

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:

401074926

Date Received:

07/14/2016

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

446156

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>KERR MCGEE OIL & GAS ONSHORE LP</u>	Operator No: <u>47120</u>	Phone Numbers
Address: <u>P O BOX 173779</u>		Phone: <u>(970) 336-3500</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>		Mobile: <u>(970) 515-1238</u>
Contact Person: <u>Sam LaRue</u>		Email: <u>Sam.LaRue@anadarko.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401062002

Initial Report Date: 06/13/2016 Date of Discovery: 06/11/2016 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWSE SEC 32 TWP 2N RNG 66W MERIDIAN 6

Latitude: 40.093735 Longitude: -104.797396

Municipality (if within municipal boundaries): _____ County: WELD

Reference Location:

Facility Type: WELL Facility/Location ID No _____
 No Existing Facility or Location ID No.
 Well API No. (Only if the reference facility is well) 05-123-33141

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): >=5 and <100 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: _____

Land Use:

Current Land Use: CROP LAND Other(Specify): _____

Weather Condition: 90's, 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):

On June 11, 2016, an equipment failure on the Carter 10-32 pumping unit resulted in a release of approximately 12 barrels outside of containment. A vacuum truck was mobilized to the site to recover any standing liquids. Assessment and remediation activities at the site are ongoing. Further information will be provided in a forthcoming Form 19 Supplemental Release Report.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
6/12/2016	County	Roy Rudisill	-Email	
6/12/2016	County	Tom Parko	-Email	
6/12/2016	County	Troy Swain	-Email	

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 07/07/2016

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	12	12	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	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? 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): 118 Width of Impact (feet): 238

Depth of Impact (feet BGS): 3 Depth of Impact (inches BGS): 0

How was extent determined?

On June 11, 2016, an equipment failure on the Carter 10-32 pumping unit resulted in a release of approximately 12 barrels of crude oil outside of containment. A vacuum truck was mobilized to the site to recover any standing liquids. Approximately 940 cubic yards of impacted material were scraped and transported to the Buffalo Ridge Landfill in Keenesburg, Colorado for disposal. Surface scraping activities were guided in the field by screening soil for volatile organic compound (VOC) concentrations using a photoionization detector (PID). Twenty-two (22) soil samples were collected from the final extent of the affected surface area at depths ranging between 1.5 feet and 3 feet below ground surface (bgs). The soil samples were submitted to Origins Laboratory in Denver, Colorado for analysis of benzene, toluene, ethylbenzene, and total xylenes (BTEX), total petroleum hydrocarbons (TPH) - gasoline range organics (GRO) by USEPA Method 8260C, TPH - diesel and oil range organics (DRO and ORO) by USEPA Method 8015, electrical conductivity (EC), and pH. Analytical results received on June 24, 2016, indicated that organic constituents in all soil samples were below the applicable COGCC Table 910-1 standards. However, soil samples SS05@1.5', SS08@1.5', SS09@1.5', and SS11@1.5' exhibited pH levels above applicable regulatory standards. Following additional soil scraping activities in these areas, four (4) additional soil samples were subsequently collected from the original failed sample locations at approximately 3 feet bgs. The soil samples were submitted for laboratory analysis of pH. Analytical results received on June 25, 2016, indicated that the pH levels remained above the applicable regulatory standard; however, the remaining soils with pH exceedances were below the designated root zone. Based on the analytical results presented, Kerr-McGee is requesting a No Further Action (NFA) determination for this release.

Soil/Geology Description:

Road base to sandy clay.

Depth to Groundwater (feet BGS) 6 Number Water Wells within 1/2 mile radius: 28
 If less than 1 mile, distance in feet to nearest Water Well 300 None Surface Water 1365 None
 Wetlands None Springs None
 Livestock None Occupied Building 730 None

Additional Spill Details Not Provided Above:

The soil analytical results are summarized in Table 1 and soil sample locations are illustrated in Figure 2. The affected landowner was aware of and in communication with KMG regarding the spill on June 11, 2016.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 07/11/2016

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)

During routine operations, the operator discovered approximately 12 barrels of fluid released outside of containment due to an automation equipment malfunction.

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

The malfunctioning automation equipment will be replaced.

Volume of Soil Excavated (cubic yards): 940

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: Sam LaRue
 Title: Senior HSE Representative Date: 07/14/2016 Email: Sam.LaRue@anadarko.com

<u>COA Type</u>	<u>Description</u>

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401076153	ANALYTICAL RESULTS
401076353	TOPOGRAPHIC MAP
401076356	FORM 19 SUBMITTED
401076809	SITE MAP

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)