

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:

400644143

Date Received:

07/15/2014

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

438227

SPILL/RELEASE REPORT (INITIAL)

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.

OPERATOR INFORMATION

| | | |
|--|---------------------------|--|
| Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u> | Operator No: <u>47120</u> | Phone Numbers |
| Address: <u>P O BOX 173779</u> | | Phone: <u>(720) 929-6368</u> |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u> | | Mobile: <u>(785) 691-7788</u> |
| Contact Person: <u>Mike Dinkel</u> | | Email: <u>Mike.Dinkel@anadarko.com</u> |

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400644143

Initial Report Date: 07/14/2014 Date of Discovery: 07/13/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWNW SEC 32 TWP 1N RNG 67W MERIDIAN 6

Latitude: 40.008551 Longitude: -104.922354

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

Reference Location:

Facility Type: WELL Facility/Location ID No _____
 No Existing Facility or Location ID No.
 Well API No. (Only if the reference facility is well) 05-123-37911

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

Was one (1) barrel or more spilled outside of berms or secondary containment? No

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? Yes

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

Estimated Oil Spill Volume(bbl): 0 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): >=5 and <100

Specify: _____

Land Use:

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

Weather Condition: Warm, mostly clear

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

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):

On July 13, 2014, while moving drilling mud storage tanks into position at the Howard 30C-29HZ drill site, a side hatch on one of the tanks was damaged, releasing approximately 43.75 bbls of water-based drilling mud into the lined containment. Clean up operations involving vacuum trucks and power washers were conducted; all 43.75 bbl were recovered. No drilling mud left the lined containment, and the release did not threaten to enter a water of the state.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

| <u>Date</u> | <u>Agency/Party</u> | <u>Contact</u> | <u>Phone</u> | <u>Response</u> |
|-------------|---------------------|----------------|--------------|-----------------|
| 7/13/2014 | County | Tom Parko | -email | |
| 7/13/2014 | County | Roy Rudisill | -email | |

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

Signed: _____ Print Name: Mike Dinkel
Title: Sr. HSE Representative Date: 07/15/2014 Email: Mike.Dinkel@anadarko.com

COA Type

Description

| | |
|--|--|
| | |
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Attachment Check List

Att Doc Num

Name

| | |
|-----------|-------------------|
| 400644143 | FORM 19 SUBMITTED |
| 400644180 | TOPOGRAPHIC MAP |

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

| | | |
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Total: 0 comment(s)