

State of Colorado
Oil and Gas Conservation Commission

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06/03/2014

SPILL/RELEASE REPORT (SUPPLEMENTAL)

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 Workplan (Form 27) when requested by the Director.

Spill report taken by:
CANFIELD, CHRIS

Spill/Release Point ID:
437363

OPERATOR INFORMATION

Name of Operator: <u>NOBLE ENERGY INC</u>	OGCC Operator No: <u>100322</u>	Phone Numbers
Address: <u>1625 BROADWAY STE 2200</u>		Phone: <u>(720) 5872026</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Jacob Evans</u>		Mobile: <u>()</u>
		Email: <u>jevans@nobleenergyinc.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Report Date: 05/19/2014 Date of Discovery: 05/16/2014 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NESE SEC 15 TWP 1S RNG 68W MERIDIAN 6

Latitude: 39.963000 Longitude: -104.981439

Municipality (if within municipal boundaries): Thornton County: ADAMS

Reference Location:

Facility Type: TANK BATTERY Well API No. (if the reference facility is well) 05- -
 Facility ID (if not a well) _____
 No Existing Facility ID

Fluid(s) Spilled/Released (please answer Yes/No):

Was one (1) barrel or more spilled outside of berms or secondary containment? Yes

Were Five (5) barrels or more spilled? No

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

Estimated Oil Spill Volume(bbl): <u>0</u>	Estimated Condensate Spill Volume(bbl): <u>0</u>
Estimated Flow Back Fluid Spill Volume(bbl): <u>0</u>	Estimated Produced Water Spill Volume(bbl): <u>Unknown</u>
Estimated Other E&P Waste Spill Volume(bbl): <u>0</u>	Estimated Drilling Fluid Spill Volume(bbl): <u>0</u>

Specify: _____

Land Use:

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

Weather Condition: Sunny warm

Surface 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

Describe what is known about the spill/release event (what happened -- including how it was stopped, contained, and recovered):

During a water vault replacement, a pin hole leak was discovered at the base of the vault. A third party environmental consultant was notified and responded to the unintentional release.

COGCC Comment Only:

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
5/15/2014	COGCC	Bob Chesson	-	Emailed 24 hr notification
5/15/2014	Thornton Emergency Dept		-	Left message detailing spill
5/15/2014	Noble Land	Landowner	-	

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 06/03/2014

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	<u>0</u>	<u>0</u>	<input type="checkbox"/>
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>
PRODUCED WATER	<u> </u>	<u> </u>	<input checked="" type="checkbox"/>
DRILLING FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
FLOW BACK FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
OTHER E&P WASTE	<u>0</u>	<u>0</u>	<input type="checkbox"/>

specify: _____

Was spill/release completely contained within berms or secondary containment? NO Was an Emergency Pit constructed? NO

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?

The extent of impacts will be determined after impacted soil and lab confirmation soil samples are collected.

Soil/Geology Description:

Ulm Loam 3-5 percent slopes

Depth to Groundwater (feet BGS) 20 Number Water Wells within 1/2 mile radius: 4

If less than 1 mile, distance in feet to nearest
 Water Well 768 None Surface Water 142 None
 Wetlands _____ None Springs _____ None
 Livestock _____ None Occupied Building 768 None

Additional Spill Details Not Provided Above:

No additional spill details at this time

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 06/03/2014

Cause of Spill (Check all that apply) Human Error Equipment Failure Historical-Unknown
 Other (specify) _____

Describe Incident & Root Cause (include specific equipment and point of failure)

During water vault removal a leak was discovered. The water vault was removed and all production equipment was shut in. Remediation will be scheduled

Describe measures taken to prevent the problem(s) from reoccurring:

Water vaults will go through integrity testing to determine if a leak has occurred. If a leak is suspected the water vault will be removed and inspected.

Volume of Soil Excavated (cubic yards): _____

Disposition of Excavated Soil (attach documentation) Offsite Disposal Onsite Treatment
 Other (specify) _____

Volume of Impacted Ground Water Removed (bbls): _____

Volume of Impacted Surface Water Removed (bbls): _____

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 Number: _____

COGCC Comment:

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

Signed: _____ Print Name: Jacob Evans
 Title: Env. Spec Date: 06/03/2014 Email: jevans@nobleenergyinc.com

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)