth of Impact (inches BGS): _____	
How was extent determined?			
Soil samples were collected from the base and sidewalls of the remedial investigation excavation and from the excavation stockpile to characterize potential impacts associated with the release. See the attached Report of Work Completed (ROWC) for site investigation details.			
Soil/Geology Description:			
<u>Rock outcrop-Torriorthents complex, very steep</u>			
Depth to Groundwater (feet BGS) <u>15</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>160</u> None <input type="checkbox"/>	Surface Water <u>140</u> None <input type="checkbox"/>	
	Wetlands _____ None <input checked="" type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>	
	Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building _____ None <input checked="" type="checkbox"/>	
Additional Spill Details Not Provided Above:			
<u>The two referenced water monitoring wells have no construction records and may not exist.</u>			

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 06/17/2024

Root Cause of Spill/Release Corrosion

Other (specify)

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

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

Empty text box for specifying or describing the "Other" category.

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

On April 30, 2024, the operator identified a leak in the flowline to the N. PARACHUTE #EF06D L29 595 wellhead (API: 05-045-11643) through trending data and the well was promptly shut-in. Based on trending calculations, estimated release duration, produced liquid rate, hole size, and pressure data, it is estimated that approximately 3.5 bbls were released. The point of release was determined to be internal erosion/corrosion of the flowline at the second 90 from the wellhead in the 6 o'clock position.

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

The damaged portion of flowline has been replaced, and flowlines are pressure tested on a routine basis.

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):

Volume of Impacted Surface Water Removed (bbls):

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.

[] 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:

This form has been submitted to request closure of ECMC Spill/Release Point ID 486544. All constituents of concern are within ECMC Table 915-1 Residential Soil Screening Levels or proposed alternative allowable limits. See the attached ROWC for site investigation details, and in response to COA #1 on Form 19 Document 403773900, a photolog is attached.

Additionally, Spill/Release Point ID 485140 was a release that occurred at the L29 595 Pad on 9/22/2023. The circumstances of Spill/Release Point ID 485140 were identical to this current release in that the flowline leak occurred approximately 5' bgs, was caught quickly through trending and excavated immediately, and released less than 5 bbls of fluid. Spill/Release Point ID 485140 was approved for use of RSSLs in Supplemental Form 19 403594435 based on a minimum depth to groundwater evaluation of 35 bgs, and the more likely scenario of dtw being closer to 75' bgs. Those justifications are more inline with what Caerus estimates to be representative information regarding a depth to groundwater determination. Furthermore, the East Fork of Parachute Creek is a seasonal drainage feature and is often dry, and therefore cannot be used as an accurate elevation of surface water or groundwater.

Regarding hexavalent chromium data detections. The laboratory is unable to report MDL values for these samples as they were not set to report during the first run and the samples are now past hold time. Because the MDLs are not available, a Table 915-1 Footnote 9 reference is not applicable, however, future samples will be reported with MDL values.

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

Signed: _____ Print Name: Andrew Verbonitz

Title: EHS Rem. Specialist Date: 07/30/2024 Email: averbonitz@caerusoilandgas.com

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

ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>
403871288	OTHER

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)