

State of Colorado  
Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

401247362

Date Received:

03/30/2017

Spill report taken by:

CHESSON, BOB

Spill/Release Point ID:

447515

## 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>NOBLE ENERGY INC</u>	Operator No: <u>100322</u>	<b>Phone Numbers</b>
Address: <u>1625 BROADWAY STE 2200</u>		Phone: <u>(970) 3045329</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Jacob Evans</u>		Mobile: <u>( )</u>
		Email: <u>jacob.evans@nblenergy.com</u>

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401100982

Initial Report Date: 08/30/2016 Date of Discovery: 08/29/2016 Spill Type: Historical Release

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENW SEC 7 TWP 4N RNG 63W MERIDIAN 6

Latitude: 40.331331 Longitude: -104.483190

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): >0 and <1

Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): >0 and <1

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: 75 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):

During construction impacts to soil above COGCC Table 910-1 standards were discovered. The Frank CC 7-29D facility has been shut in and a site assessment to evaluate impacts has been scheduled through a third party environmental consultant.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
8/29/2016	COGCC	Bob Chesson	-	Emailed notice
8/29/2016	Weld County	Roy Rudisill	-	Emailed notice
8/29/2016	Noble Land	Landowner	-	Emailed notice

**CORRECTIVE ACTIONS**

#1	Supplemental Report Date:	03/30/2017
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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 excavation of impacted soil the flowline was determined to have external corrosive holes that formed

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

The flowline was flushed and abandoned in place. Annual pressure tests have been implemented.

Volume of Soil Excavated (cubic yards): \_\_\_\_\_

Disposition of Excavated Soil (attach documentation) ☐ Offsite Disposal ☐ Onsite Treatment  
☐ Other (specify) \_\_\_\_\_

Volume of Impacted Ground Water Removed (bbls): \_\_\_\_\_

Volume of Impacted Surface Water Removed (bbls): \_\_\_\_\_

**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: 10113

**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: Jacob Evans

Title: Environmental Coordinator Date: 03/30/2017 Email: jacob.evans@nblenergy.com

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

**Attachment Check List**

<u>Att Doc Num</u>	<u>Name</u>
401247362	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401249483	FORM 19 SUBMITTED

Total Attach: 2 Files

**General Comments**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)