

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:

401774687

Date Received:

09/26/2018

Spill report taken by:

Arauz, Steven

Spill/Release Point ID:

457384

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: LARAMIE ENERGY LLCOperator No: 10433Address: 1401 SEVENTEENTH STREET #1400City: DENVERState: COZip: 80202Contact Person: Lorne C Prescott

Phone Numbers

Phone: (970) 8125311Mobile: (970) 2106889Email: lprescott@laramie-energy.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401764160Initial Report Date: 09/14/2018Date of Discovery: 09/14/2018Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENE SEC 9 TWP 8S RNG 98W MERIDIAN 6Latitude: 39.380200 Longitude: -108.338240Municipality (if within municipal boundaries): _____ County: MESA

Reference Location:

Facility Type: WELL PAD☒ Facility/Location ID No 432260Spill/Release Point Name: Homer Deep Unit 9-41
PW Spill☐ 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): 0Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): >=5 and <100Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): _____

Weather Condition: 85 deg, sunnySurface 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):

Puncture, triangular shape was detected along produced water line. Release of fluids on the well pad and into a Storm Water catch basin. No release to sensitive areas or waters of the state. No information yet available as to the cause.

List Agencies and Other Parties Notified:

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: _____

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:

Request Closure of this Form 19. The original Form 19 submittal (Doc Num 401764160) had to be modified to correct for lat/long errors and to correct for additional spill location data that was discovered after the Initial submittal. This form should be closed, a new form 19 was submitted to properly capture the location and spill details. The new Form 19 is Doc Num 401772140.

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

Signed: _____ Print Name: Lorne C Prescott

Title: Reg & Enviro Compliance Date: 09/26/2018 Email: lprescott@laramie-energy.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

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)