

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

401634418

Date Received:

05/10/2018

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

454973

SPILL/RELEASE REPORT (INITIAL)

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>()</u>
Contact Person: <u>Phil Hamlin</u>		Email: <u>Phil.Hamlin@anadarko.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401634418

Initial Report Date: 05/09/2018 Date of Discovery: 05/07/2018 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENE SEC 17 TWP 2N RNG 66W MERIDIAN 6

Latitude: 40.142150 Longitude: -104.796367

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

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No _____

Spill/Release Point Name: Bartez No Existing Facility or Location ID No.

Number: 21-17 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): >=5 and <100 Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): 0

Estimated Other E&P Waste Spill Volume(bbl): 0 Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Land Use:

Current Land Use: OTHER Other(Specify): Tank Battery Pad

Weather Condition: Sunny, 65°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 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):

An inspector discovered a release at the Bartz 21-17 tank battery. Approximately 10 barrels of oil were released within the tank battery containment berm, and approximately 1 to 2 gallons were observed as a surface staining north of the tank battery and as sheen on the surface water in the irrigation ditch north of the tank battery. The cause of the release is under investigation. Surface water samples were collected and submitted for BTEX analysis. Surface soil samples were submitted for BTEX, TPH, pH, and EC analysis. Assessment activities are ongoing and will be summarized in a supplemental report. The topographic Site Location Map showing the geographic setting of the release is provided as Figure 1. The Site Map depicting the sample locations is attached as Figure 2. The laboratory analytical results for the soil and surface water samples are summarized in Table 1 and Table 2, respectively. The analytical report is attached.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
5/7/2018	Weld County	Troy Swain	-	Notified via Phone
5/7/2018	CDPHE	CDPHE	-	Notified via Phone
5/7/2018	NRC	NRC	-	Notified via Phone
5/8/2018	Landowner	Landowner	-	Notified via Phone

Was there a Grade 1 Gas Leak associated with this E & P waste spill or release? Yes No

If YES, enter the Document Number of the Initial Grade 1 Gas Leak Report Form 44: _____

Was there a reportable accident associated with this E & P waste spill or release? Yes No

If YES, enter the Document Number of the Initial Accident Report, Form 22: _____

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: 05/10/2018 Email: Phil.Hamlin@anadarko.com

<u>COA Type</u>	<u>Description</u>
	Provide documentation justifying closure request within 90 days of release via supplemental form 19. If investigation and remediation require further actions beyond 90 days then submit form 27 for approval within 90 days of spill (07August2018).

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401634418	SPILL/RELEASE REPORT(INITIAL)
401634424	TOPOGRAPHIC MAP
401635254	ANALYTICAL RESULTS
401635432	SITE MAP
401635935	FORM 19 SUBMITTED

Total Attach: 5 Files

General Comments

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

Total: 0 comment(s)