

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:

403170763

Date Received:

09/20/2022

Spill report taken by:

FISCHER, ALEX

Spill/Release Point ID:

482601

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 912.b. for reporting requirements of spills or releases of E&P Waste, produced Fluids, or unauthorized Releases of natural gas. Submit a Site Investigation and Remediation Workplan (Form 27) if Rule 913.c. applies.

OPERATOR INFORMATION

| | | |
|------------------------------------|--------------------|-----------------------------------|
| Name of Operator: SIMCOE LLC | Operator No: 10749 | Phone Numbers |
| Address: 1199 MAIN AVE SUITE 101 | | Phone: (970) 852-5172 |
| City: DURANGO State: CO Zip: 81301 | | Mobile: (970) 769-9523 |
| Contact Person: Sabre Beebe | | Email: sabre.beebe@ikavenergy.com |

☐ Transfer of Operatorship: Pursuant to Rule 912.f, this Supplemental Form 19 is being submitted to designate the Buying Operator as the responsible Operator for this Spill and Release.

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 403114512

Initial Report Date: 07/25/2022 Date of Discovery: 07/23/2022 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWSE SEC 19 TWP 33N RNG 9W MERIDIAN N

Latitude: 37.088887 Longitude: -107.862787

Municipality (if within municipal boundaries): County: LA PLATA

Enter Lat./long measurement of the actual Spill/Release Point. Lat./Long. Data shall meet standards of Rule 216.

Reference Location:

Facility Type: WELL SITE

☒ Facility/Location ID No 333609

Spill/Release Point Name: Raymond Koon A 1 pit tank

☐ Well API No. (Only if the reference facility is well) 05- -☐ No Existing Facility or Location ID 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): >=5 and <100

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

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: Initial estimate 14 bbls

Has the subject Spill/Release been controlled at the time of reporting? Yes

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify):

Weather Condition: 83 degrees F, sunny slight breeze

Surface Owner: FEE

Other(Specify): Susan Urban

Describe what is known about the spill/release event (what happened -- including how it was stopped, contained, and recovered):

Operations technician while checking locations found that the pit tank had overflowed onto the well pad on the NE corner of the location. The well and flowline was isolated right away. Fluid release was produced water, all remaining on the well pad. A water truck was ordered and dispatched to location to recover all standing fluids.

List of Agencies and Other Parties Notified Pursuant to Rule 912.b.(7)-(11):

OTHER NOTIFICATIONS

| <u>Date</u> | <u>Agency/Party</u> | <u>Contact</u> | <u>Phone</u> | <u>Response</u> |
|-------------|---------------------|-------------------|--------------|--|
| 7/23/2022 | Landowner | | - | Notified land personnel to inform landowner of the situation |
| 7/23/2022 | La Plata County | Shawna Legarza | - | emailed courtesy notification to Ms. Legarza |
| 7/23/2022 | SUIT | Richard Westerman | 970-442-1697 | No answer left voicemail |
| 7/23/2022 | COGCC | Alex Fischer | 303-501-3900 | No answer left voicemail |
| 7/23/2022 | COGCC | Alex Fischer | 303-894-2100 | No answer left voicemail |

REPORT CRITERIA

Rule 912.b.(1) Report to the Director (select all criteria that apply):

- No Rule 912.b.(1).A: A Spill or Release of any size that impacts or threatens to impact any Waters of the State, Public Water System, residence or occupied structure, livestock, wildlife, or publicly-maintained road.
- Waters of the State: n/a Public Water System: n/a
- Residence or Occupied Structure: n/a Livestock: n/a
- Wildlife: n/a Publicly-Maintained Road: n/a
- Yes Rule 912.b.(1).B: A Spill or Release in which 1 barrel or more of E&P Waste or produced fluids is spilled or released outside of berms or other secondary containment.
- Yes Rule 912.b.(1).C: A Spill or Release of 5 barrels or more of E&P Waste or produced Fluids regardless of whether the Spill or Release is completely contained within berms or other secondary containment.
- No Rule 912.b.(1).D: Within 6 hours of discovery, a Grade 1 Gas Leak. For a Grade 1 Gas Leak from a Flowline, the Operator also must submit the Form 19 – Initial, document number on a Form 44, Flowline Report, for the Grade 1 Gas Leak
- Enter the approximate time of discovery _____ (HH:MM)
- 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? _____
- Enter the Document Number of the Initial Accident Report, Form 22 _____
- Was there damage during excavation? _____
- Was CO 811 notified prior to excavation? _____
- Yes Rule 912.b.(1).E: The discovery of 10 cubic yards or more of impacted material resulting from a current or historic Spill or Release. Discovery and reporting will not be contingent upon confirmation samples demonstrating exceedance of Table 915-1 standards.
- Estimated Volume of Impacted Solids (cu. yd.): 21

| | |
|-----|--|
| No | Rule 912.b.(1).F: The discovery of impacted Waters of the State, including Groundwater. Discovery and reporting will not be contingent upon confirmation samples demonstrating exceedance of Table 915-1 standards. The presence of free product or hydrocarbon sheen on Groundwater or surface water is reportable. The presence of contaminated soil in contact with Groundwater or surface water is reportable. Check all that apply: |
| | <input type="checkbox"/> The presence of free product or hydrocarbon sheen Surface Water <input type="checkbox"/> The presence of free product or hydrocarbon sheen on Groundwater <input type="checkbox"/> The presence of contaminated soil in contact with Groundwater <input type="checkbox"/> The presence of contaminated soil in contact with Surface water |
| Yes | Rule 912.b.(1).G: A suspected or actual Spill or Release of any volume where the volume cannot be immediately determined, including a spill or release of any volume that daylight from the subsurface. |
| No | Rule 912.b.(1).H: Spill or Release resulting in vaporized hydrocarbon mists that leave the Oil and Gas Location or Off-Location Flowline right of way from an Oil and Gas Location and impacts or threatens to impact off-location property. |
| | <input type="checkbox"/> Areas offsite of Oil & Gas Location <input type="checkbox"/> Off-Location Flowline right of way |
| No | Rule 912.b.(1).I: A Release of natural gas that results in an accumulation of soil gas or gas seeps. |
| No | Rule 912.b.(1).J: A Release that results in natural gas in Groundwater. |

SPILL/RELEASE DETAIL REPORTS

| | | | |
|---|--------------------------------------|--|--|
| #1 | Supplemental Report Date: 09/19/2022 | | |
| FLUIDS | BBL's SPILLED | BBL's RECOVERED | Unknown |
| OIL | 0 | 0 | <input type="checkbox"/> |
| CONDENSATE | 0 | 0 | <input type="checkbox"/> |
| PRODUCED WATER | 0 | 20 | <input checked="" 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? <u>NO</u> Was an Emergency Pit constructed? <u>NO</u> | | | |
| <i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i> | | | |
| 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): <u>30</u> | | Width of Impact (feet): <u>35</u> | |
| Depth of Impact (feet BGS): <u>2</u> | | Depth of Impact (inches BGS): _____ | |
| How was extent determined? | | | |
| length and width measured following release report. Depth determined by sampling excavation. | | | |
| Soil/Geology Description: | | | |
| Compacted soils with 3/4 inch gravel cover. | | | |
| Depth to Groundwater (feet BGS) <u>43</u> | | Number Water Wells within 1/2 mile radius: <u>14</u> | |
| If less than 1 mile, distance in feet to nearest | Water Well <u>642</u> | None <input type="checkbox"/> | Surface Water <u>2345</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 <u>996</u> None <input type="checkbox"/> |
| Additional Spill Details Not Provided Above: | | | |

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 09/19/2022

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:

Valve on flow line

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

Valve failed on flow line and released water to well pad

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

Valve replaced

Volume of Soil Excavated (cubic yards): 2100

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, check all that apply)

☒ Horizontal and Vertical extents of impacts have been delineated.

☒ Documentation of compliance with Table 915-1 is attached.

☒ All E&P Waste has been properly treated or disposed.

☐ Work proceeding under an approved Form 27 (Rule 912.c).

Form 27 Remediation Project No:

☐ SUSPECTED Spill/Release did not occur or was below Rule 912.a.(5) reporting thresholds.

OPERATOR COMMENTS:

Impacted soils have been excavated and disposed of properly. Excavation depth was 24-28 inches deep. Samples were taken and analytical results attached. Excavation will be back filled and leveled for continued operations.

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

Signed: Print Name: Sabre Beebe

Title: Environmental Coordinator Date: 09/20/2022 Email: sabre.beebe@ikavenergy.com

| <u>COA Type</u> | <u>Description</u> |
|-----------------|---|
| | Based on a review of the information provided, it appears that no further action is necessary at this time and COGCC approves the closure request. Should conditions at the site indicate contaminant concentrations in soils exceeding COGCC standards, or, if groundwater is found to be significantly impacted, further investigation and/or remediation activities may be required at the site. |
| | Reclamation shall comply with the 1000 Series. Consult COGCC Reclamation Specialist regarding interim and/or final reclamation. |
| 2 COAs | |

Attachment List

| <u>Att Doc Num</u> | <u>Name</u> |
|--------------------|------------------------------------|
| 403170763 | SPILL/RELEASE REPORT(SUPPLEMENTAL) |
| 403171036 | MAP |
| 403171037 | ANALYTICAL RESULTS |
| 403171038 | PHOTO DOCUMENTATION |
| 403171040 | ANALYTICAL RESULTS |
| 403171041 | ANALYTICAL RESULTS |
| 403205154 | FORM 19 SUBMITTED |

Total Attach: 7 Files

General Comments

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

Total: 0 comment(s)