

## State of Colorado

## Energy &amp; Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203

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



Document Number:

403927124

Date Received:

09/19/2024

Spill report taken by:

Araza, Steven

Spill/Release Point ID:

487889

**SPILL/RELEASE REPORT (SUPPLEMENTAL)**

This form is to be submitted by the party responsible for the oil and gas spill or release. Refer to ECMC 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: CAERUS PICEANCE LLC	Operator No: 10456	<b>Phone Numbers</b>
Address: 1001 17TH STREET #1600		Phone: (720) 8307549
City: DENVER	State: CO	Zip: 80202
Contact Person: Derek Horn		Mobile: ( )
		Email: dhorn@qb-energy.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# 403921257

Initial Report Date: 09/15/2024	Date of Discovery: 09/15/2024	Spill Type: Recent Spill
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**Spill/Release Point Location:**

QTRQTR NWNW SEC 32 TWP 6S RNG 92W MERIDIAN 6

Latitude: 39.489257 Longitude: -107.698556

Municipality (if within municipal boundaries): County: GARFIELD

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

☒ Check this box if this spill/release is related to a loss of integrity of a flowline, pipeline, crude oil transfer line, or produced water transfer line.

**Reference Location:**

Facility Type: WELL SITE ☒ Facility/Location ID No 335400

Spill/Release Point Name: D32NEB DUMP LINE FAILURE ☐ 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): Unknown
Estimated Flow Back Fluid Spill Volume(bbl): 0	Estimated Produced Water Spill Volume(bbl): Unknown
Estimated Other E&P Waste Spill Volume(bbl): 0	Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: UNDERGROUND RELEASE THAT SURFACED APPROXIMATE 5BBL

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: SUNNY, PARTLY CLOUDY

Surface Owner: FEE

Other(Specify): COUEY FAMILY LLLP

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

Operator found fluids surface near the tank battery, operator isolated dump lines and initiated EH&S call.

**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>
	BLM	ALEX PROVSTGAARD	970-3662565	EMAIL
9/15/2024	BLM	VANESSA CARANESE	303-3784994	EMAIL
9/15/2024	CPW	TAYLOR ELM	970-9869767	EMAIL
9/15/2024	Garfield county liaison	KIRBY WYNN	970-9872557	EMAIL
9/15/2024	ECMC	STEVEN ARAUZA	720-4985298	EMAIL

**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: \_\_\_\_\_ Public Water System: \_\_\_\_\_
- Residence or Occupied Structure: \_\_\_\_\_ Livestock: \_\_\_\_\_
- Wildlife: \_\_\_\_\_ Publicly-Maintained Road: \_\_\_\_\_
- ☐ 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? \_\_\_\_\_
- ☐ No 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.): \_\_\_\_\_

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's 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: 09/19/2024			
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown	
OIL	0	0	<input type="checkbox"/>	
CONDENSATE			<input checked="" type="checkbox"/>	
PRODUCED WATER			<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 &amp; floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>				
<b>A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit</b>				
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>25</u>		Width of Impact (feet): <u>15</u>		
Depth of Impact (feet BGS): <u>6</u>		Depth of Impact (inches BGS): _____		
How was extent determined?				
Visually. Samples taken to confirm.				
Soil/Geology Description:				
55: Potts loam, 3 to 6 percent slopes (496798)				
Depth to Groundwater (feet BGS) <u>90</u>		Number Water Wells within 1/2 mile radius: <u>2</u>		
If less than 1 mile, distance in feet to nearest	Water Well <u>1722</u>	None <input type="checkbox"/>	Surface Water <u>2472</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:			

Depth of groundwater estimated using DWR\_2133858.

## CORRECTIVE ACTIONS

#1 Supplemental Report Date: 09/19/2024

Root Cause of Spill/Release Pipe, Weld, or Joint Failure

Other (specify)

Type of Equipment at Point of Spill/Release: Dump Line

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

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

Dumpline failure on 90 degree elbow.

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

Assessment underway.

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, 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:

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

Signed: \_\_\_\_\_ Print Name: Derek Horn

Title: EHS Specialist Date: 09/19/2024 Email: dhorn@qb-energy.com

<u>COA Type</u>	<u>Description</u>
0 COA	

**ATTACHMENT LIST**

<u>Att Doc Num</u>	<u>Name</u>
403927124	FORM 19 SUBMITTED
403927135	AERIAL IMAGE
403927136	TOPOGRAPHIC MAP

Total Attach: 3 Files

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Engineering Tech	Submit additional Supplemental 19 when final Root cause and corrective action details are available.	09/24/2024
Environmental	Comply with outstanding COAs.	09/20/2024

Total: 2 comment(s)