

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:

401040901

Date Received:

05/04/2016

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

437551

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: WPX ENERGY ROCKY MOUNTAIN LLC	Operator No: 96850	Phone Numbers
Address: PO BOX 370		Phone: (970) 6832295
City: PARACHUTE	State: CO Zip: 81635	Mobile: (970) 589073
Contact Person: Karolina Blaney		Email: karolina.blaney@wpenergy.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400621034

Initial Report Date: 06/04/2014 Date of Discovery: 06/04/2014 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SENW SEC 19 TWP 2S RNG 98W MERIDIAN 6

Latitude: 39.863315 Longitude: -108.436616

Municipality (if within municipal boundaries): County: RIO BLANCO

Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 422672☐ 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): >=5 and <100

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

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify:

Land Use:

Current Land Use: NON-CROP LAND Other(Specify):

Weather Condition: warm, dry, 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):

The Mautz Ranch water receiving tank farm is being upgraded and when the tanks and the liner were removed, a historical impact to soil was discovered. The cause of this release is unknown. The total volume is estimated to be approximately 7bbls.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
6/4/2014	COGCC	Stan Spencer	970-625-2497	initial Form 19
6/4/2014	County	Mark Sprague	970-878-9584	Email
6/4/2014	Fire Department	Steve Allen	970-824-1682	Email
6/4/2014	Public Health	Jeremy Simmons	970-878-9526	Email
6/4/2014	Sheriff	Si Woodruff	970-878-9620	Email

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: Karolina Blaney

Title: Environmental Specialist Date: 05/04/2016 Email: karolina.blaney@wpenergy.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

401040909	ANALYTICAL RESULTS
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)