

**State of Colorado**  
**Oil and Gas Conservation Commission**

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Document Number:

401146531

Date Received:

11/23/2016

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

445086

## SPILL/RELEASE REPORT (SUPPLEMENTAL)

This form is to be submitted by the party responsible for the oil and gas spill or release. Refer to COGCC Rule 906.b. for reporting requirements of spills or releases of E&P Waste or produced fluids. 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>	<b>Phone Numbers</b>
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# 401002236

Initial Report Date: 03/09/2016      Date of Discovery: 03/07/2016      Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENE SEC 15 TWP 5N RNG 64W MERIDIAN 6

Latitude: 40.403550 Longitude: -104.527490

Municipality (if within municipal boundaries): \_\_\_\_\_ County: WELD

#### Reference Location:

Facility Type: FLOWLINE      ☒ Facility/Location ID No 330519

☐ 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): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

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

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

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: Spill was approximately 8 bbls

#### Land Use:

Current Land Use: NON-CROP LAND

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

Weather Condition: Sunny and cool

Surface Owner: FEE

Other(Specify): NA

#### 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):

PDC Energy discovered a leaking produced water dump line at the Loustalet 41-15 production facility. Once release origin was determined, the water leg was immediately shut in, line locked out/tagged out, and water vault bottomed out. This release is within secondary containment and current recovery efforts are determining impact extent.

List Agencies and Other Parties Notified:

### SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date:	11/09/2016	
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	5	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? <u>YES</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, <b>including walls &amp; floor regardless of construction material</b>, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
<b>A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit</b>			
Impacted Media (Check all that apply) <input checked="" type="checkbox"/> Soil <input checked="" 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?			
An Initial Form 19 was submitted on March 9, 2016 under Doc# 401002236 and a Supplemental Form 19 was submitted on March 17, 2016 under Doc# 401010057. Initial excavation and site investigation activities, and the proposed remediation plan are summarized in the attached Form 27 Remediation Work Plan.			
Soil/Geology Description:			
Haverson loam, 1 to 3 percent slopes			
Depth to Groundwater (feet BGS) <u>18</u>		Number Water Wells within 1/2 mile radius: <u>13</u>	
If less than 1 mile, distance in feet to nearest	Water Well <u>485</u> None <input type="checkbox"/>	Surface Water <u>95</u> None <input type="checkbox"/>	
	Wetlands _____ None <input checked="" type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>	
	Livestock <u>995</u> None <input type="checkbox"/>	Occupied Building <u>715</u> None <input type="checkbox"/>	
Additional Spill Details Not Provided Above:			
Reference attached Form 27 Remediation Work Plan.			

### CORRECTIVE ACTIONS

#1 Supplemental Report Date: 11/23/2016

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)

The release was caused by a failed connection between the flowline and water vault.

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

This issues has been addressed by redesigning the connection configuration using more robust material to connect flowlines to produced water vaults on all new and repaired facilities. In an attempt to prevent similar failures, annual pressure/integrity tests and routine site inspections will continue and compromised water vessels, flowlines and equipment will be removed from service.

Volume of Soil Excavated (cubic yards): 140

Disposition of Excavated Soil (attach documentation) ☒ Offsite Disposal ☐ Onsite Treatment  
☐ 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: 9920

### 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: 11/23/2016 Email: zack.liesenfeld@pdce.com

### COA Type

### Description

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### Attachment Check List

Att Doc Num	Name
401146531	FORM 19 SUBMITTED
401146538	OTHER

Total Attach: 2 Files

### General Comments

User Group	Comment	Comment Date
Environmental	COGCC needs a detailed root cause on the flowline failure. The Supplemental Report in March did not provide sufficient detail. COGCC has returned the Form 19 to Draft. Please complete the Corrective Actions Tab with a detailed Root Cause regarding the reason the dumphine failed and how the failure can be prevented (beyond just replacing it).	11/17/2016

Total: 1 comment(s)