

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:

400821920

Date Received:

04/08/2015

Spill report taken by:

Spill/Release Point ID:

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>EE3 LLC</u>	Operator No: <u>10450</u>	Phone Numbers
Address: <u>4410 ARAPAHOE AVENUE #100</u>		Phone: <u>(303) 444-8881</u>
City: <u>BOULDER</u> State: <u>CO</u> Zip: <u>80303</u>		Mobile: <u>(303) 444-8881</u>
Contact Person: <u>Ruth Hartshorn</u>		Email: <u>rhartshorn@ee3llc.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400821920

Initial Report Date: 04/08/2015 Date of Discovery: 03/13/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENW SEC 32 TWP 8N RNG 80W MERIDIAN 6

Latitude: 40.627795 Longitude: -106.397892

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

Reference Location:

Facility Type: WELL Facility/Location ID No _____
 No Existing Facility or Location ID No.
 Well API No. (Only if the reference facility is well) 05-057-06523

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? No

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

Estimated Oil Spill Volume(bbl): <u>>0 and <1</u>	Estimated Condensate Spill Volume(bbl): <u>0</u>
Estimated Flow Back Fluid Spill Volume(bbl): <u>0</u>	Estimated Produced Water Spill Volume(bbl): <u>0</u>
Estimated Other E&P Waste Spill Volume(bbl): <u>0</u>	Estimated Drilling Fluid Spill Volume(bbl): <u>0</u>

Specify: _____

Land Use:

Current Land Use: OTHER Other(Specify): Well Pad
Weather Condition: Spill occurred inside a building
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 hose broke on the Grizzly #03-32H jet pump. Whilst the pump was shutting down less than one barrel of power fluid (oil) was released into the pumphouse. The pumphouse on the Grizzly #03-32H location is situated on a rubber mat ensuring that any fluid released was contained and did not penetrate the soil. Any free oil was picked up with a vacuum truck and transferred back through the production facilities on the location.

List Agencies and Other Parties Notified:

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

Signed: _____ Print Name: Ruth Hartshorn
Title: Admin Manager Date: 04/08/2015 Email: rhartshorn@ee3llc.com

Attachment Check List

Att Doc Num **Name**

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files

General Comments

User Group **Comment** **Comment Date**

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

Total: 0 comment(s)