

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

401412646

Date Received:

09/27/2017

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

452400

## SPILL/RELEASE REPORT (INITIAL)

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>BONANZA CREEK ENERGY OPERATING COMPANY LLC</u>	Operator No: <u>8960</u>	<b>Phone Numbers</b> Phone: <u>(720) 4406100</u> Mobile: <u>( )</u> Email: <u>Bdodek@bonanzacrk.com</u>
Address: <u>410 17TH STREET SUITE #1400</u>		
City: <u>DENVER</u>	State: <u>CO</u> Zip: <u>80202</u>	
Contact Person: <u>Brian Dodek</u>		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401412646

Initial Report Date: 09/25/2017 Date of Discovery: 09/25/2017 Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 4 TWP 6N RNG 62W MERIDIAN 6

Latitude: 40.522368 Longitude: -104.331044

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

#### Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 440714

☐ 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): >=5 and <100

Estimated Condensate Spill Volume(bbl): 0

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: Overcast, light rain, 45°F

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):

During routine maintenance a BCEOC operator was blowing down a separator. Once the pressure gauges indicated the pressure was off the vessel the operator removed a 2" bull plug. Unbeknownst to the operator, the separator had plugged off prior to being fully blown down. Several seconds later the plug worked free releasing the remaining contents of the separator. The current release volume is estimated to be 12 bbls of oil. Roustabout crews are working to remove the impacted soil. Once all of the impacted soil is removed, soil samples will be collected and submitted for laboratory analysis.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
9/25/2017	Weld County	Roy Rudisill	--on file	notified of release
9/25/2017	COGCC	Rick Alison	--on file	notified of release
9/25/2017	Landowner	Jack Degenhart	--on file	notified of release

**OPERATOR COMMENTS:**

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

Signed: \_\_\_\_\_ Print Name: Brian Dodek

Title: Env Manager Date: 09/27/2017 Email: Bdodek@bonanzacrk.com

**COA Type**

**Description**

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**Attachment Check List**

**Att Doc Num**

**Name**

401412646	SPILL/RELEASE REPORT(INITIAL)
401412844	TOPOGRAPHIC MAP
401416459	FORM 19 SUBMITTED

Total Attach: 3 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)