

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:

400818952

Date Received:

04/02/2015

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

441351

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>	Phone Numbers
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@wpxenergy.com</u>
Contact Person: <u>Karolina Blaney</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400815902

Initial Report Date: 03/26/2015 Date of Discovery: 03/26/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 27 TWP 6S RNG 94W MERIDIAN 6Latitude: 39.501040 Longitude: -107.882523Municipality (if within municipal boundaries): _____ County: GARFIELD

Reference Location:

Facility Type: WELL PAD ☒ Facility/Location ID No 324122☐ 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? 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): >=5 and <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: warm, sunnySurface 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):

The release was caused by corrosion of the produced water tank. Estimated 10 bbls of produced water leaked out of the tank into the dirt SPCC containment, saturated through a portion of the berm, and migrated 10' to the southwest of the SPCC containment. Though the spill reached a rill on the edge of the pad, it did not leave the footprint of the pad surface, so was contained on location.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
03/26/2015	COGCC	Stan Spencer	970-987-2497	Initial Form 19
03/26/2015	County	Kirby Wynn	970-625-5905	Email
03/26/2015	Fire Department	Orrin Moon	970-625-1243	Email
03/26/2015	Surface owner		-	Phone call

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 04/02/2015		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	10	2	<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>NO</u> Was an Emergency Pit constructed? <u>NO</u>			
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) <input checked="" 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): <u>46</u>		Width of Impact (feet): <u>21</u>	
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:			
Map Unit Symbol - 3 - Arvada Loam - Highly saline alluvium derived from sandstone and shale			
Depth to Groundwater (feet BGS) <u>70</u>		Number Water Wells within 1/2 mile radius: <u>0</u>	
If less than 1 mile, distance in feet to nearest	Water Well <u>4088</u> None <input type="checkbox"/>	Surface Water <u>2318</u> None <input type="checkbox"/>	
	Wetlands <u>1136</u> None <input type="checkbox"/>	Springs <u>4737</u> None <input type="checkbox"/>	
	Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building <u>4055</u> None <input type="checkbox"/>	
Additional Spill Details Not Provided Above:			

The produced water tank developed a small hole near the bottom of the tank due to corrosion of the metal. This allowed produced water to flow out into the earthen SPCC containment structure. When the release was discovered, production personnel halted the transfer of fluids to the compromised tank. The tank was then drained of any remaining fluids and removed from service. The area impacted by the release was field screened for hydrocarbon content. Field screening results indicated residual contaminant levels below the COGCC Table 910-1 standard of 500 ppm TPH in soil. Confirmation sample was collected and submitted to an accredited laboratory for analysis. Further remedial action, if warranted, will be based on the laboratory results. WPX would like to ask for COGCC's permission to analyze the confirmation samples for an abbreviated list of Table 910-1 analytes. The samples would be analyzed for TPH, BTEX, PAHs, and inorganics. The samples would not be analyzed for metals.

CORRECTIVE ACTIONS

#1	Supplemental Report Date: 04/02/2015
Cause of Spill (Check all that apply)	
<input type="checkbox"/> Human Error	<input checked="" type="checkbox"/> Equipment Failure
<input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Historical-Unknown
Describe Incident & Root Cause (include specific equipment and point of failure)	
The produced water tank developed a small hole near the bottom of the tank due to corrosion of the metal. This allowed produced water to flow out into the earthen SPCC containment structure.	
Describe measures taken to prevent the problem(s) from reoccurring:	
The earthen SPCC containment is being replaced with a steel SPCC containment structure with an impervious plastic liner. In addition, the replacement tank is internally coated with poly liner. All new tanks are inspected prior to placing them into the containment structures to check for possible paint chips, faulty welds, or other factors which could lead to early corrosion of the metal. The SPCC inspectors will also conduct more detailed inspections of all tanks in the field to check for possible corrosion.	
Volume of Soil Excavated (cubic yards): _____	
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: 04/02/2015 Email: karolina.blaney@wpxenergy.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

400818952	FORM 19 SUBMITTED
400818966	AERIAL PHOTOGRAPH

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Agency	Approved revised analytical list which includes all probable contaminants of concern.	04/03/2015 2:14:27 PM

Total: 1 comment(s)