

**State of Colorado**  
**Oil and Gas Conservation Commission**

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



Document Number:

400801876

Date Received:

03/02/2015

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

440980

## SPILL/RELEASE REPORT (INITIAL)

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>PDC ENERGY INC</u>	Operator No: <u>69175</u>	<b>Phone Numbers</b>
Address: <u>1775 SHERMAN STREET - STE 3000</u>		Phone: <u>(303) 831-3971</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80203</u>
Contact Person: <u>Brandon Brun</u>		Mobile: <u>( )</u>
		Email: <u>brandon.brun@pdce.com</u>

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400801876

Initial Report Date: 03/02/2015      Date of Discovery: 03/01/2015      Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWSW SEC 15 TWP 7N RNG 66W MERIDIAN 6Latitude: 40.574650 Longitude: -104.772590Municipality (if within municipal boundaries): \_\_\_\_\_ County: WELD

#### Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 430033☐ 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): 0Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): >=5 and <100Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0Specify: Spill volume estimated to be 5.5 barrels

#### **Land Use:**

Current Land Use: CROP LAND

Other(Specify): \_\_\_\_\_

Weather Condition: cloudy, 35 degreesSurface 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):

On March 1, 2015, a spill of produced water was discovered inside the tank containment at the Danielson 15G-HZ tank battery. It is estimated that approximately 5.5 barrels were released when a load line valve on one of the production tanks froze and cracked. Based on the cold weather and hard ground, the material appears to have only seeped into the ground approximately 1 to 2 inches. No surface water or groundwater was impacted as a result of this release and the release was contained within the steel berm. PDC has already initiated cleanup and recovery activities.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
3/2/2015	Landowner		-	talked to land owner
3/2/2015	Weld County	Roy Rudisill	-	email notification

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

Signed: \_\_\_\_\_ Print Name: Brandon Bruns  
Title: EHS Supervisor Date: 03/02/2015 Email: brandon.bruns@pdce.com

**COA Type**

**Description**

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**Attachment Check List**

**Att Doc Num**

**Name**

400801876	FORM 19 SUBMITTED
400801921	OTHER
400801922	TOPOGRAPHIC MAP

Total Attach: 3 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

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Total: 0 comment(s)