

State of Colorado

Energy & Carbon Management Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

403952491

Date Received:

10/15/2024

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

486151

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: WELLINGTON OPERATING COMPANY	Operator No: 95233	Phone Numbers
Address: 15301 DALLAS PKWY SUITE 900		Phone: (970) 402-0418
City: ADDISON	State: TX	Zip: 75001
Contact Person: Randy Evans		Mobile: (970) 402-0148
		Email: Revans@Wellingtonoperating.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# 403697198

Initial Report Date: 02/23/2024 Date of Discovery: 02/22/2024 Spill Type: Historical Release

Spill/Release Point Location:

QTRQTR SWNE SEC 7 TWP 9N RNG 68W MERIDIAN 6

Latitude: 40.763890 Longitude: -105.045310

Municipality (if within municipal boundaries): County: LARIMER

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 NoSpill/Release Point Name: WELLINGTON MUD
U/GAULT-PIATT #20-3☒ Well API No. (Only if the reference facility is well) 05-069-05168☐ No Existing Facility or Location ID No.

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

Estimated Oil Spill Volume(bbl): Unknown

Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): Unknown

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

Estimated Drilling Fluid Spill Volume(bbl): Unknown

Specify: It is unknown what actual materials may have caused this historic spill as this well has been inactive for a number of years.

Has the subject Spill/Release been controlled at the time of reporting? Yes

Land Use:

Current Land Use: CROP LAND Other(Specify):

Weather Condition: Partly clear, 45 F, Light Precipitat

Surface Owner: FEE Other(Specify):

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

Soil samples were collected during the cut and cap operation in April 2023. The excavation was backfilled to allow the field to be used for growing crops and in the fall pasturing cattle. The samples were analyzed and the TPH level at the well head exceeded the Table 915 limit. Plans to excavate further were made for the winter of 23/24 or spring 24 after the cattle were moved from the area.

Discolored/stained soils were discovered during excavating to remove soils that exceeded the TPH limit for Table 915 at the well head. The soil at the wellhead were excavated to a concrete basement floor and a sample was collected and submitted for analysis. This sample met all the limits of Table 915 with the exception of pH which may have been impacted by concrete dust generated by the excavators teeth scrapping the concrete prior to sampling.

The discolored soils are approved for disposal at the Pawnee Waste facility. Additional soil samples will be collected as necessary.

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

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
2/23/2024	Larimer County Health Dept.	Sydney McLeod	970-498-6700	Will email Matt Lafferty, does not see this as a health risk at this time.
2/22/2024	Surface Owner	Dave Erickson	760-801-4291	Complete remediation or at least backfilling as soon as possible to allow crops to be planted.

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? _____

Yes 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.): _____ 300

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
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.

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:

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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: Randy Evans
 Title: Wastewater Treatment ORC Date: 10/15/2024 Email: Revans@Wellingtonoperating.com

COA Type	Description
0 COA	

ATTACHMENT LIST

Att Doc Num	Name
403952712	CORRESPONDENCE
403952720	ANALYTICAL RESULTS
403952724	ANALYTICAL RESULTS
403952725	ANALYTICAL RESULTS
403952729	CORRESPONDENCE

403952739	MAP
403952744	PHOTO DOCUMENTATION

Total Attach: 7 Files

General Comments

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

Total: 0 comment(s)