

**State of Colorado**  
**Oil and Gas Conservation Commission**

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



Document Number:

400628204

Date Received:

06/17/2014

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

437243

## SPILL/RELEASE REPORT (SUPPLEMENTAL)

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: <u>WPX ENERGY ROCKY MOUNTAIN LLC</u>	OGCC Operator No: <u>96850</u>	<b>Phone Numbers</b>
Address: <u>1001 17TH STREET - SUITE #1200</u>		Phone: <u>(970) 6832295</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(970) 2859573</u>
Zip: <u>80202</u>		Email: <u>karolina.blaney@wpenergy.com</u>
Contact Person: <u>Karolina Blaney</u>		

### INITIAL SPILL/RELEASE REPORT

Initial Report Date: 05/16/2014      Date of Discovery: 05/16/2014      Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release:    QTRQTR    SE    W    SEC    23    TWP    6S    RNG    96W    MERIDIAN    6

Latitude: 39.510582      Longitude: -108.078427

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

#### Reference Location:

Facility Type: PIPELINE      ☐ Well API No. (if the reference facility is well) 05-045-

☐ Facility ID (if not a well) \_\_\_\_\_

☒ 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? Yes

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): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): >=1 and <5

Estimated Other E&P Waste Spill Volume(bbl): 0

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: \_\_\_\_\_

#### Land Use:

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

Weather Condition: sunny, warm

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):

A buried 4" produced water pipeline failed resulting in a produced water spill. The discovery of the spill occurred because produced water from the pipeline migrated to the surface and impacted the side of the Wheeler Gulch road within the bar ditch. Approximately 1-2 bbls were recovered. The estimated length of the incident was approximately one-hour which is known due to the intermittent use of the pipeline. When not in use, this pipeline is drained. Initial screening results indicate hydrocarbon concentrations well below the COGCC 910-1 requirements. The line will be excavated for maintenance and confirmation samples will be collected at that time.

COGCC Comment Only:

List Agencies and Other Parties Notified:

### OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
5/16/2014	COGCC	Stan Spencer	970-625-2497	phone call
5/16/2014	County	Kirby Wynn	970-625-5905	Email
5/16/2014	Land owner		-	Withheld to protect the privacy of the landowner
	Fire department	David Blair	970-285-9119	Email

### 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 Number: \_\_\_\_\_

COGCC Comment:

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

Signed: \_\_\_\_\_ Print Name: Karolina Blaney

Title: Environmental Specialist Date: 06/17/2014 Email: karolina.blaney@wpenergy.com

### Attachment Check List

Att Doc Num	Name
400628204	FORM 19 SUBMITTED
400628207	ANALYTICAL RESULTS

Total Attach: 2 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)