

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:

400905336

Date Received:

11/19/2015

Spill report taken by:

AXELSON, JOHN

Spill/Release Point ID:

443263

## 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: PIONEER NATURAL RESOURCES USA INC	Operator No: 10084	<b>Phone Numbers</b> Phone: (719) 846-7898 Mobile: ( ) Email: james.roybal@pxd.com
Address: 5205 N O'CONNOR BLVD STE 200		
City: IRVING	State: TX Zip: 75039	
Contact Person: James Roybal		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400902883

Initial Report Date: 09/21/2015 Date of Discovery: 09/18/2015 Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR nwnw SEC 29 TWP 31S RNG 65W MERIDIAN 6

Latitude: 37.322264 Longitude: -104.701090

Municipality (if within municipal boundaries): County: LAS ANIMAS

#### Reference Location:

Facility Type: WATER GATHERING SYSTEM/LINE ☒ Facility/Location ID No 427440

☐ 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): 0

Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): 0

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

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: 5bbls

#### Land Use:

Current Land Use: NON-CROP LAND

Other(Specify):

Weather Condition: sunny

Surface Owner: FEE

Other(Specify): Trust Land

#### 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):

Crews found water bubbling out of the ground on Friday 9/18/15 at 12:00 PM, Lease operator was called and leak was isolated. after review it was determined that it was a reportable spill estimating 5bbls of produced water were spilled. The spill ran down the lease road for about 225' were it left the access road and entered a dry drainage that was considered waters of the state with no live water. Plans for repair are being made with investigation to follow. A call was made to the CDPHE hotline, and for reference the spill occurred at the intersection of Cool Whip 22-29 well site.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
9/21/2015	CGCC	John Axelson	-	email
9/21/2015	CDPHE	Ann Nedro	-	CDPHE Hotline
9/21/2015	LACOG	Bob Lucero	-	email
9/21/2015	Land Owner	Boydenson Trust Prop.	-	Voicemail

**SPILL/RELEASE DETAIL REPORTS**

#1	Supplemental Report Date: 09/25/2015		
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	5	0	<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>			
<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 checked="" type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input checked="" type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): 405		Width of Impact (feet): 1	
Depth of Impact (feet BGS): 0		Depth of Impact (inches BGS): _____	
How was extent determined?			
GPS and visual inspection			
Soil/Geology Description:			
Taken off Form 2A. Sheet #- Delagua, Soil complex - Mt, Soil Name- Littlepine Sandy Loam			
Depth to Groundwater (feet BGS) 125		Number Water Wells within 1/2 mile radius: 4	
If less than 1 mile, distance in feet to nearest		Water Well 2150	None <input type="checkbox"/>
		Wetlands _____	None <input checked="" type="checkbox"/>
		Livestock _____	None <input checked="" type="checkbox"/>
		Surface Water 540	None <input type="checkbox"/>
		Springs _____	None <input checked="" type="checkbox"/>
		Occupied Building 2150	None <input type="checkbox"/>
Additional Spill Details Not Provided Above:			

During repiar an elctro fuse collar was found to be leaking on the 8"line that was previously repaired. Repiars to the line have been made but has not been put back in service as of yet, plans to instal a gasbuster on the line are being made and presure testing of the line will be done after the instalation of the gas buster is complete.

## CORRECTIVE ACTIONS

#1	Supplemental Report Date: 09/25/2015
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) Inadequate Design or installation have been determined as cause.	
Describe measures taken to prevent the problem(s) from reoccurring: A gasbuster will be installed on the lateral and pressure testing of the line and repairs will be done after the insallation of the gas buster is complete.	
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: \_\_\_\_\_

## 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: James Roybal

Title: Enviromental Supervisor Date: 11/19/2015 Email: james.roybal@pxd.com

## COA Type

## Description

	Based on review of information presented it appears that no further action is necessary at this time. However, should future conditions at the site indicate contaminant concentrations in soils exceeding COGCC standards or if ground water is found to be significantly impacted, further investigation and/or remediation activities may be required at the site.
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## Attachment Check List

### Att Doc Num

### Name

400905336	FORM 19 SUBMITTED
400935443	ANALYTICAL RESULTS

Total Attach: 2 Files

## General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Environmental	Returned to draft. Operator to provide comment to justify closure request.	11/18/2015 9:55:08 AM
Environmental	Contacted operator to provide statement justifying closure without sampling soil.	11/13/2015 11:42:16 AM
Environmental	Returned to draft. Operator to provide additional details to justify closure request.	10/30/2015 9:31:04 AM

Total: 3 comment(s)