

State of Colorado
Energy & Carbon Management Commission

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Document Number:

403954962

Date Received:

10/11/2024

Spill report taken by:

Spill/Release Point ID:

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 ECMC Rule 912.b. for reporting requirements of spills or releases of E&P Waste, produced Fluids, or unauthorized Releases of natural gas. Submit a Site Investigation and Remediation Workplan (Form 27) if Rule 913.c. applies.

OPERATOR INFORMATION

Name of Operator: NOBLE ENERGY INC	Operator No: 100322	Phone Numbers
Address: 1099 18TH STREET SUITE 1500		Phone: (970) 313-5582
City: DENVER	State: CO	Zip: 80202
Contact Person: Jason Davidson		Mobile: ()
		Email: jason.davidson@chevron.com

☐ Transfer of Operatorship: Pursuant to Rule 912.f, this Supplemental Form 19 is being submitted to designate the Buying Operator as the responsible Operator for this Spill and Release.

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 403954962

Initial Report Date: 10/11/2024 Date of Discovery: 10/10/2024 Spill Type: Historical Release

Spill/Release Point Location:

QTRQTR NWSW SEC 32 TWP 4N RNG 64W MERIDIAN 6

Latitude: 40.266736 Longitude: -104.582015

Municipality (if within municipal boundaries): No County: WELD

Enter Lat./long measurement of the actual Spill/Release Point. Lat./Long. Data shall meet standards of Rule 216.

☐ Check this box if this spill/release is related to a loss of integrity of a flowline, pipeline, crude oil transfer line, or produced water transfer line.

Reference Location:

Facility Type: WELL

☐ Facility/Location ID No

Spill/Release Point Name: Howell C32-12

☒ Well API No. (Only if the reference facility is well) 05-123-18203☐ No Existing Facility or Location ID 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:

Has the subject Spill/Release been controlled at the time of reporting? Yes

Land Use:

Current Land Use: NON-CROP LAND Other(Specify):

Weather Condition: 80s and sunny

Surface Owner: FEE Other(Specify):

Describe what is known about the spill/release event (what happened -- including how it was stopped, contained, and recovered):

Visual and olfactory indicators of contamination observed in the wellhead and flowline riser excavation suggest a historical release was discovered on 10/10/2024 during the Howell C32-12 wellhead decommissioning. All analytical results for soil samples WH01 @6 and FLR01 @4 are pending.

List of Agencies and Other Parties Notified Pursuant to Rule 912.b.(7)-(11):

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
10/11/2024	Noble Land	Landowner	--	
10/11/2024	Weld County	David Burns	--	
10/11/2024	Weld County	Jason Maxey	--	
10/11/2024	ECMC	Kilian Collins	--	

REPORT CRITERIA

Rule 912.b.(1) Report to the Director (select all criteria that apply):

No Rule 912.b.(1).A: A Spill or Release of any size that impacts or threatens to impact any Waters of the State, Public Water System, residence or occupied structure, livestock, wildlife, or publicly-maintained road.

Waters of the State: _____ Public Water System: _____

Residence or Occupied Structure: _____ Livestock: _____

Wildlife: _____ Publicly-Maintained Road: _____

No Rule 912.b.(1).B: A Spill or Release in which 1 barrel or more of E&P Waste or produced fluids is spilled or released outside of berms or other secondary containment.

No Rule 912.b.(1).C: A Spill or Release of 5 barrels or more of E&P Waste or produced Fluids regardless of whether the Spill or Release is completely contained within berms or other secondary containment.

No Rule 912.b.(1).D: Within 6 hours of discovery, a Grade 1 Gas Leak. For a Grade 1 Gas Leak from a Flowline, the Operator also must submit the Form 19 – Initial, document number on a Form 44, Flowline Report, for the Grade 1 Gas Leak

Enter the approximate time of discovery _____ (HH:MM)

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? _____

Enter the Document Number of the Initial Accident Report, Form 22 _____

Was there damage during excavation? _____

Was CO 811 notified prior to excavation? _____

No Rule 912.b.(1).E: The discovery of 10 cubic yards or more of impacted material resulting from a current or historic Spill or Release. Discovery and reporting will not be contingent upon confirmation samples demonstrating exceedance of Table 915-1 standards.

Estimated Volume of Impacted Solids (cu. yd.): _____

No	Rule 912.b.(1).F: The discovery of impacted Waters of the State, including Groundwater. Discovery and reporting will not be contingent upon confirmation samples demonstrating exceedance of Table 915-1 standards. The presence of free product or hydrocarbon sheen on Groundwater or surface water is reportable. The presence of contaminated soil in contact with Groundwater or surface water is reportable. Check all that apply:
	<input type="checkbox"/> The presence of free product or hydrocarbon sheen Surface Water <input type="checkbox"/> The presence of free product or hydrocarbon sheen on Groundwater <input type="checkbox"/> The presence of contaminated soil in contact with Groundwater <input type="checkbox"/> The presence of contaminated soil in contact with Surface water
Yes	Rule 912.b.(1).G: A suspected or actual Spill or Release of any volume where the volume cannot be immediately determined, including a spill or release of any volume that daylight from the subsurface.
No	Rule 912.b.(1).H: Spill or Release resulting in vaporized hydrocarbon mists that leave the Oil and Gas Location or Off-Location Flowline right of way from an Oil and Gas Location and impacts or threatens to impact off-location property.
	<input type="checkbox"/> Areas offsite of Oil & Gas Location <input type="checkbox"/> Off-Location Flowline right of way
No	Rule 912.b.(1).I: A Release of natural gas that results in an accumulation of soil gas or gas seeps.
No	Rule 912.b.(1).J: A Release that results in natural gas in Groundwater.

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 10/11/2024		
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>1</u>		Width of Impact (feet): <u>1</u>	
Depth of Impact (feet BGS): <u>6</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
The extent of impacts will be determined through an environmental site assessment.			
Soil/Geology Description:			
Silty Sands (SM)			
Depth to Groundwater (feet BGS) <u>123</u>		Number Water Wells within 1/2 mile radius: <u>8</u>	
If less than 1 mile, distance in feet to nearest	Water Well	<u>1220</u> None <input type="checkbox"/>	Surface Water <u>634</u> None <input type="checkbox"/>
	Wetlands	<u>634</u> None <input type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>
	Livestock	<u>709</u> None <input type="checkbox"/>	Occupied Building <u>1643</u> None <input type="checkbox"/>
	Additional Spill Details Not Provided Above:		

A Supplemental Form 19 Closure Request will be submitted within 90 days of the discovery of this spill.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 10/11/2024

Root Cause of Spill/Release Unknown (Historical)

Other (specify)

Type of Equipment at Point of Spill/Release: Wellhead Line

If "Other" selected above, specify or describe here:

Describe Incident & Root Cause (include specific equipment and point of failure)

Historical impacts were discovered during wellhead decommissioning activities at the wellhead and flowline riser. Due to the historical nature of the release, an exact cause was not able to be identified.

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

Noble conducts routine AVO inspections of all oil and gas facilities in order to identify and mitigate potential releases. Further, this facility is no longer active and is in the process of being decommissioned. The compromised wellhead has been taken out of service and there is no longer a possibility of a release originating from this infrastructure.

Volume of Soil Excavated (cubic yards): 0

Disposition of Excavated Soil (attach documentation) ☐ Offsite Disposal ☐ Onsite Treatment

☐ Other (specify)

Volume of Impacted Ground Water Removed (bbls): 0

Volume of Impacted Surface Water Removed (bbls): 0

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, check all that apply)

☐ Horizontal and Vertical extents of impacts have been delineated.

☐ Documentation of compliance with Table 915-1 is attached.

☐ All E&P Waste has been properly treated or disposed.

☐ Work proceeding under an approved Form 27 (Rule 912.c).

Form 27 Remediation Project No: _____

☐ SUSPECTED Spill/Release did not occur or was below Rule 912.a.(5) reporting thresholds.

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: Michelle Bartoszek

Title: HSE Advisor Date: 10/11/2024 Email: michelle.bartoszek@chevron.com

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

ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>
403954986	AERIAL IMAGE
403954987	SOIL SAMPLE LOCATION MAP
403954988	PHOTO DOCUMENTATION
403954989	ANALYTICAL RESULTS

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)