

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> Zip: <u>81506</u>		Mobile: <u>(970) 8127738</u>
Contact Person: <u>Justin Booth</u>		Email: <u>justin_booth@oxy.com</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 6

Latitude: 39.489500 Longitude: -108.247558

Municipality (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): 0

Estimated Condensate Spill Volume(bbl): >0 and <1

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): >=5 and <100

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: Clear, Hot

Surface 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	<u>0</u>	<u>0</u>	<input type="checkbox"/>
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>
PRODUCED WATER	<u>68</u>	<u>63</u>	<input type="checkbox"/>
DRILLING FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
FLOW BACK FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
OTHER E&P WASTE	<u>0</u>	<u>0</u>	<input type="checkbox"/>

specify: _____

Was spill/release completely contained within berms or secondary containment? NO Was an Emergency Pit constructed? NO

Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.

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) Soil Groundwater Surface Water Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): 20 Width of Impact (feet): 5

Depth of Impact (feet BGS): 10 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) 80 Number Water Wells within 1/2 mile radius: 4

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) Human Error Equipment Failure Historical-Unknown
 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) 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)
 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

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

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400640720	FORM 19 SUBMITTED
400641039	TOPOGRAPHIC MAP
400641040	AERIAL PHOTOGRAPH

Total Attach: 3 Files

General Comments

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

Total: 0 comment(s)