

Reporter's Information

Date: 3/11/2020

Last Name: KEVIN First Name: BUCK M.I. _____

Position/Title: PUMPER

Spill/Incident Information

Spill Location: CASSLETT A3 Intersection: CR11+CR12

Date of Spill/Incident: 3/11/2020 Time of Spill/Incident: 2:00PM

Spill/Incident Reported To: MAANE SILVA

Type of Material Discharged: Oil/Condensate Produced Water Other

Quantity of Material Discharged: 7 bbl / gal Unknown

Equipment Failure: Storage Tank Flowline Wellhead
Separator Other

Media Affected: Soil Water Other

Spill Released into Water: Yes No If Yes, How Much? (estimate): _____ bbl / gal

Spill close to home or building? Yes No If Yes, How Much? (estimate ft.): _____

Spill close to public road? Yes No If Yes, How Close? (estimate ft.): _____

Spill occur on land with livestock? Yes No

External Notification? Yes No If Yes, Who? 911 Other

Describe Source & Cause of Incident: HOLE TOP FLOW LINE

Using the back of this form, please sketch the spill/incident. Include as much detail as possible, including the extent of the spill/incident, equipment on-site, nearby roads, surrounding vegetation, location of water sources, surrounding buildings, etc.

20 ft.



CR 1

CR 12

SPR

W/3
COSTLY
4/3

Direction
of FLOW

North
↖

