

**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

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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>01/19/2010</u> Facility Name & No: <u>70 Ranch USX BB 9-8,9</u>	County: <u>Weld</u>
Type of Facility (well, tank battery, flow line, pit): <u>tank battery</u>	QtrQtr: <u>SESE</u> Section: <u>5</u>
Well Name and Number: _____	Township: <u>5N</u> Range: <u>63W</u>
API Number: <u>05-123-28073</u>	Meridian: <u>6th</u>
Specify volume spilled and recovered (in bbls) for the following materials:	
Oil spilled: <u>35</u> Oil recov'd: <u>30</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: _____ TBD
Current land use: <u>pasture</u> Weather conditions: <u>snowy, cold</u>	
Soil/geology description: <u>valent sand</u>	
<b>IF LESS THAN A MILE</b> , report distance <b>IN FEET</b> to nearest ... Surface water: _____ wetlands: _____ buildings: _____	
Livestock: _____ Water wells: _____ Depth to shallowest ground water: _____	
Cause of spill (e.g. equipment failure, human error, etc.): <u>human error</u>	Detailed description of the spill/release incident:
<u>Transport driver failed to close auxillary valve during loading operations and release oil from transport.</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 scraped and taken to the North Weld Landfill.

Describe measures taken to prevent problem from reoccurring: Driver disciplined and loading procedures reviewed.

**OTHER NOTIFICATIONS**

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

Date	Agency	Contact	Phone	Response
01/19/2010	COGCC	J. Axelson		verbal notification

Spill/Release Tracking No: \_\_\_\_\_