

# State of Colorado Oil and Gas Conservation Commission

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Document Number:

400993288

Date Received:

02/21/2016

Spill report taken by:

Spill/Release Point ID:

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

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400993288

Initial Report Date: 02/21/2016 Date of Discovery: 02/18/2016 Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWNW SEC 24 TWP 6S RNG 97W MERIDIAN 6

Latitude: 39.509850 Longitude: -108.174302

Municipality (if within municipal boundaries): County: GARFIELD

#### Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 335455

☐ 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? 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? Yes

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

Estimated Oil Spill Volume(bbl): 0

Estimated Condensate Spill Volume(bbl): >=5 and <100

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): 0

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

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify:

#### Land Use:

Current Land Use: NON-CROP LAND

Other(Specify):

Weather Condition: clear 40

Surface Owner: FEE

Other(Specify): Puckett

#### 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 component associated with a tank heater being used to heat one of the condensate tanks located within the salt water disposal well tank battery failed allowing ten barrels of condensate to release. All released fluid was immediately recovered using a vacuum truck and placed into another tank.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
2/19/2016	COGCC	Carlos Lujan	970-286-3292	No response at time of reporting
2/21/2016	Puckett Land Co.	Ray Anderson	-	
2/21/2016	Puckett Land Co.	Chuck Whiteman	-	Responded by verifying that he got the notification email

**SPILL/RELEASE DETAIL REPORTS**

#1	Supplemental Report Date: 02/21/2016		
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	10	10	<input type="checkbox"/>
PRODUCED WATER	0	0	<input 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? YES Was an Emergency Pit constructed? NO

*Secondary containment, **including walls & floor regardless of construction material**, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.*

**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) ☐ Soil ☐ Groundwater ☐ Surface Water ☐ 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?

Visual observation

Soil/Geology Description:

Parachute-Irigul-Rhone association, 25 to 50 percent slopes

Depth to Groundwater (feet BGS) 260 Number Water Wells within 1/2 mile radius: 0

If less than 1 mile, distance in feet to nearest

Water Well	<u>4560</u>	None <input type="checkbox"/>	Surface Water	<u>806</u>	None <input type="checkbox"/>
Wetlands	_____	None <input checked="" type="checkbox"/>	Springs	<u>993</u>	None <input type="checkbox"/>
Livestock	<u>50</u>	None <input type="checkbox"/>	Occupied Building	_____	None <input checked="" type="checkbox"/>

Additional Spill Details Not Provided Above:

## CORRECTIVE ACTIONS

#1	Supplemental Report Date: 02/21/2016
Cause of Spill (Check all that apply)	
<input type="checkbox"/> Human Error	<input checked="" type="checkbox"/> Equipment Failure
<input type="checkbox"/> Historical-Unknown	<input type="checkbox"/> Other (specify) _____
Describe Incident & Root Cause (include specific equipment and point of failure)	
<div>The heating element within the tank corroded and allowed condensate to leave the tank.</div>	
Describe measures taken to prevent the problem(s) from reoccurring:	
<div>The heating element was removed from the tank.</div>	
Volume of Soil Excavated (cubic yards): 0	
Disposition of Excavated Soil (attach documentation)	
<input type="checkbox"/> Offsite Disposal	<input type="checkbox"/> Onsite Treatment
<input type="checkbox"/> 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:

All released fluid stayed within the lined containment berm and was immediately recovered from the tank battery. We request that this release be given an NFA status.

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: 02/21/2016 Email: jjanicek@caerusoilandgas.com

COA Type	Description

## Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

## General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)