

State of Colorado Oil and Gas Conservation Commission

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Document Number:

402483258

Date Received:

09/08/2020

Spill report taken by:

Arauz, Steven

Spill/Release Point ID:

477775

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>CAERUS PICEANCE LLC</u>	Operator No: <u>10456</u>	Phone Numbers
Address: <u>1001 17TH STREET #1600</u>		Phone: <u>(970) 778-2314</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(970) 778-2314</u>
Zip: <u>80202</u>		Email: <u>jjanicek@caerusoilandgas.com</u>
Contact Person: <u>Jake Janicek</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402477865

Initial Report Date: 08/29/2020 Date of Discovery: 08/28/2020 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWSE SEC 1 TWP 7S RNG 97W MERIDIAN 6Latitude: 39.473544 Longitude: -108.166350Municipality (if within municipal boundaries): _____ County: GARFIELD

Reference Location:

Facility Type: WELL PAD☐ Facility/Location ID No _____Spill/Release Point Name: Dump Line Failure☒ Well API No. (Only if the reference facility is well) 05-045-08924☐ 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): 0Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): UnknownEstimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0Specify: Unknown volume at this time, at least 1 bbl outside of containment

Land Use:

Current Land Use: NON-CROP LANDOther(Specify): RangelandWeather Condition: CloudySurface Owner: FEEOther(Specify): Puckett

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):

Dump Line failure identifie during Pressure Test.

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: 09/08/2020

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input 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? 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): _____ Width of Impact (feet): _____

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

How was extent determined?

Extent is still being determined.

Soil/Geology Description:

Parachute-Rhone loams, 5 to 30 percent slopes

Depth to Groundwater (feet BGS) 200 Number Water Wells within 1/2 mile radius: 0

If less than 1 mile, distance in feet to nearest	Water Well	<u>3693</u>	None <input type="checkbox"/>	Surface Water	<u>1003</u>	None <input type="checkbox"/>
	Wetlands	_____	None <input checked="" type="checkbox"/>	Springs	<u>1112</u>	None <input type="checkbox"/>
	Livestock	_____	None <input checked="" type="checkbox"/>	Occupied Building	_____	None <input checked="" type="checkbox"/>

Additional Spill Details Not Provided Above:

Soil samples were collected from the point of release on 9/4/2020. Sample results will be provided once they have been received.

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:

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

Signed: _____ Print Name: Jake Janicek

Title: EHS Specialist Date: 09/08/2020 Email: jjanicek@caerusoilandgas.com

<u>COA Type</u>	<u>Description</u>
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402483258	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402483260	TOPOGRAPHIC MAP
402486890	FORM 19 SUBMITTED

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Environmental	Comply with COAs listed on doc #402477865	09/11/2020

Total: 1 comment(s)