

State of Colorado Oil and Gas Conservation Commission

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Document Number:

400890327

Date Received:

08/28/2015

Spill report taken by:

Spill/Release Point ID:

SPILL/RELEASE REPORT (INITIAL /w 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: KERR MCGEE OIL & GAS ONSHORE LP

Operator No: 47120

Address: P O BOX 173779

City: DENVER

State: CO

Zip: 80217-3779

Contact Person: Phillip Hamlin

Phone Numbers

Phone: (970) 336-3500

Mobile: (970) 515-1161

Email: Phil.Hamlin@Anadarko.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400890327

Initial Report Date: 08/26/2015

Date of Discovery: 08/26/2015

Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 19 TWP 3N RNG 67W MERIDIAN 6

Latitude: 40.215889 Longitude: -104.938253

Municipality (if within municipal boundaries): County: WELD

Reference Location:

Facility Type: TANK BATTERY

☒ Facility/Location ID No 336145☐ 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): Unknown

Estimated Condensate Spill Volume(bbl): 0

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: Historical Release - Volume of the release is unknown.

Land Use:

Current Land Use: OTHER

Other(Specify): Tank Battery

Weather Condition: Sunny, 80 degrees F

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):

While deconstructing the HSR-Sekich-63N67W/19SWNW location, soil with historical petroleum hydrocarbon impacts was encountered beneath the production tanks. During excavation activities of the impacted soil, groundwater was encountered in the excavation at approximately 7.5 feet below ground surface. One groundwater sample (GW01) was submitted for laboratory analysis of BTEX. Laboratory analytical results received on August 26, 2015 indicated that benzene and total xylenes concentrations exceeded the CGWQS. The excavation soil and groundwater sample analytical results are summarized in the supplemental Spill/Release Detail Report. A topographic Site Location Map showing the general location of the release is attached as Figure 1.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
8/26/2015	Weld County	Roy Rudisill	-Email	
8/26/2015	Weld County	Troy Swain	-Email	
8/26/2015	Landowner	Landowner	-Phone	

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 08/28/2015		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL			<input checked="" type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER			<input checked="" 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? 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): 36 Width of Impact (feet): 30

Depth of Impact (feet BGS): 8 Depth of Impact (inches BGS): 6

How was extent determined?

On August 24, 2015, five confirmation sidewall soil samples (N01@6.5', E01@6.5', S01@6.5', W01@6.5', and W02@6.5') were collected from the excavation and submitted for laboratory analysis of TPH, BTEX, pH, and EC. Laboratory results indicated that excavation sidewall sample S01@6.5' exceeded the COGCC Table 910-1 allowable level for TPH at a concentration of 1,250 mg/kg. On August 25, 2015, following the removal of additional soil, two additional soil samples (E02@6.5' and S02@6.5') were collected from the eastern and southern sidewalls and submitted for laboratory analysis of TPH, BTEX, pH, and EC. One groundwater sample (GW01) was submitted for laboratory analysis of BTEX. Laboratory analytical results for the excavation sidewall soil samples indicated that TPH, BTEX, pH, and EC levels/concentrations were in compliance with COGCC Table 910-1 allowable levels at the extent of the excavation. Laboratory analytical results for groundwater sample GW01 indicated that benzene and total xylenes concentrations exceeded the CGWQS at concentrations of 45.7 µg/L and 3,090 µg/L, respectively. Approximately 270 cubic yards of soil were excavated and transported to the Kerr-McGee land treatment facility in Weld County, Colorado. Prior to backfilling the excavation, 150 pounds of COGAC®, a carbon-based groundwater remediation product, was applied to the groundwater in the excavation. The general site layout, excavation dimensions, and confirmation soil and groundwater sample locations are shown on the Excavation Site Map attached as Figure 2. The analytical results for the excavation soil and groundwater confirmation samples are summarized in Tables 1 and 2, respectively. The laboratory analytical reports are attached.

Soil/Geology Description:

Clay, Sandy Clays, and Sandy Loam.

Depth to Groundwater (feet BGS) 7 Number Water Wells within 1/2 mile radius: 3

If less than 1 mile, distance in feet to nearest Water Well 570 None ☐ Surface Water 1680 None ☐

Wetlands 3780 None ☐ Springs None ☒

Livestock 1180 None ☐ Occupied Building 850 None ☐

Additional Spill Details Not Provided Above:

Groundwater monitoring wells will be installed at the site to determine the extent and magnitude of the groundwater impacts. Additional details will be provided in a Form 27.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 08/28/2015

Cause of Spill (Check all that apply) ☐ Human Error ☐ Equipment Failure ☒ Historical-Unknown

☐ Other (specify) _____

Describe Incident & Root Cause (include specific equipment and point of failure)

While deconstructing the HSR-Sekich-63N67W/19SWNW location, soil with historical petroleum hydrocarbon impacts was encountered beneath the production tanks. During excavation activities of the impacted soil, groundwater was encountered in the excavation at approximately 7.5 feet below ground surface.

Describe measures taken to prevent the problem(s) from reoccurring:

The site will be deconstructed and returned to pre-release grade.

Volume of Soil Excavated (cubic yards): 270

Disposition of Excavated Soil (attach documentation) ☒ Offsite Disposal ☐ Onsite Treatment

☐ 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: _____

OPERATOR COMMENTS:

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

Signed: _____ Print Name: Phillip Hamlin

Title: Sr. HSE Representative Date: 08/28/2015 Email: Phil.Hamlin@Anadarko.com

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400890687	ANALYTICAL RESULTS
400890688	ANALYTICAL RESULTS
400890842	OTHER
400890845	TOPOGRAPHIC MAP
400892147	SITE MAP

Total Attach: 5 Files

General Comments

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

Total: 0 comment(s)