

FORM 19
Rev 6/99

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax:(303)894-2109



FOR OGCC USE ONLY

Spill report taken by:

FACILITY ID:

This form is to be submitted by the party responsible for the oil and gas spill or release. Any spill or release which may impact waters of the State must be reported as soon as practicable; any spill over 20 bbls must be reported within 24 hours and all spills over five bbls must be reported within ten days. Submit a Site Investigation and Remediation

SPILL/RELEASE REPORT

OPERATOR INFORMATION

Name of Operator: <u>Noble Energy</u> OGCC Operator No: <u>10120</u>	Phone Numbers
Address: <u>804 Grand Ave.</u>	No: <u>970 785-5000</u>
City: <u>Platteville</u> State: <u>CO</u> Zip: <u>80651</u>	Fax: <u>970 785-5099</u>
Contact Person: <u>Marty Faraguna</u>	Email: <u>Mfaraguna@nobleenergyinc.com</u>

DESCRIPTION OF SPILL OR RELEASE

Date of Incident: <u>2/1/201</u> Facility Name & No: <u>LDS F1-27,28</u>	County: <u>Weld</u>
Type of Facility (well, tank battery, flow line, pit): <u>tank battery</u>	QtrQtr: <u>SESE</u> Section: <u>36</u>
Well Name and Number: _____	Township: <u>6N</u> Range: <u>65W</u>
API Number: <u>05-123-29795</u>	Meridian: <u>6th</u>
Specify volume spilled and recovered (in bbls) for the following materials:	
Oil spilled: <u>18</u> Oil recov'd: <u>15</u> Water spilled: _____ Water recov'd: _____ Other spilled: _____ Other recov'd: _____	
Ground Water impacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Surface Water impacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Contained within berm? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Area and vertical extent of spill: _____ 20' x 30' x .5'
Current land use: <u>crops</u>	Weather conditions: <u>clear, cold</u>
Soil/geology description: <u>Olney fine sandy loam</u>	
IF LESS THAN A MILE , report distance IN FEET to nearest ... Surface water: _____ wetlands: _____ buildings: <u>600'</u>	
Livestock: _____ Water wells: <u>210'</u> Depth to shallowest ground water: _____	
Cause of spill (e.g. equipment failure, human error, etc.): <u>equipment failure</u> Detailed description of the spill/release incident:	
<u>Side cover on flowback tank leaking.</u>	

CORRECTIVE ACTION

Describe immediate response (how stopped, contained and recovered): Standing liquid was recovered by vac truck and returned to production tank.

Describe any emergency pits constructed:

How was the extent of contamination determined?

Further remediation activities proposed (attach separate sheet if needed): Impacted soils will be excavated and taken to Noble landfarm.

Describe measures taken to prevent problem from reoccurring: Tank was removed and replaced.

OTHER NOTIFICATIONS

List the parties and agencies notified (County, BLM, EPA, DOT, Local Emergency Planning Coordinator or other).

Date	Agency	Contact	Phone	Response

Spill/Release Tracking No: _____