

**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:

400737992

Date Received:

11/21/2014

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

439809

## 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>WPX ENERGY ROCKY MOUNTAIN LLC</u>	Operator No: <u>96850</u>	<b>Phone Numbers</b>
Address: <u>1001 17TH STREET - SUITE #1200</u>		Phone: <u>(970) 6832295</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(970) 5890743</u>
Zip: <u>80202</u>		Email: <u>karolina.blaney@wpenergy.com</u>
Contact Person: <u>Karolina Blaney</u>		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400731131

Initial Report Date: 11/13/2014      Date of Discovery: 11/13/2014      Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWNE SEC 1 TWP 7S RNG 95W MERIDIAN 6Latitude: 39.470107 Longitude: -107.943220Municipality (if within municipal boundaries): \_\_\_\_\_ County: GARFIELD

#### Reference Location:

Facility Type: WELL PAD ☒ Facility/Location ID No 334706☐ No Existing Facility or Location ID No.☐ Well API No. (Only if the reference facility is well) 05- -

#### **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): >=100Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: \_\_\_\_\_

#### **Land Use:**

Current Land Use: NON-CROP LAND

Other(Specify): \_\_\_\_\_

Weather Condition: Cold, snowySurface 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):

This spill was caused by human error. An employee left a valve open which caused uncontrolled venting from the well to over pressurize a 300 bbl produced water tank. The entire release was contained within lined SPCC containment. No fluids escaped the containment. 100 % of the volume released was recovered.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
11/13/2014	COGCC	Stan Spencer	970-625-2497	Initial Form 19
11/13/2014	County	Kirby Wynn	970-625-5905	email
11/13/2014	Fire Department	David Blair	970-285-9119	email
11/13/2014	Surface Owner		-	WPX Energy

**SPILL/RELEASE DETAIL REPORTS**

#1	Supplemental Report Date: 11/21/2014		
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	300	300	<input type="checkbox"/>
DRILLING FLUID	0	0	<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? <u>YES</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, including walls &amp; floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
<b>A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit</b>			
Impacted Media (Check all that apply) <input type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): 68		Width of Impact (feet): 51	
Depth of Impact (feet BGS): _____		Depth of Impact (inches BGS): _____	
How was extent determined?			
By field measurements and mapping with a Trimble GPS unit.			
Soil/Geology Description:			
Vale silt loam - Silt to silty clay loam			
Depth to Groundwater (feet BGS) 70		Number Water Wells within 1/2 mile radius: 2	
If less than 1 mile, distance in feet to nearest		Water Well 2815	None <input type="checkbox"/>
		Wetlands	None <input checked="" type="checkbox"/>
		Livestock	None <input checked="" type="checkbox"/>
		Surface Water 4222	None <input type="checkbox"/>
		Springs	None <input checked="" type="checkbox"/>
		Occupied Building 3030	None <input type="checkbox"/>
Additional Spill Details Not Provided Above:			

A production employee left a dump line valve open on one of the separators which resulted in uncontrolled venting of gas from one of the wells into the line. This over pressurized one of the 300 barrel produced water tanks and caused it to overflow. The produced water from the tank migrated out into the steel lined SPCC containment structure. When the release was discovered, production personnel shut the open dump line valve. Vac trucks were dispatched to the location to vacuum off the free standing fluids from the lined SPCC containment structure. The entire release was contained within the lined SPCC containment structure. No fluids migrated out of the containment structure. The lined SPCC containment structure performed as it was designed and captured all of the fluids from the release allowing for 100 percent recovery.

## CORRECTIVE ACTIONS

#1	Supplemental Report Date:	11/21/2014
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)		
A production employee left a dump line valve open on one of the separators which resulted in uncontrolled venting of gas from one of the wells into the line. This over pressurized one of the 300 barrel produced water tanks and caused it to overflow. The produced water from the tank migrated out into the steel lined SPCC containment structure.		
Describe measures taken to prevent the problem(s) from reoccurring:		
The production employee responsible for the release will be retrained on company protocol in regards to checking and closing the correct valves when on location.		
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): _____		
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 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: Karolina Blaney

Title: Environmental Specialist Date: 11/21/2014 Email: karolina.blaney@wpenergy.com

## COA Type

## Description

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## Attachment Check List

Att Doc Num	Name
400737992	FORM 19 SUBMITTED
400738013	AERIAL PHOTOGRAPH

Total Attach: 2 Files

## General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)