

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:

400668731

Date Received:

08/20/2014

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

438684

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.

OPERATOR INFORMATION

Name of Operator: <u>CHEVRON USA INC</u>	Operator No: <u>16700</u>	<b>Phone Numbers</b>
Address: <u>6001 BOLLINGER CANYON RD</u>		Phone: <u>(970) 675 - 3814</u>
City: <u>SAN RAMON</u> State: <u>CA</u> Zip: <u>94583</u>		Mobile: <u>(970) 629-3720</u>
Contact Person: <u>Ross Alire</u>		Email: <u>vali@chevron.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400668731

Initial Report Date: 08/20/2014 Date of Discovery: 08/15/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SE SW SEC 14 TWP 2N RNG 103W MERIDIAN 6

Latitude: 40.137500 Longitude: -108.925833

Municipality (if within municipal boundaries): \_\_\_\_\_ County: RIO BLANCO

Reference Location:

Facility Type: FLOWLINE  Facility/Location ID No \_\_\_\_\_  
 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: 25.5 BBLs Produced Water

Land Use:

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

Weather Condition: 60 F

Surface Owner: FEDERAL Other(Specify): BLM Land

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):

Tuesday (08-19-2014) at approximately 0907 a leak occurred on a 3"Steel coated Injection line 40 feet South of Injection well Mclaughlin AC 22 . (40.1375000, 108.925833). Approximately Appox 25 BBLs of produced water was released. The lateral valve was shut in immediately upon detection. Vacuum truck recovered an estimated 20 BBLs. Affected area has been water flushed and soil samples will be taken.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
8/19/2014	COGCC	Kris Neidel	303-871-1963	Sent Email - Reply Recieved
8/19/2014	Rio Blanco County	Mark Spurge	970-878-9584	Sent Email
8/20/2014	BLM Form NTL 3A	Justin Wilson	970-878- 3825	Send email
8/19/2014	CDPHE	Ann	877-518-5608	Verbal - Report #2014-0525

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

Signed: \_\_\_\_\_ Print Name: Ross Aire

Title: HES Specialist Date: 08/20/2014 Email: vali@chevron.com

**COA Type**

**Description**

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

**Attachment Check List**

**Att Doc Num**

**Name**

400668731	FORM 19 SUBMITTED
400668824	SITE MAP

Total Attach: 2 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

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

Total: 0 comment(s)