

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: <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) 515-1161</u>
Contact Person: <u>Phil Hamlin</u>		Email: <u>Phil.Hamlin@anadarko.com</u>

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 dumpline 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	<u>0</u>	<u>0</u>	<input type="checkbox"/>
FLOW BACK FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
OTHER E&P WASTE	<u>0</u>	<u>0</u>	<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): 52 Width of Impact (feet): 40

Depth of Impact (feet BGS): 35 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) 32 Number Water Wells within 1/2 mile radius: 13

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: 9925

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

<u>COA Type</u>	<u>Description</u>
	Based on review of the information submitted in project 9925, it appears that the proposed investigation activities and proposed remedial actions in the approved site investigation and remediation plan will be adequate to remediate impacted groundwater at the site of the spill. However, should future conditions at the site indicate contaminant concentrations in soils exceeding COGCC standards or if ground water is found to be significantly impacted, further investigation and/or remediation activities may be required at the site.

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401157304	FORM 19 SUBMITTED
401157311	OTHER

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Environmental	attached form 27 states spill number was not assigned but that is not the case. Spill number (facility 447087) was assigned when the initial spill (form 19) was approved on 01 August 2016 see document 401086657)	11/30/2016

Total: 1 comment(s)