

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:

400754582

Date Received:

12/17/2014

Spill report taken by:

CHESSON, BOB

Spill/Release Point ID:

439760

### 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>NOBLE ENERGY INC</u>	Operator No: <u>100322</u>	<b>Phone Numbers</b>
Address: <u>1625 BROADWAY STE 2200</u>		Phone: <u>(970) 3045329</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>		Mobile: <u>( )</u>
Contact Person: <u>Jacob Evans</u>		Email: <u>jevans@nobleenergyinc.com</u>

#### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400726308

Initial Report Date: 11/07/2014 Date of Discovery: 11/07/2014 Spill Type: Historical Release

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NESW SEC 28 TWP 2N RNG 62W MERIDIAN 6

Latitude: 40.107002 Longitude: -104.333376

Municipality (if within municipal boundaries): \_\_\_\_\_ County: WELD

#### Reference Location:

Facility Type: FLOWLINE  Facility/Location ID No 330021  
 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? Yes

*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? No

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

Estimated Oil Spill Volume(bbl): 0 Estimated Condensate Spill Volume(bbl): Unknown

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): Unknown

Estimated Other E&P Waste Spill Volume(bbl): 0 Estimated Drilling Fluid Spill Volume(bbl): 0

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

#### Land Use:

Current Land Use: CROP LAND Other(Specify): \_\_\_\_\_

Weather Condition: 55 partly sunny

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):

Fluids surfaced from the flowlines running from the separator to the tank battery unit. The production equipment was shut in and the flowline was uncovered. Impacted soil was discovered over COGCC Table 910-1 standards. Excavation of impacted soil is scheduled

List Agencies and Other Parties Notified:

### SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: \_\_\_\_\_

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

specify: \_\_\_\_\_

Was spill/release completely contained within berms or secondary containment? NO 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): \_\_\_\_\_ Width of Impact (feet): \_\_\_\_\_

Depth of Impact (feet BGS): \_\_\_\_\_ Depth of Impact (inches BGS): \_\_\_\_\_

How was extent determined?

Soil/Geology Description:

Depth to Groundwater (feet BGS) \_\_\_\_\_

Number Water Wells within 1/2 mile radius: \_\_\_\_\_

If less than 1 mile, distance in feet to nearest	Water Well _____	None <input type="checkbox"/>	Surface Water _____	None <input type="checkbox"/>
	Wetlands _____	None <input type="checkbox"/>	Springs _____	None <input type="checkbox"/>
	Livestock _____	None <input type="checkbox"/>	Occupied Building _____	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

## 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: 8818

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: Environmental Specialist Date: 12/17/2014 Email: jevans@nobleenergyinc.com

### COA Type

### Description

<u>COA Type</u>	<u>Description</u>

## Attachment Check List

### Att Doc Num

### Name

400754582	FORM 19 SUBMITTED
400754605	OTHER
400754609	OTHER

Total Attach: 3 Files

## General Comments

### User Group

### Comment

### Comment Date

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

Total: 0 comment(s)