

# 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:

400950706

Date Received:

12/11/2015

Spill report taken by:

Spill/Release Point ID:

## SPILL/RELEASE REPORT (INITIAL)

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	<b>Phone Numbers</b>
Address: P O BOX 173779		Phone: (970) 336-3500
City: DENVER	State: CO	Mobile: (970) 515-1238
Zip: 80217-3779		Email: Sam.LaRue@Anadarko.com
Contact Person: Sam LaRue		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400950706

Initial Report Date: 12/09/2015 Date of Discovery: 12/09/2015 Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWNE SEC 13 TWP 3N RNG 67W MERIDIAN 6

Latitude: 40.225161 Longitude: -104.834882

Municipality (if within municipal boundaries): County: WELD

#### Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 331438  
☐ 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): >=5 and <100

Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): >=5 and <100

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

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: Approximately 31 barrels of oil and 10 barrels of water were released into lined containment.

#### Land Use:

Current Land Use: OTHER Other(Specify): Tank Battery

Weather Condition: Sunny, 50 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):

During a routine site visit regarding a recent equipment upgrade associated with the Pogg-63N67W/13SENE tank battery, an operator discovered two pinhole leaks at the bottom of an oil tank onsite. Approximately 31 barrels of oil and 10 barrels of water were released into lined containment. A hydro-vacuum rig was utilized to recover approximately 22.5 barrels of oil and 5 barrels of water. The remaining impacted pea gravel/road base will also be recovered utilizing a hydro-vacuum rig. Confirmation soil samples will be collected from the release area or excavation, as applicable. The analytical results and excavation details will be provided in a supplemental report. A topographic Site Location Map showing the general location of the release is provided as Figure 1.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
12/9/2015	Weld County	Roy Rudisill	-	Notified via Email
12/9/2015	Weld County	Troy Swain	-	Notified via Email
12/9/2015	Weld County	Tom Parko	-	Notified via Email
12/9/2015	Landowner	Landowner	-	Notified via Phone

**OPERATOR COMMENTS:**

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

Signed: \_\_\_\_\_ Print Name: Sam LaRue

Title: Sr. HSE Representative Date: 12/11/2015 Email: Sam.LaRue@Anadarko.com

**COA Type**

**Description**

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**Attachment Check List**

**Att Doc Num**

**Name**

400950837	TOPOGRAPHIC MAP
400950840	OTHER

Total Attach: 2 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

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Total: 0 comment(s)