

State of Colorado Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402154756

Date Received:

08/30/2019

Spill report taken by:

Spill/Release Point ID:

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: WESCO OPERATING INC

Operator No: 95520

Phone Numbers

Address: 120 S DURBIN STREET

Phone: (307) 5775329

City: CASPER

State: WY

Zip: 82602

Mobile: ()

Contact Person: Dave Weinert

Email: davew@kirkwoodcompanies.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402154756

Initial Report Date: 08/24/2019

Date of Discovery: 08/24/2019

Spill Type: Recent Spill

Spill/Release Point Location:

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

Latitude: 40.286268 Longitude: -108.025514

Municipality (if within municipal boundaries): N/A County: MOFFAT

Reference Location:

Facility Type: TANK BATTERY

☒ Facility/Location ID No 428531

Spill/Release Point Name: Maudlin tank battery

☐ No Existing Facility or Location ID No.

Number: _____

☐ 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): ≥ 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: sunny

Surface Owner: FEE

Other(Specify): Colowyo

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):

The injection pump failed resulting in an overflow at the tank battery. When the resulting spill overflowed the tank berms, it split into two paths. One path flowed into emergency containment pits. This path of the spill did not leave the emergency containment pits. The second path flowed approximately 700 feet north along the lease road. The spill did not enter the ephemeral stream in Straight Gulch.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
8/24/2019	COGCC	Kris Niedel	970-8465097	left voice mail
8/24/2019	COGCC	Kris Niedel	970-8711963	left voice mail

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: _____

OPERATOR COMMENTS:

Spill cleanup is ongoing. Form 19s and Form 27 will also be submitted. This form was originally submitted on August 24th, 2019 and is being revised at the request of COGCC. Wesco has changed the Waters of State threatened or impacted box from no to yes at the request of the COGCC upon further explanation to Wesco of the definition of "threatened".

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: 08/30/2019 Email: davew@kirkwoodcompanies.com

COA Type **Description**

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Attachment Check List

Att Doc Num **Name**

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Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Environmental	Assess the nature and extent of contamination with confirmation soil samples. Delineate the horizontal and vertical extent of impacted area and remediate impacts to Table 910-1 standards. Provide documentation in A Form 27. Documentation must include a figure showing spill area with sample locations plus laboratory results. The vertical extent of impact shall be delineated.	08/26/2019

Total: 1 comment(s)