

State of Colorado Oil and Gas Conservation Commission

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Document Number:

400722891

Date Received:

11/03/2014

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

439476

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>BARRETT CORPORATION* BILL</u>	Operator No: <u>10071</u>	Phone Numbers
Address: <u>1099 18TH ST STE 2300</u>		Phone: <u>(303) 293-9100</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Rusty Frishmuth</u>		Mobile: <u>()</u>
		Email: <u>rfrishmuth@billbarrettcorp.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400716319

Initial Report Date: 10/24/2014 Date of Discovery: 10/21/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 24 TWP 6N RNG 62W MERIDIAN 6

Latitude: 40.479255 Longitude: -104.278916

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

Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 422838

☐ No Existing Facility or Location ID No.

☐ Well API No. (Only if the reference facility is well) 05- -

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? No

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

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

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: Clear, breeze to SW, 70's

Surface Owner: FEE 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):

At approximately 2:15 pm on 10/21/14, a lease operator was on location gauging tanks. He shut-in production to one tank without diverting oil into another production tank. Oil backed up in the vapor recovery tower (VRT) downstream of the separator. A pressure relief valve activated and a mist of oil was released from the top of the tower. Approximately 1bbl of oil was released across the location and onto some vegetation west and south of the pad. A supervisor arrived on location when the oil release was reported and opened a valve allowing oil to flow from the VRT to another production tank. Impacted surface soils will be scraped and properly disposed of at the Waste Management facility located in Ault, Colorado. Soil samples will be collected by a third party consultant to verify compliance with COGCC Table 910 after cleanup is completed and any additional details will be provided in a supplemental report to this Form 19.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
10/22/2014	Weld Co OEM	Roy Rudisill	-	via e-mail
10/22/2014	Landowner	On File	-	via telephone

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 11/03/2014		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	1	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	0	<input 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): 150		Width of Impact (feet): 120	
Depth of Impact (feet BGS): 0		Depth of Impact (inches BGS): 1	
How was extent determined?			
Visual observation			
Soil/Geology Description:			
Vona loam			
Depth to Groundwater (feet BGS) 60		Number Water Wells within 1/2 mile radius: 3	
If less than 1 mile, distance in feet to nearest		Water Well 1300 None <input type="checkbox"/>	Surface Water 660 None <input type="checkbox"/>
		Wetlands 660 None <input type="checkbox"/>	Springs 660 None <input type="checkbox"/>
		Livestock 0 None <input type="checkbox"/>	Occupied Building 1380 None <input type="checkbox"/>
Additional Spill Details Not Provided Above:			

None

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 11/03/2014

Cause of Spill (Check all that apply) ☒ Human Error ☐ Equipment Failure ☐ Historical-Unknown
☐ Other (specify) _____

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

At approximately 2:15 pm on 10/21/14, a lease operator was on location gauging tanks. He shut-in production to one tank without diverting oil into another production tank. Oil backed up in the vapor recovery tower (VRT) downstream of the separator. A pressure relief valve activated and a mist of oil was released from the top of the tower. Approximately 1bbl of oil was released across the location and onto some vegetation west and south of the pad. Employee lost focus and failed to follow standard operating procedures.

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

Reiterate standard procedures for shifting production between production tanks at next lease operator meeting. The employee in question recieved disciplinary action.

Volume of Soil Excavated (cubic yards): 30

Disposition of Excavated Soil (attach documentation) ☒ Offsite Disposal ☐ Onsite Treatment
☐ Other (specify) _____

Volume of Impacted Ground Water Removed (bbls): 0

Volume of Impacted Surface Water Removed (bbls): 0

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: Rusty Frishmuth

Title: Env Mgr Date: 11/03/2014 Email: rfrishmuth@billbarrettcorp.com

Attachment Check List

Att Doc Num

Name

400722892	TOPOGRAPHIC MAP
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)