

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

400640720

Date Received:

07/08/2014

Spill report taken by:

FISCHER, ALEX

Spill/Release Point ID:

437908

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>OXY USA WTP LP</u>	Operator No: <u>66571</u>	Phone Numbers
Address: <u>760 HORIZON DR #101</u>		Phone: <u>(970) 2633648</u>
City: <u>GRAND JUNCTION</u>	State: <u>CO</u>	Mobile: <u>(970) 8127738</u>
Zip: <u>81506</u>		Email: <u>justin_booth@oxy.com</u>
Contact Person: <u>Justin Booth</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400635661

Initial Report Date: 06/30/2014 Date of Discovery: 06/28/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESW SEC 29 TWP 6S RNG 97W MERIDIAN 6Latitude: 39.489500 Longitude: -108.247558Municipality (if within municipal boundaries): _____ County: GARFIELD

Reference Location:

Facility Type: WATER GATHERING SYSTEM/LINE ☒ Facility/Location ID No 417559☐ No Existing Facility or Location ID No.☐ Well API No. (Only if the reference facility is well) 05-045-

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

Was one (1) barrel or more spilled outside of berms or secondary containment? Yes

*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? Yes

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

Estimated Oil Spill Volume(bbl): 0Estimated Condensate Spill Volume(bbl): >0 and <1Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): >=5 and <100Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____Weather Condition: Clear, HotSurface Owner: OTHER (SPECIFY) Other(Specify): Oxy Private

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):

At 7:30am, on 6/28/14, a produced water release was discovered at Oxy's Central Water Handling Facility. The release was discovered within an unlined valve can as produced water spilled from a corrosion related failure of a 6" water gathering line. The line was isolated to prevent further spillage. The free liquid was removed from the valve can via vac truck. The remaining impacted soil is being excavated and segregated for disposal. The release was limited to the boundaries of the facilities and no waters were impacted.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
6/28/2014	Garfield County	Kirby Wynn	970-6252497	none
6/28/2014	COGCC	Carlos Lujan	970-6255905	none
			-	

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 07/07/2014		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	68	63	<input 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>20</u>		Width of Impact (feet): <u>5</u>	
Depth of Impact (feet BGS): <u>10</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
The impacted soil was excavated. A PID meter was used to determine the extent of the contaminated soil.			
Soil/Geology Description:			
Happle very channery sandy loam, 3 to 12 percent slopes.			
Depth to Groundwater (feet BGS) <u>80</u>		Number Water Wells within 1/2 mile radius: <u>4</u>	
If less than 1 mile, distance in feet to nearest	Water Well <u>156</u> None <input type="checkbox"/>	Surface Water <u>400</u> None <input type="checkbox"/>	
	Wetlands _____ None <input checked="" type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>	
	Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building <u>2240</u> None <input type="checkbox"/>	
Additional Spill Details Not Provided Above:			

Water wells indicated are Oxy owned monitoring wells.

CORRECTIVE ACTIONS

#1	Supplemental Report Date: 07/07/2014
Cause of Spill (Check all that apply)	
<input type="checkbox"/> Human Error	<input checked="" type="checkbox"/> Equipment Failure
<input type="checkbox"/> Historical-Unknown	<input type="checkbox"/> Other (specify) _____
Describe Incident & Root Cause (include specific equipment and point of failure)	
Corrosion in an underground produced water pipeline caused a hole in the piping. A gasket also failed at a valve connection.	
Describe measures taken to prevent the problem(s) from reoccurring:	
The section of corroded pipeline was patched. The failed gasket was replaced. The entire section of corroded pipeline will be replaced while it is exposed.	
Volume of Soil Excavated (cubic yards): 1400	
Disposition of Excavated Soil (attach documentation)	
<input checked="" type="checkbox"/> Offsite Disposal	<input type="checkbox"/> Onsite Treatment
<input type="checkbox"/> 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)

☐ Work proceeding under an approved Form 27

Form 27 Remediation Project No: _____

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

Signed: _____ Print Name: Justin Booth

Title: HES Ops Advisor Date: 07/08/2014 Email: justin_booth@oxy.com

COA Type

Description

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Attachment Check List

Att Doc Num	Name
400640720	FORM 19 SUBMITTED
400641039	TOPOGRAPHIC MAP
400641040	AERIAL PHOTOGRAPH

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)