

State of Colorado Oil and Gas Conservation Commission

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Document Number:

400905161

Date Received:

09/25/2015

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

443225

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>PDC ENERGY INC</u>	Operator No: <u>69175</u>	Phone Numbers
Address: <u>1775 SHERMAN STREET - STE 3000</u>		Phone: <u>(970) 506-9273</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80203</u>
Contact Person: <u>Zack Liesenfeld</u>		Mobile: <u>(970) 373-6581</u>
		Email: <u>zack.liesenfeld@pdce.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400901373

Initial Report Date: 09/17/2015 Date of Discovery: 09/16/2015 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWSW SEC 8 TWP 5N RNG 63W MERIDIAN 6Latitude: 40.408290 Longitude: -104.464200Municipality (if within municipal boundaries): _____ County: WELD

Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 331043☐ 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): 0Estimated 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: Sunny and 85Surface Owner: STATEOther(Specify): Colorado State of

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 P&A of the State 14, 24-8 location a historic release was discovered under the produced water vault. Exploration and remediation efforts found the release to be state reportable. Current action is being taken to determine the extent of the release, once found, an appropriate remediation plan will be executed.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
9/17/2015	State of CO	Rick Allison	-	Via email
9/17/2015	Weld County	Roy Rudesil	-	Via email
9/17/2015	State of CO	Steve Freese	-	Via email

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 09/25/2015		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER			<input checked="" type="checkbox"/>
DRILLING FLUID	0	0	<input type="checkbox"/>
FLOW BACK FLUID	0	0	<input type="checkbox"/>
OTHER E&P WASTE	0	0	<input 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): 130		Width of Impact (feet): 70	
Depth of Impact (feet BGS): 22		Depth of Impact (inches BGS): _____	
How was extent determined?			
On September 16, 2015, a historic release was discovered below the produced water tank during facility decommissioning activities at the State 14, 24-8 tank battery. To date, approximately 80 cubic yards of impacted material have been removed and transported to the Waste Management Facility in Ault, Colorado for disposal under PDC waste manifests. Excavation and site investigation activities to delineate the lateral and vertical extent of remaining petroleum hydrocarbon impacts in soil are on-going. Groundwater has not been encountered. A summary of remediation activities and analytical results will be provided in a subsequent report.			
Soil/Geology Description:			
Valent sand, 3 to 9 percent slopes			
Depth to Groundwater (feet BGS) 80		Number Water Wells within 1/2 mile radius: 0	
If less than 1 mile, distance in feet to nearest		Water Well _____ None <input checked="" type="checkbox"/>	Surface Water _____ None <input checked="" type="checkbox"/>
		Wetlands _____ None <input checked="" type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>
Livestock 25		None <input type="checkbox"/>	Occupied Building _____ None <input checked="" type="checkbox"/>
Additional Spill Details Not Provided Above:			

CORRECTIVE ACTIONS

#1	Supplemental Report Date: 09/25/2015
Cause of Spill (Check all that apply) <input type="checkbox"/> Human Error <input type="checkbox"/> Equipment Failure <input checked="" type="checkbox"/> Historical-Unknown <input type="checkbox"/> Other (specify) _____	
Describe Incident & Root Cause (include specific equipment and point of failure) A historic release was discovered during production facility decommissioning activities.	
Describe measures taken to prevent the problem(s) from reoccurring: The well will be plugged and the facility will not be reconstructed.	
Volume of Soil Excavated (cubic yards): 80	
Disposition of Excavated Soil (attach documentation) <input checked="" type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment <input type="checkbox"/> Other (specify) _____	
Volume of Impacted Ground Water Removed (bbls): 0	
Volume of Impacted Surface Water Removed (bbls): 0	

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: Zack Liesenfeld
Title: EHS Professional Date: 09/25/2015 Email: zack.liesenfeld@pdce.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

400905241	TOPOGRAPHIC MAP
400905297	OTHER

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Environmental	Removed "Request for Closure Work proceeding under an approved Form 27", per Operator request.	9/29/2015 11:10:05 AM

Total: 1 comment(s)