

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:

402658068

Date Received:

04/15/2021

Spill report taken by:

Arauz, Steven

Spill/Release Point ID:

460326

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# 401885289

Initial Report Date: 12/23/2018 Date of Discovery: 12/22/2018 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWSW SEC 4 TWP 6s RNG 97w MERIDIAN 6

Latitude: 39.555290 Longitude: -108.232770

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

Reference Location:

Facility Type: WELL PAD

☒ Facility/Location ID No 324400

Spill/Release Point Name: Cascade Creek 604-12-13 SWD

☐ 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? 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? 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): >=1 and <5

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

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: Cam lock failed on SWD fluid transfer, 2 bbls spilled, all recovered.

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): _____

Weather Condition: 15- 20 deg f, clear

Surface Owner: FEE

Other(Specify): Laramie Energy

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):

A cam lock broke/failed during water transfer to SWD. Approximately 2 bbls spilled on the surface, because of extreme cold the fluid froze almost immediately. Frozen spill fluids were scraped up using shovels and remaining unfrozen fluid was sucked up with vac truck. Current estimates are for full recovery of fluids that were released, 2bbls spilled, 2bbls recovered.

List Agencies and Other Parties Notified:

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: 04/14/2021

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	2	2	<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? 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) ☒ Soil ☐ Groundwater ☐ Surface Water ☐ Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): 30 Width of Impact (feet): 10

Depth of Impact (feet BGS): 1 Depth of Impact (inches BGS): _____

How was extent determined?

Soil sampling - delineation

Soil/Geology Description:

working surface - silty/gravel roadbase

Depth to Groundwater (feet BGS) 100 Number Water Wells within 1/2 mile radius: 0

If less than 1 mile, distance in feet to nearest

Water Well	<u>2700</u>	None <input type="checkbox"/>	Surface Water	<u>1190</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:

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 04/14/2021

Root Cause of Spill/Release Equipment Failure

Other (specify)

Type of Equipment at Point of Spill/Release: Other

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

Cam lock on water transfer

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

A cam lock broke/failed during water transfer to SWD. Approximately 2 bbls spilled on the surface, because of extreme cold the fluid froze almost immediately. All fluids were removed using shovels and unfrozen fluid was removed via vac truck.

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

Constant equipment checks/inspections.

Volume of Soil Excavated (cubic yards): 0

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:

Inorganics identified at location will need re-sampled for clearance. A form 27 will be submitted for approval. Once REM # is assigned to project, SPILL 460326 will be requested for closure and work will proceed under REM.

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: 04/15/2021 Email: mkasten@laramie-energy.com

COA Type

Description

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
402658085	ANALYTICAL RESULTS
402658100	ANALYTICAL RESULTS
402659267	SOIL SAMPLE LOCATION MAP

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)