

State of Colorado Oil and Gas Conservation Commission

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Document Number:

402661137

Date Received:

04/16/2021

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

479837

SPILL/RELEASE REPORT (INITIAL /w 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>	Mobile: <u>(970) 515-1698</u>
Zip: <u>80217-3779</u>		Email: <u>Gregory_Hamilton@oxy.com</u>
Contact Person: <u>Gregory Hamilton</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402661137

Initial Report Date: 04/16/2021 Date of Discovery: 04/15/2021 Spill Type: Historical Release

Spill/Release Point Location:

QTRQTR SWSE SEC 25 TWP 3N RNG 68W MERIDIAN 6Latitude: 40.193504 Longitude: -104.947247Municipality (if within municipal boundaries): Firestone County: WELD

Reference Location:

Facility Type: WELL☐ Facility/Location ID NoSpill/Release Point Name: Rademacher Wellhead Release☒ Well API No. (Only if the reference facility is well) 05-123-27140☐ No Existing Facility or Location ID No.

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? No

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): UnknownEstimated Condensate Spill Volume(bbl): UnknownEstimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): UnknownEstimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Land Use:

Current Land Use: CROP LAND

Other(Specify): _____

Weather Condition: Cloudy ~ 35 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 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):

Historical soil impacts were discovered following cut and cap operations at the Rademacher 37-25 Wellhead location. The release became State reportable on April 15, 2021, due to the quantity of impacted soil excavated. 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
4/16/2021	County	Jason Maxey	-email	
4/16/2021	County	Roy Rudisill	-email	
4/16/2021	Town of Firestone	Marty Ostholhoff	-email	
4/16/2021	Private	Landowner	-phone	

Was there a Grade 1 Gas Leak? Yes ☐ No ☒

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

Was there a reportable accident associated with either a Grade 1 Gas Leak or an E&P waste spill or release? Yes ☐ No ☒

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

Was there damage during excavation? Yes ☐ No ☒

If YES, was CO 811 notified prior to excavation? Yes ☐ No ☐

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 04/16/2021		
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? 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): 6 Width of Impact (feet): 6

Depth of Impact (feet BGS): 7 Depth of Impact (inches BGS): _____

How was extent determined?

Volume of Impacted Surface Water Removed (bbbs):

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: 16486

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: Gregory Hamilton

Title: Environmental Consultant Date: 04/16/2021 Email: Gregory_Hamilton@oxy.com

Condition of Approval

COA Type

Description

0 COA

Attachment List

Att Doc Num

Name

402661137	SPILL/RELEASE REPORT(I/S)
402661176	OTHER
402661185	PHOTO DOCUMENTATION
402661231	SITE MAP
402661352	OTHER
402663733	FORM 19 SUBMITTED

Total Attach: 6 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)