

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

401416064

Date Received:

09/29/2017

Spill report taken by:

Spill/Release Point ID:

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 Phone: <u>(970) 336-3500</u> Mobile: <u>(970) 515-1431</u> Email: <u>Paul.Schwarz@anadarko.com</u> |
| Address: <u>P O BOX 173779</u> | | | | |
| City: <u>DENVER</u> | State: <u>CO</u> | Zip: <u>80217-3779</u> | | |
| Contact Person: <u>Paul Schwarz</u> | | | | |

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401410893

| | | | | | |
|----------------------|------------|--------------------|------------|-------------|--------------------|
| Initial Report Date: | 09/22/2017 | Date of Discovery: | 09/21/2017 | Spill Type: | Historical Release |
|----------------------|------------|--------------------|------------|-------------|--------------------|

Spill/Release Point Location:

| | | | | | | | | | | |
|----------------------------|--------|------|-----|----|-----|----|-----|-----|----------|---|
| Location of Spill/Release: | QTRQTR | NENE | SEC | 10 | TWP | 1N | RNG | 68W | MERIDIAN | 6 |
|----------------------------|--------|------|-----|----|-----|----|-----|-----|----------|---|

Latitude: 40.071457 Longitude: -104.983087

Municipality (if within municipal boundaries): Erie 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: CROP LAND Other(Specify):

Weather Condition: Sunny ~ 80 degrees F.

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 Bwyway ☐ 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 third-party maintenance operations, historical impacts were encountered at the CPC 41-10 #1, Champlin 31-10 #3, 32-10 #2, and 42-10 #4 production facility. The release became State reportable on September 21, 2017, due to the quantity of impacted soil excavated. Soil excavation activities are ongoing and will be summarized in a forthcoming Supplemental Form 19 Spill/Release Report. A topographic Site Location Map showing the geographic setting of the release is provided as Figure 1.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

| Date | Agency/Party | Contact | Phone | Response |
|-----------|--------------|------------------|-----------------|----------|
| 9/21/2017 | Town of Erie | Marty Ostholhoff | -email | |
| 9/21/2017 | County | Roy Rudisill | -email | |
| 9/21/2017 | County | Troy Swain | -email | |
| 9/21/2017 | County | Tom Parko | -email | |
| 9/22/2017 | Private | Landowner | -certified mail | |

SPILL/RELEASE DETAIL REPORTS

| | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------------------|---------------------------------------------------------|
| #1 | Supplemental Report Date: 09/29/2017 | | |
| 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 type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature | | | |
| Surface Area Impacted: Length of Impact (feet): <u>65</u> | | Width of Impact (feet): <u>22</u> | |
| Depth of Impact (feet BGS): <u>12</u> | | Depth of Impact (inches BGS): _____ | |
| How was extent determined? | | | |
| During third-party maintenance operations, historical impacts were encountered at the CPC 41-10 #1, Champlin 31-10 #3, 32-10 #2, and 42-10 #4 production facility. The release became State reportable on September 21, 2017, due to the quantity of impacted soil excavated. Excavation activities are being guided in the field by screening soil for volatile organic compound (VOC) concentrations using a photoionization detector (PID). Soil excavation activities are ongoing and will be summarized in a forthcoming Supplemental Form 19 Spill/Release Report. A topographic Site Location Map showing the geographic setting of the release is provided as Figure 1. | | | |
| Soil/Geology Description: | | | |
| Sandy clay | | | |
| Depth to Groundwater (feet BGS) <u>20</u> | | Number Water Wells within 1/2 mile radius: <u>1</u> | |
| If less than 1 mile, distance in feet to nearest | | Water Well <u>1680</u> None <input type="checkbox"/> | Surface Water <u>1300</u> None <input type="checkbox"/> |
| Wetlands _____ | | None <input checked="" type="checkbox"/> | Springs _____ None <input checked="" type="checkbox"/> |

Livestock 2630 None ☐Occupied Building 795 None ☐

Additional Spill Details Not Provided Above:

CORRECTIVE ACTIONS#1 Supplemental Report Date: 09/29/2017Cause 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 third-party maintenance operations, historical impacts were encountered.

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

Impacted soil is being excavated and the excavation area will be backfilled and graded to match pre-existing conditions.

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: _____

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: Paul SchwarzTitle: HSE Representative Date: 09/29/2017 Email: Paul.Schwarz@anadarko.com**COA Type****Description****Attachment Check List****Att Doc Num****Name**

| | |
|-----------|-------------------|
| 401416253 | TOPOGRAPHIC MAP |
| 401416255 | 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)