

State of Colorado  
Oil and Gas Conservation Commission

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Document Number:

401304431

Date Received:

06/08/2017

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

451001

**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>WESCO OPERATING INC</u>	Operator No: <u>95520</u>	<b>Phone Numbers</b>
Address: <u>120 S DURBIN STREET</u>		Phone: <u>(307) 5775329</u>
City: <u>CASPER</u> State: <u>WY</u> Zip: <u>82602</u>		Mobile: <u>(307) 2590230</u>
Contact Person: <u>Dave Weinert</u>		Email: <u>davew@kirkwoodcompanies.com</u>

**INITIAL SPILL/RELEASE REPORT**

Initial Spill/Release Report Doc# 401303428

Initial Report Date: 06/07/2017 Date of Discovery: 06/07/2017 Spill Type: Recent Spill

**Spill/Release Point Location:**

Location of Spill/Release: QTRQTR swnw SEC 26 TWP 4N RNG 95W MERIDIAN 6

Latitude: 40.288560 Longitude: -108.024930

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

**Reference Location:**

Facility Type: FLOWLINE  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): >=1 and <5 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: \_\_\_\_\_

**Land Use:**

Current Land Use: NON-CROP LAND Other(Specify): \_\_\_\_\_

Weather Condition: cloudy

Surface Owner: FEE Other(Specify): \_\_\_\_\_

**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):

This is a Maudlin Gulch #18 flow line leak. The leak began at approximately 9:00 am on June 7th. The leak was discovered at approximately 10:00 am. The leak was controlled by 11:00 am. The well pump was shut off. A vac truck was used to drain the buried line. The spill flowed through a culvert and into Straight Gulch. Oil absorbant booms and pads were placed along the spill path. An underflow dam was placed near the leading edge of the spill to prevent further migration of the crude oil. A containment boom was placed on a pond downstream of the spill. The flow line will be replaced. On June 8th, fresh water will be used to wash the oil to the underflow dam where it will be recovered using absorbant booms, pads and a vac truck. The recovered fluid will be placed into the Maudlin Gulch tank battery tanks.

List Agencies and Other Parties Notified:

### SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date:	06/08/2017		
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown	
OIL	<u>2</u>	<u>1</u>	<input type="checkbox"/>	
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>	
PRODUCED WATER	<u>10</u>		<input checked="" type="checkbox"/>	
DRILLING FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>	
FLOW BACK FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>	
OTHER E&P WASTE	<u>0</u>	<u>0</u>	<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 &amp; floor regardless of construction material, 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 type="checkbox"/> Groundwater <input checked="" type="checkbox"/> Surface Water <input checked="" type="checkbox"/> Dry Drainage Feature				
Surface Area Impacted: Length of Impact (feet): <u>3700</u>		Width of Impact (feet): <u>1</u>		
Depth of Impact (feet BGS): _____		Depth of Impact (inches BGS): _____		
How was extent determined?				
visually				
Soil/Geology Description:				
fine sandy loam per NRCS web soil survey				
Depth to Groundwater (feet BGS) <u>20</u>		Number Water Wells within 1/2 mile radius: <u>1</u>		
If less than 1 mile, distance in feet to nearest		Water Well <u>20</u> None <input type="checkbox"/>	Surface Water <u>0</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 _____ None <input checked="" type="checkbox"/>	
Additional Spill Details Not Provided Above:				
Leak was small pinhole type leak. Nearest water well is unregistered, unused water well. Depth to water in well will be measured. This form may be revised afterwards. Deistance to nearest water well is estimated, will be measured. This form may be then revised.				

### CORRECTIVE ACTIONS

#1 Supplemental Report Date: 06/08/2017

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)

small pinhole leak on buried pipe caused by rock against pipe

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

pipeline taken out of service

Volume of Soil Excavated (cubic yards): 6

Disposition of Excavated Soil (attach documentation)  Offsite Disposal  Onsite Treatment  
 Other (specify) soil storage area

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:**

Wesco proposes to remediate spill by washing with fresh water. All wash water will be recovered and disposed of along with recovered oil in a commercial disposal facility. Wesco will also use rakes and shovels to clean vegetation as washing is occurring. As needed, absorbant booms and pads will be used to recover free standing oil. Vegetation may be removed as needed along with contaminated soil as needed. This work is on going. Recovered volumes will be re-determined when work is completed.

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

Signed: \_\_\_\_\_ Print Name: Dave Weinert

Title: HSE Coordinator Date: 06/08/2017 Email: davew@kirkwoodcompanies.com

COA Type	Description

**Attachment Check List**

Att Doc Num	Name
401304433	TOPOGRAPHIC MAP

Total Attach: 1 Files

**General Comments**

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)