FORM 22 Rev 05/13

# State of Colorado
# Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

**Receive Date:** 08/15/2014

**Accident Tracking No.:** 400665718

## ACCIDENT REPORT

As required by Rule 602.b.

### CONTACT INFORMATION

☒ Initial Notice of Accident ☐ Subsequent Notice of Accident

OGCC Operator Number: 10071 Contact Name: Rusty Frishmuth

Name of Operator: BARRETT CORPORATION* BILL Phone: (303) 293-9100

Address: 1099 18TH ST STE 2300 Fax: (303) 291-0420

City: DENVER State: CO Zip: 80202 Email: rfrishmuth@billbarrettcorp.com

### DESCRIPTION OF ACCIDENT (Please be as specific as possible)

Date of Accident: 08/09/2014 Time of Accident: 6:30 PM

API Number: 05- Facility ID: 433753 Type of Facility: LOCATION

Well/Facility Name: Circle B Production Pad Well/Facility Num: 6-66-9

County: WELD

Location: QTRQTR: NENW Sec: 9 Twp: 6N Rng: 66W Meridian: 6

Lat: 40.508050 Long: -104.785300

Field Name: Eaton Field Number: 19350

### DESCRIPTION

Provide a detailed description of the accident, problems, and cause (equipment failure, human error, etc.): actions taken to provide well control in detail)::

On August 9, 2014 at approximately 6:30 PM Bill Barrett Corporation (BBC) was notified of a suspected lightning strike at our Circle B production facility located south of Weld County Road 72 between Weld County Roads 29 and 31. BBC was first notified by a neighbor who did not witness the strike but reported a loud noise coinciding with a flash. There were several storms and documented lightning strikes in the vicinity the evening of the 9th. BBC's lease operator responded to the location. Upon his arrival the Eaton Fire Department was already on scene in response to a 911 call also placed by the neighbor who witness smoke and fire.

### OTHER NOTIFICATIONS

List the parties and agencies notified (LDG, County, BLM EPA, DOT, Local Emergency Planning Coordinator or others)

| Date | Agency | Contact | Response |
|---|---|---|---|
| 08/10/2014 | Weld County OEM | On File | |

### OPERATOR COMMENTS and SUBMITTAL

This form must be signed by an authorized agent of the entity making assertion.

I certify under penalty of perjury that this report has been examined by me and to the best of my knowledge is true, correct and complete.

Print Name: Dustin Watt Email: dwatt@billbarrettcorp.com

Signature: Title: EHS Specialist Date: 08/15/2014

**CONDITIONS OF APPROVAL, IF ANY:**

| COA Type | Description |
|---|---|
| | |

## General Comments

| User Group | Comment | Comment Date |
|---|---|---|
| | | |

Total: 0 comment(s)

## Attachment Check List

| Att Doc Num | Name |
|---|---|
| | |

Total Attach: 0 Files