

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303)894-2100 Fax:(303)894-2109



FOR OGCC USE ONLY

RECEIVED
7/26/2013

Spill report taken by: _____

FACILITY ID: _____

SPILL/RELEASE REPORT

This form is to be submitted by the party responsible for the oil and gas spill or release. Any spill or release which may impact waters of the State must be reported as soon as practicable; any spill over 20 bbls must be reported within 24 hours and all spills over five bbls must be reported within ten days. Submit a Site Investigation and Remediation Workplan (Form 27) when requested by the Director.

OPERATOR INFORMATION

Name of Operator: _____ OGCC Operator No: _____	Phone Numbers No: _____ Fax: _____ E-Mail: _____
Address: _____	
City: _____ State: _____ Zip: _____	
Contact Person: _____	

DESCRIPTION OF SPILL OR RELEASE

Date of Incident: _____ Facility Name & No.: _____	County: _____
Type of Facility (well, tank battery, flow line, pit): _____	QtrQtr: _____ Section: _____
Well Name and Number: _____	Township: _____ Range: _____
API Number: _____	Meridian: _____
Specify volume spilled and recovered (in bbls) for the following materials: Oil spilled: _____ Oil recov'd: _____ Water spilled: _____ Water recov'd: _____ Other spilled: _____ Other recov'd: _____	
Ground Water impacted? Yes No	Surface Water impacted? Yes No
Contained within berm? Yes No	Area and vertical extent of spill: _____x_____
Current land use: _____	Weather conditions: _____
Soil/geology description: _____	
IF LESS THAN A MILE , report distance IN FEET to nearest.... Surface water: _____ wetlands: _____ buildings: _____	
Livestock: _____ water wells: _____ Depth to shallowest ground water: _____	
Cause of spill (e.g., equipment failure, human error, etc.): _____ Detailed description of the spill/release incident: _____	

CORRECTIVE ACTION

Describe immediate response (how stopped, contained and recovered):

Describe any emergency pits constructed:

How was the extent of contamination determined:

Further remediation activities proposed (attach separate sheet if needed):

Describe measures taken to prevent problem from reoccurring:

OTHER NOTIFICATIONS

List the parties and agencies notified (County, BLM, EPA, DOT, Local Emergency Planning Coordinator or other).

Date	Agency	Contact	Phone	Response

Spill/Release Tracking No: **2145650**

D28 WELL PAD (335822 COGCC Location ID) – FORM 19 – NARRATIVE DOCUMENT

Date of Incident – 06/20/13

Detailed description of the spill/release incident:

An 8 inch 3-phase flow line failed below ground releasing an unknown quantity of produced water and condensate. For the purposes of this report, we've identified the volume released as approximately 30bbls of produced water and 2bbls of condensate.

Describe immediate response (how stopped, contained and recovered):

The associated wells and pipeline were shut in to control the leak. The pipeline is scheduled to be excavated and a line repair will occur.

Describe any emergency pits constructed:

No emergency pits were constructed.

How was the extent of contamination determined?:

The site will be excavated and sampling will occur from the spill area to determine the extent of impacts.

Further remediation activities proposed (attach separate sheet if needed):

If laboratory results exceed table 910-1 allowable concentrations, additional sampling and/or remediation will be conducted as needed and a Form 4 will be submitted.

Describe measures taken to prevent problem from reoccurring:

The corroded section of pipeline will be sent in for metallurgy to determine the cause of the failure. Corrosion inhibitor use will be adjusted to prevent future occurrences.



