

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:

400730788

Date Received:

11/14/2014

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

439795

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>KERR MCGEE OIL & GAS ONSHORE LP</u>	Operator No: <u>47120</u>	Phone Numbers
Address: <u>P O BOX 173779</u>		Phone: <u>(720) 929-6368</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(720) 929-7368</u>
Zip: <u>80217-3779</u>		Email: <u>Mike.Dinkel@anadarko.com</u>
Contact Person: <u>Mike Dinkel</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400724415

Initial Report Date: 11/05/2014 Date of Discovery: 11/04/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENE SEC 7 TWP 2N RNG 65W MERIDIAN 6

Latitude: 40.159141 Longitude: -104.700563

Municipality (if within municipal boundaries): _____ County: WELD

Reference Location:

Facility Type: WELL ☐ Facility/Location ID No. _____
☐ No Existing Facility or Location ID No.
☒ Well API No. (Only if the reference facility is well) 05-123-40315

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

Was one (1) barrel or more spilled outside of berms or secondary containment? No

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): 0

Estimated Other E&P Waste Spill Volume(bbl): 0 Estimated Drilling Fluid Spill Volume(bbl): >=5 and <100

Specify: Approximately 8 bbls of water-based drilling fluid spilled

Land Use:

Current Land Use: CROP LAND Other(Specify): _____

Weather Condition: Sunny, 60F

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):

During drilling operations at the Thomsen 1C-18HZ well location, water-based drilling fluids were released due to a fill pipe that was incorrectly hooked up. Approximately 8 bbls of water-based drilling fluids were released within the rig substructure. Approximately 4 bbls of the released water-based drilling fluids were recovered and added to the cuttings bin for beneficial reuse. Confirmation soil samples will be collected from the release area or excavation (as applicable). The analytical results and excavation details will be provided in a supplemental report. A topographic Site Location Map showing the general location of the release is attached as Figure 1.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
11/5/2014	County/Municipality	Roy Rudisill	-Email	
11/5/2014	County/Municipality	Tom Parko	-Email	

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 11/13/2014		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	0	<input type="checkbox"/>
DRILLING FLUID	8	4	<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>YES</u> Was an Emergency Pit constructed? <u>NO</u>			
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) <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): _____		Width of Impact (feet): _____	
Depth of Impact (feet BGS): _____		Depth of Impact (inches BGS): _____	
How was extent determined?			
Confirmation soil samples will be collected from the release area or excavation (as applicable). The analytical results and excavation details will be provided in a supplemental report.			
Soil/Geology Description:			
Sand and Gravel / Roadbase			
Depth to Groundwater (feet BGS) <u>20</u>		Number Water Wells within 1/2 mile radius: <u>1</u>	
If less than 1 mile, distance in feet to nearest	Water Well <u>1700</u> None <input type="checkbox"/>	Surface Water <u>450</u> None <input type="checkbox"/>	
	Wetlands <u>5000</u> None <input type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>	
	Livestock <u>1660</u> None <input type="checkbox"/>	Occupied Building <u>1720</u> None <input type="checkbox"/>	
Additional Spill Details Not Provided Above:			

CORRECTIVE ACTIONS

#1	Supplemental Report Date: 11/13/2014
Cause of Spill (Check all that apply) <input checked="" type="checkbox"/> Human Error <input 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)	
<div>During drilling operations, water-based drilling fluids were released due to a fill pipe that was incorrectly hooked up. Approximately 8 bbls of water-based drilling fluids were released within the rig substructure. Approximately 4 bbls of the released water-based drilling fluids were recovered and added to the cuttings bin for beneficial reuse.</div>	
Describe measures taken to prevent the problem(s) from reoccurring:	
<div>The crew was instructed to double check the fill line connections after each rig skid, prior to commencing drilling.</div>	
Volume of Soil Excavated (cubic yards): _____	
Disposition of Excavated Soil (attach documentation) <input type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment <input type="checkbox"/> 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: Mike Dinkel

Title: Sr. HSE Representative Date: 11/14/2014 Email: Mike.Dinkel@anadarko.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

400730788	FORM 19 SUBMITTED
400730936	TOPOGRAPHIC MAP
400731615	OTHER

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)