

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:

400846435

Date Received:

06/01/2015

Spill report taken by:

Hughes, Jim

Spill/Release Point ID:

441759

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>QEP ENERGY COMPANY</u>	Operator No: <u>10343</u>	Phone Numbers
Address: <u>1050 17TH STREET - SUITE 800</u>		Phone: <u>(303) 260-1166</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(303) 917-3596</u>
Zip: <u>80265</u>		Email: <u>michelle.schuster@qepres.com</u>
Contact Person: <u>Michelle Schuster</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400836584

Initial Report Date: 05/06/2015 Date of Discovery: 05/06/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWNE SEC 26 TWP 37N RNG 19W MERIDIAN NLatitude: 37.436710 Longitude: -108.910660Municipality (if within municipal boundaries): _____ County: MONTEZUMA

Reference Location:

Facility Type: OTHER ☒ Facility/Location ID No 255945☐ 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): UnknownEstimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): 0Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0Specify: Approximately 1 bbl of NGL .

Land Use:

Current Land Use: NON-CROP LANDOther(Specify): On-site releaseWeather Condition: RainSurface Owner: FEDERAL

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 9:00 am on May 6, 2015 the operator at the Cutthroat B Gas Processing Facility noticed several small bubbles coming from a rainwater puddle directly outside of the processing building. Once discovered, the operator shut off the dump line from the demethanizer to the NGL storage tank, stopping liquid from passing into the 1" line. The operator also shut off all check valves to isolate the damaged piping. The release is estimated at approximately 1 bbl of NGL that evaporated once released. COGCC was notified by phone at 11:15 on May 6, 2015. On May 7, 2015 at 8:00 am a backhoe is scheduled onsite to excavate and replace the line.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
5/6/2015	BLM	Pamela Leschak	970-385-1342	Spoke with Pam directly.
5/6/2015	CDPHE	Hotline	877-518-5608	Left a message.
5/6/2015	COGCC	Jim Hughes	970-259-4880	Spoke with Jim directly.

CORRECTIVE ACTIONS

#1	Supplemental Report Date:	06/01/2015
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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 9:00 am on May 6, 2015 the operator at the Cutthroat B Gas Processing Facility noticed several small bubbles coming from a rainwater puddle directly outside of the processing building. Once discovered, the operator shut off the dump line from the demethanizer to the NGL storage tank, stopping liquid from passing into the 1" line. The operator also shut off all check valves to isolate the damaged piping. No visible surface NGL release characterization.

On May 7, 2015 at 8:00 am a backhoe began excavating the soil around the damaged piping. LT Environmental contractor was onsite and sampled soil from four locations. Piping was left uncovered until results can back. Due to high sampling results a second round of samples was taken on May 19, 2015. (Both sets of analytical results have been attached to this report.)

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

1" section of line has been replaced. Per BLM, no further action is required at this time. At such future time there are potential negative impacts associated with this release observed, or when the facility is set for decommissioning; site characterization and remediation shall take place. (Correspondence from the BLM has been included and a copy attached to this report.)

Volume of Soil Excavated (cubic yards): 0

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

Volume of Impacted Ground Water Removed (bbls): _____

Volume of Impacted Surface Water Removed (bbls): _____

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: _____

OPERATOR COMMENTS:

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

Signed: _____ Print Name: Michelle Schuster

Title: HSE Engineer Date: 06/01/2015 Email: michelle.schuster@qepres.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

400846435	FORM 19 SUBMITTED
400846436	ANALYTICAL RESULTS
400846438	ANALYTICAL RESULTS
400846439	OTHER
400846440	AERIAL PHOTOGRAPH

Total Attach: 5 Files

General Comments

User Group

Comment

Comment Date

Environmental	Based on our review of the information provided, it appears that no further action is necessary at this time and COGCC approves the closure request. Should conditions at the site indicate contaminant concentrations in soils exceeding COGCC standards, or, if ground water is found to be significantly impacted, further investigation and/or remediation activities may be required at the site. Surface reclamation must meet the COGCC 1000 series rules for vegetative cover.	6/1/2015 11:29:40 AM
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Total: 1 comment(s)