

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:

402571795

Date Received:

01/11/2021

Spill report taken by:

Araza, Steven

Spill/Release Point ID:

478889

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>LARAMIE ENERGY LLC</u>	Operator No: <u>10433</u>	Phone Numbers
Address: <u>1401 17TH STREET SUITE #1400</u>		Phone: <u>(970) 9019007</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(970) 9019007</u>
Zip: <u>80202</u>		Email: <u>mkasten@laramie-energy.com</u>
Contact Person: <u>Matt Kasten</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402565145

Initial Report Date: 01/04/2021 Date of Discovery: 01/01/2021 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWNW SEC 10 TWP 10S RNG 94W MERIDIAN 6

Latitude: 39.210856 Longitude: -107.874217

Municipality (if within municipal boundaries): _____ County: MESA

Reference Location:

Facility Type: FLOWLINE SYSTEM ☒ Facility/Location ID No 334520

Spill/Release Point Name: Hawkins 10-4 ☐ Well API No. (Only if the reference facility is well) 05- -

☐ No Existing Facility or Location ID No.

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? No

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): 0

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

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: Dry Gas sales line - unknown volume

Land Use:

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

Weather Condition: Cold

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 the morning of 01/01/21, a lease operator discovered some bubbling coming up on the downstream side of a separator In the vicinity of the gas sales line. We have isolated the sales line off the pad back to the unit and have blown it down. The Pad will remain shut-in until the issue is resolved. After locates clear, excavation, repairs, and sampling will be conducted and presented in supplemental form 19.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
1/1/2021	Land Owner	Fred Lekse	-	via phone
1/2/2021	COGCC	Steven Arauza	-	Email

Was there a Grade 1 Gas Leak? Yes ☐ No ☒

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

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

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

Was there damage during excavation? Yes ☐ No ☒

If YES, was CO 811 notified prior to excavation? Yes ☐ No ☐

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 01/11/2021		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	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: Dry gas line			
Was spill/release completely contained within berms or secondary containment? NO 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) <input checked="" type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): 5		Width of Impact (feet): 10	
Depth of Impact (feet BGS): 4		Depth of Impact (inches BGS):	
How was extent determined?			
PID field screening deteremined where excavation boundary was complete. PID results of project was not identified over 60ppm for all walls and bottom sampling piont of line. Soil samples were collected during excavation for repair and were submitted for analysis (910) and are not completed. Background soil samples were also collected for this project. Completed results will be submitted via supplemental Form 19 if area shows no impacts. If impacts are identified, a Form 27 will be submitted for approval. 2 water samples were collected from the creek 600' east of pad. An upgradient and down gradient water sample are in analysis (910) and will be presented in supplemental forms when completed from lab.			
Soil/Geology Description:			
Clay/Silty loam			

Depth to Groundwater (feet BGS) 50 Number Water Wells within 1/2 mile radius: 1

If less than 1 mile, distance in feet to nearest Water Well None ☒ Surface Water 678 None ☐

Wetlands None ☒ Springs 1050 None ☐

Livestock 700 None ☐ Occupied Building 1800 None ☐

Additional Spill Details Not Provided Above:

Spring 1050' away is a spring that feeds a pvc pipe according to landowner. Laramie notified landowner about spring and it is frozen per conversation with landowner (COA on doc 402565145 to monitor and collect sample from spring can not be collected or visually inspected at frozen state). Livestock not present during project, during summer months cattle are present. Pipeline failure was discovered less than 24 hours. Lease operator travels to pad during same time of day and did not notice release to prior day. Pressure differences were not found due to the small size of the hole. Pipeline repair removed old "T" abandonment and replaced with new pipe.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 01/11/2021

Root Cause of Spill/Release Corrosion

Other (specify) _____

Type of Equipment at Point of Spill/Release: Gas meter Run

If "Other" selected above, specify or describe here:

Describe Incident & Root Cause (include specific equipment and point of failure)

Corrosion found on "T" of dry gas line. (picture attached of pipeline and failure point)

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

Lease operator to continue daily monitoring/inspection on routes to ensure effectiveness of systems.

Volume of Soil Excavated (cubic yards): 5

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:

Laramie is not requesting closure of spill due to analysis of soil samples during repair are not complete. Laramie is requesting variance and NFA of Spring sample COA due to spring being frozen and unable to collect sample (details within supplemental form 19). This is an supplemental progress update to dry gas release and if samples return with no impacts identified, Laramie will request closure in supplemental form 19. If impacts are identified, a Form 27 will be drafted for approval and Spill 478889 will be requested for closure and work will proceed under new Remediation #.

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

Signed: _____ Print Name: Matt Kasten

Title: Project Manager Date: 01/11/2021 Email: mkasten@laramie-energy.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

402571853	OTHER
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)