

State of Colorado  
Oil and Gas Conservation Commission

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05/05/2014

SPILL/RELEASE REPORT (INITIAL)

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.

Spill report taken by:

Spill/Release Point ID:

OPERATOR INFORMATION

Name of Operator: <u>KERR MCGEE OIL &amp; GAS ONSHORE LP</u> OGCC Operator No: <u>47120</u>	<b>Phone Numbers</b>
Address: <u>P O BOX 173779</u>	Phone: <u>(720) 9296000</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>	Mobile: <u>(720) 9297726</u>
Contact Person: <u>Phillip Hamlin</u>	Email: <u>phil.hamlin@anadarko.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Report Date: 05/02/2014 Date of Discovery: 05/02/2014 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESE SEC 27 TWP 1N RNG 67W MERIDIAN 6

Latitude: 40.017826 Longitude: -104.870207

Municipality (if within municipal boundaries): \_\_\_\_\_ County: WELD

Reference Location:

Facility Type: TANK BATTERY  Well API No. (if the reference facility is well) 05- -  
 Facility ID (if not a well) 265272  
 No Existing Facility ID

Fluid(s) Spilled/Released (please answer Yes/No):

Was one (1) barrel or more spilled outside of berms or secondary containment? No

Were Five (5) barrels or more spilled? No

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

Estimated Oil Spill Volume(bbl): 0 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: \_\_\_\_\_

Land Use:

Current Land Use: CROP LAND Other(Specify): \_\_\_\_\_

Weather Condition: Windy, 60 degrees

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

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

During tank battery reconstruction, historical impacts were observed in the vicinity of the dump lines. The separator has been removed and all of the dump lines have been flushed and removed. A subsurface assessment will be completed to define the extent and magnitude of the impacts.

COGCC Comment Only:

List Agencies and Other Parties Notified:

### OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
5/2/2014	Weld County	Roy Rudisill	-email	
5/2/2014	Weld County	Tom Parko	-email	

I hereby certify all statements made in this form are to the best of my knowledge true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: Phillip Hamlin  
Title: Senior EHS Representative Date: 05/05/2014 Email: phil.hamlin@anadarko.com

### Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400601654	TOPOGRAPHIC MAP

Total Attach: 1 Files