

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:

401121872

Date Received:

10/01/2016

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

447819

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>WHITING OIL & GAS CORPORATION</u>	Operator No: <u>96155</u>	Phone Numbers
Address: <u>1700 BROADWAY STE 2300</u>		Phone: <u>(970) 4673007</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(989) 3904189</u>
Zip: <u>80290</u>		Email: <u>mark.keyes@whiting.com</u>
Contact Person: <u>Mark Keyes</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401116017

Initial Report Date: 09/21/2016 Date of Discovery: 09/21/2016 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SENW SEC 12 TWP 10N RNG 58W MERIDIAN 6

Latitude: 40.854479 Longitude: -103.817459

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

Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 435656

☐ 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): >=1 and <5

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 17.6 bbls of oil and water released from tank

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): _____

Weather Condition: Partly Cloudy, 50-60 F

Surface Owner: FEE

Other(Specify): Timbro Ranch

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):

Approximately 17.6 bbls of water and oil released at the Razor 12F from a produced water tank due to a tank overflow. The battery was shutdown. All liquids were contained inside of secondary containment. Vacuum trucks were used to remove pooled liquid. Impacted soils will be removed and disposed offsite, and the integrity of the liner will be inspected.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
9/21/2016	Landowner	Ron Timmerman	970-396-5885	Notified

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 10/01/2016		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	3	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	14	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>YES</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
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) <input checked="" type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): <u>15</u>		Width of Impact (feet): <u>15</u>	
Depth of Impact (feet BGS): _____		Depth of Impact (inches BGS): <u>4</u>	
How was extent determined?			
The dimensions of the spill are estimated as it was the result of overfilling a tank inside a lined containment. The impacted pea stone and liquids were removed and the liner will be inspected for visual evidence of tears and if any concerns are noted soil samples will be collected beneath the liner.			
Soil/Geology Description:			
18 - Bushman Fine Sandy Loam; 38 - Nucla Loam			
Depth to Groundwater (feet BGS) <u>90</u>		Number Water Wells within 1/2 mile radius: <u>0</u>	
If less than 1 mile, distance in feet to nearest		Water Well _____ None <input checked="" type="checkbox"/>	Surface Water <u>990</u> None <input type="checkbox"/>
		Wetlands _____ None <input checked="" type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>
		Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building _____ None <input checked="" type="checkbox"/>
Additional Spill Details Not Provided Above:			

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:

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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: Mark Keyes

Title: Env Compliance Supv Date: 10/01/2016 Email: mark.keyes@whiting.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

401121880	TOPOGRAPHIC MAP
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)