

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

400646822

Date Received:

07/18/2014

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

437971

SPILL/RELEASE REPORT (SUPPLEMENTAL)

This form is to be submitted by the party responsible for the oil and gas spill or release. Any spill or release which may impact waters of the State must be reported as soon as practicable; any spill over 20 bbls must be reported within 24 hours and all spills over five bbls must be reported within ten days. Submit a Site Investigation and Remediation Workplan (Form 27) when requested by the Director.

OPERATOR INFORMATION

Name of Operator: <u>BONANZA CREEK ENERGY OPERATING COMPANY LLC</u>	Operator No: <u>8960</u>	Phone Numbers Phone: <u>(720) 225-6653</u> Mobile: <u>(303) 483-5486</u> Email: <u>bdodek@bonanzacrk.com</u>
Address: <u>410 17TH STREET SUITE #1400</u>		
City: <u>DENVER</u>	State: <u>CO</u> Zip: <u>80202</u>	
Contact Person: <u>Brian Dodek</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400639217

Initial Report Date: 07/03/2014 Date of Discovery: 07/02/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWNE SEC 28 TWP 5N RNG 63W MERIDIAN 6

Latitude: 40.373052 Longitude: -104.437189

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

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No 331413
 No Existing Facility or Location ID No.
 Well API No. (Only if the reference facility is well) 05-123-

Fluid(s) Spilled/Released (please answer Yes/No):

Was one (1) barrel or more spilled outside of berms or secondary containment? Yes

Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.

Were Five (5) barrels or more spilled? Yes

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

Estimated Oil Spill Volume(bbl): >=5 and <100 Estimated Condensate Spill Volume(bbl): 0

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: _____

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____

Weather Condition: 75 degrees, partly cloudy.

Surface Owner: STATE Other(Specify): _____

Check if impacted or threatened by spill/Release (please answer Yes/No to all that apply):

Waters of the State Residence/Occupied Structure Livestock Public Byway Surface Water Supply Area
 As defined in COGCC 100-Series Rules

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

A separator dumbline failed resulting in a release of oil, approximately 5 BBLs. The well was shut in, the liquids were removed by a vacuum truck and impacted soil is currently being excavated.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
7/2/2014	COGCC	Rick Allison	-On file	Notified via email
7/2/2014	CPW	Ryan Lane	-On file	Notified of release
7/3/2014	Weld County	Roy Rudisil	-On file	Notified via email
7/3/2014	State Land Board	Steve Freese	-On file	Notified of release

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 07/18/2014

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	<u>7</u>	<u>5</u>	<input type="checkbox"/>
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>
PRODUCED WATER	<u>0</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? NO Was an Emergency Pit constructed? NO

Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.

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) Soil Groundwater Surface Water Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): 109 Width of Impact (feet): 48

Depth of Impact (feet BGS): 6 Depth of Impact (inches BGS): _____

How was extent determined?

Excavation, field screening and laboratory analysis.

Soil/Geology Description:

See previous submittal.

Depth to Groundwater (feet BGS) 3 Number Water Wells within 1/2 mile radius: 5

If less than 1 mile, distance in feet to nearest

Water Well	<u>1570</u>	None <input type="checkbox"/>	Surface Water	<u>900</u>	None <input type="checkbox"/>
Wetlands	<u>900</u>	None <input type="checkbox"/>	Springs	_____	None <input checked="" type="checkbox"/>
Livestock	_____	None <input checked="" type="checkbox"/>	Occupied Building	<u>3025</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

Continuing with assessment and remediation activities.

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)

Work proceeding under an approved Form 27

Form 27 Remediation Project No: _____

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

Signed: _____ Print Name: Brian Dodek

Title: Environmental Specialist Date: 07/18/2014 Email: bdodek@bonanzacrk.com

COA Type

Description

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

Attachment Check List

Att Doc Num

Name

<u>Att Doc Num</u>	<u>Name</u>
400646822	FORM 19 SUBMITTED

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)