

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:

400654255

Date Received:

07/31/2014

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

438256

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: WPX ENERGY ROCKY MOUNTAIN LLC	Operator No: 96850	Phone Numbers
Address: 1001 17TH STREET - SUITE #1200		Phone: (970) 6832295
City: DENVER State: CO Zip: 80202		Mobile: (970) 5890743
Contact Person: Karolina Blaney		Email: karolina.blaney@wpxenergy.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400649654

Initial Report Date: 07/23/2014 Date of Discovery: 07/23/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESW SEC 34 TWP 6S RNG 94W MERIDIAN 6

Latitude: 39.476537 Longitude: -107.875500

Municipality (if within municipal boundaries): County: GARFIELD

Reference Location:

Facility Type: WELL PAD Facility/Location ID No 323986
 No Existing Facility or Location ID No.
 Well API No. (Only if the reference facility is well) 05- -

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

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: hot, dry

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
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):

The release was caused by corrosion of buried produced water transfer pipelines. The release was discovered during quarterly pressure testing of the lines. The total volume of this release will be determined when the excavation activities are completed.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
7/23/2014	COGCC	Stan Spencer	970-625-2497	Initial Form 19
7/23/2014	Surface Owner		970-	Phone call
7/23/2014	County	Kirby Wynn	970-625-5905	Email
7/23/2014	Fire Department	Chad Harris	970-625-1243	Email
7/23/2014	Fire Department	Orin Moon	970-625-1242	Email

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 07/31/2014

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>15</u>	<u>0</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): 23 Width of Impact (feet): 12

Depth of Impact (feet BGS): 17 Depth of Impact (inches BGS): _____

How was extent determined?

By field measurements and mapping with a Trimble GPS unit.

Soil/Geology Description:

Potts-Ildefonso complex - stony to very stony loam

Depth to Groundwater (feet BGS) 56 Number Water Wells within 1/2 mile radius: 16

If less than 1 mile, distance in feet to nearest

Water Well	<u>201</u>	None <input type="checkbox"/>	Surface Water	<u>152</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>1364</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

A buried produced water dump line developed a small hole due to corrosion of the metal. It was discovered during a quarterly pressure testing of the the line. The leaking line allowed produced water to migrate out into the subsurface soils. When the release was discovered, production personnel halted the flow of water to the production water tanks. Initial investigation of the release indicated the area of impact is located in the immediate vicinity of the tank battery. No surface water or groundwater was impacted by the release. The area impacted by the release has been remediated. When clean soil was encountered, the walls and bottom were field screened for hydrocarbon content. Field screening results indicated residual contaminant levels below the COGCC Table 910-1 standard of 500 ppm TPH in soil. Confirmation samples were collected and submitted to an accredited laboratory for analysis. Analytical results indicate compliance with Table 910-1 with the exception of TPH (GRO + DRO) on the bottom of the excavation. The bottom of the excavation was excavated an additional 2 feet and resampled for TPH. Further remedial action, if warranted, will be based on this result. Impacted soils generated during remediation will be treated on-site with a bio-remediation product to levels which comply with Table 910-1 standards.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 07/31/2014

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)

A buried produced water dump line developed a small hole due to corrosion of the metal. It was discovered during a quarterly pressure testing of the the line. The leaking line allowed produced water to migrate out into the subsurface soils.

Describe measures taken to prevent the problem(s) from reoccurring:

Due to corrosion of metal pipin, all newly installed and repaired lines are being replaced with lines with an epoxy type coating on the inside of the pipe which greatly reduces potential corrosion of the metal and subsequent line failures. In addition all dump lines will be pressure tested on a monthly basis.

Volume of Soil Excavated (cubic yards): _____

Disposition of Excavated Soil (attach documentation) Offsite Disposal Onsite Treatment
 Other (specify) _____

Volume of Impacted Ground Water Removed (bbls): _____

Volume of Impacted Surface Water Removed (bbls): _____

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: Karolina Blaney

Title: Environmental Specialist Date: 07/31/2014 Email: karolina.blaney@wpenergy.com

COA Type	Description

Attachment Check List

Att Doc Num	Name
400654255	FORM 19 SUBMITTED
400654317	AERIAL PHOTOGRAPH

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Agency	F-27 needed for bioremediation plan. Lab data from excavation samples needed.	3/4/2014 1:46:24 PM

Total: 1 comment(s)