

State of Colorado Oil and Gas Conservation Commission

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Document Number:

401157304

Date Received:

11/30/2016

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

447087

SPILL/RELEASE REPORT (SUPPLEMENTAL)

This form is to be submitted by the party responsible for the oil and gas spill or release. Refer to COGCC Rule 906.b. for reporting requirements of spills or releases of E&P Waste or produced fluids. 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	Phone Numbers
Address: P O BOX 173779		Phone: (970) 336-3500
City: DENVER	State: CO	Mobile: (970) 515-1161
Zip: 80217-3779		Email: Phil.Hamlin@anadarko.com
Contact Person: Phil Hamlin		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401086657

Initial Report Date: 08/01/2016 Date of Discovery: 07/29/2016 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESW SEC 21 TWP 2N RNG 65W MERIDIAN 6

Latitude: 40.117509 Longitude: -104.669137

Municipality (if within municipal boundaries): County: WELD

Reference Location:

Facility Type: TANK BATTERY ☐ Facility/Location ID No ☐
☒ 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? No

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): Unknown

Estimated Condensate Spill Volume(bbl): Unknown

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): Unknown

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: Sunny, 80's.

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 July 19, 2016, a corroded dumphine was encountered during plugging and abandonment activities at the Ernie F Adamson Gas Unit-62N65W /21SWSW production facility. The volume of released material is unknown. Site assessment and excavation activities are ongoing and will be summarized in a forthcoming Supplemental Form 19 Release Report.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
8/1/2016	County	Roy Rudisill	--Email	
7/29/2016	County	Tom Parko	--Email	
7/29/2016	County	Troy Swain	--Email	
7/30/2016	Land Owner	Private	--Phone	

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 11/23/2016		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL			<input checked="" type="checkbox"/>
CONDENSATE			<input checked="" type="checkbox"/>
PRODUCED WATER			<input checked="" 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 & 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 checked="" type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): <u>52</u>		Width of Impact (feet): <u>40</u>	
Depth of Impact (feet BGS): <u>35</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
Reference Supplemental Form 19 (Document No. 40108944). See attached Form 27.			
Soil/Geology Description:			
Silty sand to silty clay.			
Depth to Groundwater (feet BGS) <u>32</u>		Number Water Wells within 1/2 mile radius: <u>13</u>	
If less than 1 mile, distance in feet to nearest		Water Well <u>223</u> None <input type="checkbox"/>	Surface Water <u>1492</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 <u>750</u> None <input 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:

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

Signed: _____ Print Name: Phil Hamlin

Title: Senior HSE Representative Date: 11/30/2016 Email: Phil.Hamlin@anadarko.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

401157311	OTHER
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)