

State of Colorado Oil and Gas Conservation Commission

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Document Number:

400891813

Date Received:

08/31/2015

Spill report taken by:

LUJAN, CARLOS

Spill/Release Point ID:

442980

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: VANGUARD OPERATING LLC

Operator No: 10531

Phone Numbers

Address: 5847 SAN FELIPE #3000

Phone: (970) 876-1959

City: HOUSTON

State: TX

Zip: 77057

Mobile: (970) 744-8128

Contact Person: Scott Ghan

Email: sgghan@vnrllc.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400889511

Initial Report Date: 08/25/2015

Date of Discovery: 08/21/2015

Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR sesw SEC 25 TWP 6s RNG 92w MERIDIAN 6

Latitude: 39.491857 Longitude: -107.618509

Municipality (if within municipal boundaries): County: GARFIELD

Reference Location:

Facility Type: PIPELINE

☐ Facility/Location ID No☒ 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): 0

Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): Unknown

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

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify:

Land Use:

Current Land Use: OTHER

Other(Specify): rangeland

Weather Condition: 90 degrees, sunny and clear

Surface Owner: FEE

Other(Specify): Duane Scott

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):

Vanguard staff was notified by the surface owner at approximately 5 PM on 8/21/15 that water was observed coming out of the subsurface in our pipeline ROW. Vanguard staff responded immediately and were escorted to the location by the surface owner (Clark Scott). The portion of the ROW is located southwest of our Scott 24B-25-692 facility and west of Divide Creek. We did observe water coming out of the subsurface in three locations within the ROW in a fairly localized area. The pipeline was immediately shut-in and response activities were initiated. Some of the water had left the ROW and migrated down the fill slope a short distance before terminating. There was no surface evidence indicating that the water from the ROW made it to Divide Creek. We removed all the water the the affected portion of the pipeline overnight. Carlos Lujan inspected this location on 8/22/15 and is aware of the remediation plan.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
8/21/2015	Landowner	Clark Scott	970-618-3828	Found the release
8/21/2015	COGCC	Carlos Lujan	-	Inspected location on 8/22/15
8/21/2015	GarCO	Kirby Wynn	970-987-2557	Acknowledged notification via email

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 08/31/2015		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	_____	_____	<input checked="" type="checkbox"/>
CONDENSATE	_____	_____	<input checked="" type="checkbox"/>
PRODUCED WATER	_____	_____	<input checked="" type="checkbox"/>
DRILLING FLUID	_____	_____	<input checked="" type="checkbox"/>
FLOW BACK FLUID	_____	_____	<input checked="" type="checkbox"/>
OTHER E&P WASTE	_____	_____	<input checked="" type="checkbox"/>
specify: _____			
Was spill/release completely contained within berms or secondary containment? <u>NO</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit			
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): _____		Width of Impact (feet): _____	
Depth of Impact (feet BGS): _____		Depth of Impact (inches BGS): _____	
How was extent determined?			
From August 24 through 26, 2015, excavation, soil sampling, and surface water sampling activities were conducted. All samples were submitted for laboratory analysis for constituents identified in COGCC Table 910-1. Analytical results for the collected samples are pending.			
Soil/Geology Description:			
Torriorthents-Camborthids-Rock outcrop complex, steep.			
Depth to Groundwater (feet BGS) <u>30</u>		Number Water Wells within 1/2 mile radius: <u>4</u>	
If less than 1 mile, distance in feet to nearest	Water Well <u>2130</u> None <input type="checkbox"/>	Surface Water <u>105</u> None <input type="checkbox"/>	
	Wetlands _____ None <input checked="" type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>	
	Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building <u>2150</u> None <input type="checkbox"/>	
Additional Spill Details Not Provided Above:			

Depth to groundwater is estimated based on local topography. Laboratory analytical results will be reported to the COGCC in a additional supplemental report per Carlos Lujan. The attached Figures 1 through 3 detail the spill path, excavation extents and sample locations.

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:

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

Signed: _____ Print Name: Scott Ghan

Title: Senior EHS Specialist Date: 08/31/2015 Email: sghan@vnrlc.com

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400892051	SITE MAP
400892052	SITE MAP
400892053	SITE MAP

Total Attach: 3 Files

General Comments

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

Total: 0 comment(s)