

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:

400647880

Date Received:

07/22/2014

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

438227

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.

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>	Mobile: <u>(785) 691-7788</u>
Zip: <u>80217-3779</u>		Email: <u>mike.dinkel@anadarko.com</u>
Contact Person: <u>Mike Dinkel</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 6Latitude: 40.008551 Longitude: -104.922354Municipality (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): 0Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): 0Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): >=5 and <100

Specify: _____

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____Weather Condition: Warm, mostly clearSurface 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

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

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 07/22/2014		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	0	<input type="checkbox"/>
DRILLING FLUID	44	44	<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? YES 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): 70 Width of Impact (feet): 50

Depth of Impact (feet BGS): 0 Depth of Impact (inches BGS): _____

How was extent determined?

The entire 43.75 barrel release volume was contained within the lined 50' by 70' containment; no drilling mud impacted any other media. Because the entire 43.75 barrel release was recovered and no media were impacted, no soil samples were collected. As there are no remaining site impacts, a No Further Action determination is being requested.

Soil/Geology Description:

Sandy loam

Depth to Groundwater (feet BGS) 489 Number Water Wells within 1/2 mile radius: 7

If less than 1 mile, distance in feet to nearest

Water Well	<u>1462</u>	None <input type="checkbox"/>	Surface Water	<u>450</u>	None <input type="checkbox"/>
Wetlands	_____	None <input checked="" type="checkbox"/>	Springs	_____	None <input checked="" type="checkbox"/>
Livestock	_____	None <input checked="" type="checkbox"/>	Occupied Building	<u>1575</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

CORRECTIVE ACTIONS

#1	Supplemental Report Date: 07/22/2014
Cause of Spill (Check all that apply) <input checked="" type="checkbox"/> Human Error <input type="checkbox"/> Equipment Failure <input type="checkbox"/> Historical-Unknown <input type="checkbox"/> Other (specify) _____	
Describe Incident & Root Cause (include specific equipment and point of failure)	
During operations, two drilling mud storage tanks were placed too close together, causing two bolts on the tank cleanout plate to fail.	
Describe measures taken to prevent the problem(s) from reoccurring:	
Subcontractors will utilize a spotter when moving tanks to provide enough space between tanks.	
Volume of Soil Excavated (cubic yards): 0	
Disposition of Excavated Soil (attach documentation) <input type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment <input type="checkbox"/> Other (specify) _____	
Volume of Impacted Ground Water Removed (bbls): 0	
Volume of Impacted Surface Water Removed (bbls): 0	

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: _____

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: Senior HSE Representative Date: 07/22/2014 Email: mike.dinkel@anadarko.com

COA Type

Description

	Based on review of the information submitted, it appears that no further action is required at this time. Should future conditions indicate contaminant concentrations in soils exceeding COGCC standards, or if ground water is found to have been impacted, further investigation and remediation activities may be required. The subject spill/release report will be closed in the COGIS system.
--	--

Attachment Check List

Att Doc Num

Name

400647880	FORM 19 SUBMITTED
400648455	TOPOGRAPHIC MAP

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

--	--	--

Total: 0 comment(s)