

State of Colorado  
Oil and Gas Conservation Commission

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Document Number:

400784255

Date Received:

01/30/2015

Spill report taken by:

LUJAN, CARLOS

Spill/Release Point ID:

440715

## 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>URSA OPERATING COMPANY LLC</u>	Operator No: <u>10447</u>	<b>Phone Numbers</b>
Address: <u>602 SAWYER STREET #710</u>		Phone: <u>(970) 6259922</u>
City: <u>HOUSTON</u>	State: <u>TX</u>	Mobile: <u>(970) 4563335</u>
Zip: <u>77007</u>		Email: <u>dknudson@ursaresources.com</u>
Contact Person: <u>Dwayne Knudson</u>		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400779577

Initial Report Date: 01/24/2015 Date of Discovery: 01/23/2015 Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENE SEC 13 TWP 6S RNG 92W MERIDIAN 6

Latitude: 39.531054 Longitude: -107.608143

Municipality (if within municipal boundaries): \_\_\_\_\_ County: GARFIELD

#### Reference Location:

Facility Type: WELL PAD ☒ Facility/Location ID No 416722  
☐ 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? No

*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): 0 Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): >=5 and <100

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

Specify: 40 bbls

#### Land Use:

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

Weather Condition: Overcast, cold, snow & ice present

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):

A hole developed on the bottom of a frac tank during flowback operations and allowed liquids to be released within secondary containment on location. A quarter size hole present on the bottom of the tank from what appears to be from corrosion was the cause of the release. The release was discovered when crews noticed liquids present around the front and rear berms of the secondary containment. After the liquids were identified, operations were stopped and hydro vac trucks were dispatched to remove all free liquids within the containment, as well as the remaining liquids within the tank. All free standing liquids were removed from within the secondary containment. The underlying soils will be evaluated for impacts and possible remediation once operations are completed and the tanks are removed. The tank with the hole was removed from service and will either be replaced or repaired.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
1/23/2015	Landowner		-	Withheld to protect identity
1/24/2015	LEPC	Kirby Wynn	970-250-2200	Non-emergency e-mail submitted
1/24/2015	Local Fire Chief	Chad Harris	970-624-1243	Non-emergency e-mail submitted
1/24/2015	COGCC	Carlos Lujan	970-625-2497	Voice mail and e-mail

**SPILL/RELEASE DETAIL REPORTS**

#1	Supplemental Report Date: 01/30/2015			
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown	
OIL	0	0	<input type="checkbox"/>	
CONDENSATE	0	0	<input type="checkbox"/>	
PRODUCED WATER	40	40	<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>YES</u> Was an Emergency Pit constructed? <u>NO</u>				
<i>Secondary containment, <b>including walls &amp; floor regardless of construction material</b>, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>				
<b>A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit</b>				
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): <u>50</u>	Width of Impact (feet): <u>40</u>	
Depth of Impact (feet BGS): <u>0</u>		Depth of Impact (inches BGS): <u>2</u>		
How was extent determined?				
Extent of impacts were determined by visual observations and GIS trimming.				
Soil/Geology Description:				
Potts Loam, 3 to 6 percent slope				
Depth to Groundwater (feet BGS) <u>45</u>		Number Water Wells within 1/2 mile radius: <u>13</u>		
If less than 1 mile, distance in feet to nearest		Water Well <u>203</u> None <input type="checkbox"/>	Surface Water <u>1880</u> None <input type="checkbox"/>	
		Wetlands <u>0</u> None <input type="checkbox"/>	Springs <u>0</u> None <input type="checkbox"/>	
		Livestock <u>1225</u> None <input type="checkbox"/>	Occupied Building <u>1225</u> None <input type="checkbox"/>	
Additional Spill Details Not Provided Above:				

Spill occurred on the north side of the well pad, where ~6-8 inches of snow was present between the back of the frac tanks and the edge of the berm, thus inflating the volume. Any additional impacts to the soils under the tank system will be evaluated when flowback operations are completed and the tanks have been removed and the soils have been allowed to dry.

## CORRECTIVE ACTIONS

#1	Supplemental Report Date: 01/30/2015
Cause of Spill (Check all that apply) <input type="checkbox"/> Human Error <input checked="" type="checkbox"/> Equipment Failure <input type="checkbox"/> Historical-Unknown	
<input type="checkbox"/> Other (specify) _____	
Describe Incident & Root Cause (include specific equipment and point of failure)	
A quarter size hole had corroded away on the bottom of the frac tank, allow the liquids to drain out onto the pad and mix with snow present.	
Describe measures taken to prevent the problem(s) from reoccurring:	
Contractors owning the tanks will be performing more frequent and thorough inspections on the tanks and the integrity of them. Routine inspections will be complete prior to placement on-site, as well as after placed into service.	
Volume of Soil Excavated (cubic yards): _____	
Disposition of Excavated Soil (attach documentation) <input type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment	
<input checked="" type="checkbox"/> Other (specify) TBD	
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: Kris Rowe

Title: Waste & Spills PM Date: 01/30/2015 Email: krowe@hrlcomp.com

## Attachment Check List

Att Doc Num	Name
400784275	TOPOGRAPHIC MAP

Total Attach: 1 Files

## General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)