

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:

401832984

Date Received:

11/08/2018

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

442351

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>BONANZA CREEK ENERGY OPERATING COMPANY LLC</u>	Operator No: <u>8960</u>	Phone Numbers
Address: <u>410 17TH STREET SUITE #1400</u>		Phone: <u>(720) 225-6653</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Brian Dodek</u>		Mobile: <u>()</u>
		Email: <u>bdodek@bonanzacrk.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400863130

Initial Report Date: 07/02/2015 Date of Discovery: 06/29/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NESE SEC 4 TWP 9n RNG 79w MERIDIAN 6

Latitude: 40.780060 Longitude: -106.264590

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

Reference Location:

Facility Type: FLOWLINE ☐ Facility/Location ID No _____
 Spill/Release Point Name: _____ ☒ 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? No

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): >=1 and <5 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: _____

Land Use:

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

Weather Condition: 50 degrees

Surface Owner: FEDERAL 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 production activities, a flowline from the McCallum 33 (05-057-05208) began leaking through a valve. Approximately 2 bbl of oil were released on the ground surface. Emergency response personnel were dispatched to clean up the release. Environmental personnel will collect soil samples to confirm the remaining soil is compliant with COGCC Table 910-1 standards.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
7/2/2015	BLM	Craig Office	-on file	Notified via WIS e-submittal
7/2/2015	Jackson County	Kent Crowder	-on file	Notified of release
7/2/2015	COGCC	Kris Neidel	-on file	Notified via eForm 19 submittal

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: 11848

OPERATOR COMMENTS:

Bonanza requests closure of this release as it has been transfered to KPK via Remedaiton Number 11848.

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

Signed: _____ Print Name: Brian Dodek

Title: Env Manager Date: 11/08/2018 Email: bdodek@bonanzacrk.com

COA Type

Description

	Work proceeding under Remediation Project number 11848.
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Attachment Check List

Att Doc Num

Name

401832984	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401962765	FORM 19 SUBMITTED

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)