

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:

401782498

Date Received:

10/03/2018

Spill report taken by:

FISCHER, ALEX

Spill/Release Point ID:

457247

## 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: SANDRIDGE EXPLORATION & PRODUCTION LLC	Operator No: 10598	<b>Phone Numbers</b> Phone: (405) 429-6518 Mobile: ( ) Email: slaird@sandridgeenergy.com
Address: 123 ROBERT S KERR AVE		
City: OKLAHOMA CITY	State: OK Zip: 73102	
Contact Person: Matt Church		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401751936

Initial Report Date: 09/01/2018 Date of Discovery: 09/01/2018 Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWSW SEC 9 TWP 7N RNG 80W MERIDIAN 6

Latitude: 40.585015 Longitude: -106.387129

Municipality (if within municipal boundaries): County: JACKSON

#### Reference Location:

Facility Type: WELL ☐ Facility/Location ID No ☐  
Spill/Release Point Name: ☐ No Existing Facility or Location ID No.  
Number: ☒ Well API No. (Only if the reference facility is well) 05-057-06589

#### 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): >=5 and <100

Estimated Other E&P Waste Spill Volume(bbl): >=5 and <100 Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: Fluid from firedept used to put out fire mixed with other E&P products noted in this section

#### Land Use:

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

Weather Condition: 35 degrees F, ptly cloudy, Lt breeze

Surface Owner: FEE Other(Specify): Greg Ray

#### 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):

At approximately 0420 on 9/1/2018 flow hands at the Janet 3&4 (located on Gregory pad - ID#439603) observed a fire break out on the Castle 7 triplex unit (also on Gregory pad). Flow hands immediately shut in the Janets before evacuating the site as the flames grew larger and engulfed the Gregory/Castle pad. Fire crews were immediately dispatched and arrived on site around 0530. Pumpers, safety men, and SD employees were on site directing emergency personnel to the location and providing them with information regarding the fire. The fire was extinguished by approximately 0615. The explosion and fire also caused approximately 100 BBLs of produced water and oil to be spilled into the secondary lined containment of the triplexes on the Castles 7 and 8 and approximately 5 BBLs of oil and produced water to be spilled on the pad outside of secondary containment (no fluids of any kind went off location). At this time the cause of the incident is unknown pending further investigation.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
9/1/2018	COGCC	Kris Neidel	970-846-5097	Initial contact
9/1/2018	COGCC	Alex Fischer	303-501-3900	Initial contact
9/1/2018	Landowner	Greg Ray	970-846-4901	Informed of spill & fire and all wells were shut in
9/1/2018	Jack Co. V Fire Dept		-	reported to location and put out fire
9/1/2018	Jack Co. Commissioners		-	A county commissioner is fire chief and on location

Was there a Grade 1 Gas Leak associated with this E & P waste spill or release? Yes ☐ No ☒

If YES, enter the Document Number of the Initial Grade 1 Gas Leak Report Form 44: \_\_\_\_\_

Was there a reportable accident associated with this E & P waste spill or release? Yes ☒ No ☐

If YES, enter the Document Number of the Initial Accident Report, Form 22: 401751939

**SPILL/RELEASE DETAIL REPORTS**

#1	Supplemental Report Date: 10/03/2018		
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	25	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	80	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): 250 Width of Impact (feet): 250

Depth of Impact (feet BGS): 4 Depth of Impact (inches BGS):

How was extent determined?

On 9/14/2018, Absaroka Energy and Environmental Solutions (AE2) was consulted to evaluate the site upon access being granted. Equipment impacted by the burn and also used for the initial response was still remaining onsite during the inspection. Observations were made only from safely accessible portions of the perimeter. The extent of the impacted area was determined by gathering observations around the perimeter, which had surface staining. Standing fluids were observed, mostly within unit secondary containment. Approximately 100 barrels of oil were observed within unit secondary containment and 5 barrels were observed outside secondary contain but within the well pad. The area of the standing fluids was estimated to be about 50 feet in length and 70 feet in width (APPENDIX B). No observations were gathered to infer that materials had left the well pad and migrated offsite.

Soil/Geology Description:

Soil was characteristic of road base material typically used on a well pad. Subsurface soil below well pad is characteristic of a sandy loam with gravel.

Depth to Groundwater (feet BGS) 20

Number Water Wells within 1/2 mile radius: 1

If less than 1 mile, distance in feet to nearest

Water Well 1700 None ☐

Surface Water 100 None ☐

Wetlands 100 None ☐

Springs        None ☒

Livestock 100 None ☐

Occupied Building 4100 None ☐

Additional Spill Details Not Provided Above:

## CORRECTIVE ACTIONS

#1 Supplemental Report Date: 10/03/2018

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)

Triplex unit on the Castle 7 mechanically failed. RCA is being conducted and will be reported on Form 22 as part of the Subsequent Report.

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

Will be reported in Form 22 Subsequent Report.

Volume of Soil Excavated (cubic yards): 300

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: \_\_\_\_\_

## 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: Joel Mason  
Title: Project Manager Date: 10/03/2018 Email: joel.mason@absarokasolutions.com

**COA Type**

**Description**

	Further investigation around the area identified as “SDE_GC_SS_39” should be completed.
	Request for closure is denied at this time.

**Attachment Check List**

**Att Doc Num**

**Name**

401782498	FORM 19 SUBMITTED
401783230	OTHER
401783233	SITE MAP
401783240	SITE MAP
401783241	SITE MAP
401783242	ANALYTICAL RESULTS
401783243	ANALYTICAL RESULTS
401810619	SPILL/RELEASE REPORT(SUPPLEMENTAL)

Total Attach: 8 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)