

**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:

400870201

Date Received:

07/17/2015

Spill report taken by:

LUJAN, CARLOS

Spill/Release Point ID:

442525

## 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>CAERUS PICEANCE LLC</u>	Operator No: <u>10456</u>	<b>Phone Numbers</b>
Address: <u>600 17TH STREET #1600N</u>		Phone: <u>(970) 285-9606</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(970) 778-2314</u>
Zip: <u>80202</u>		Email: <u>jjanicek@caerusoilandgas.com</u>
Contact Person: <u>Jake Janicek</u>		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400870201

Initial Report Date: 07/17/2015      Date of Discovery: 07/14/2015      Spill Type: Historical Release

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNE SEC 17 TWP 6S RNG 96W MERIDIAN 6Latitude: 39.528190 Longitude: -108.130220Municipality (if within municipal boundaries): \_\_\_\_\_ County: GARFIELD

#### Reference Location:

Facility Type: FLOWLINE ☒ Facility/Location ID No 335781☐ 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? Yes

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

Estimated Oil Spill Volume(bbl): 0Estimated Condensate Spill Volume(bbl): UnknownEstimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): UnknownEstimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: \_\_\_\_\_

#### **Land Use:**

Current Land Use: NON-CROP LAND

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

Weather Condition: cloudy 85Surface Owner: FEEOther(Specify): Chevron USA, Inc.

#### **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):

During a routine site visit, the pumper responsible for the site observed a stain and what appeared to be a hole where fluid from the subsurface was being conveyed to the surface immediately north of the site's tank battery. The wells associated with that tank battery were turned off and all flowlines/dumplines near the tank battery were relieved of all fluid and pressure. The area near the stain was excavated and impacted soil near the condensate dumpline was observed.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
7/15/2015	Garfield County	Kirby Wynn	970-987-2557	No response - Left voicemail
7/15/2015	COGCC	Carlos Lujan	970-286-3292	Responded with a phone call
7/13/2015	Chevron USA	Craig Tysse	970-285-9722	Requested an onsite meeting

**OPERATOR COMMENTS:**

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

Signed: \_\_\_\_\_ Print Name: Jake Janicek

Title: EHS Professional Date: 07/17/2015 Email: jjanicek@caerusoilandgas.com

**COA Type**

**Description**

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**Attachment Check List**

**Att Doc Num**

**Name**

400870201	FORM 19 SUBMITTED
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Total Attach: 1 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

Environmental	1) Please ensure that confirmation samples are taken at the bottom of the excavation to discard any potential groundwater contamination. The pad is about 600 feet away from the Parachute creek. If vertical delineation is not possible (in case impact is too deep), a Form 27 will be required to document further investigation that may include installation of monitoring wells. 2) Please confirm provided spill coordinates. It shows as if the spill occurred near the wells.	7/17/2015 4:04:41 PM
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Total: 1 comment(s)