

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:

400743857

Date Received:

12/05/2014

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

440337

SPILL/RELEASE REPORT (INITIAL /w 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> Zip: <u>80217-3779</u>		Mobile: <u>(720) 929-7368</u>
Contact Person: <u>Mike Dinkel</u>		Email: <u>Mike.Dinkel@anadarko.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400743857

Initial Report Date: 12/02/2014 Date of Discovery: 12/01/2014 Spill Type: Recent Spill

Spill/Release Point Location:

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

Latitude: 40.161713 Longitude: -104.634614

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) 05-123-40619

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

Specify: Approximately 40 bbls of fresh water-based drilling fluid surfaced inside well pad containment

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____
 Weather Condition: Sunny, 45F
 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 surface casing drilling operations for the Greenleaf 30N-2HZ well, water-based drilling fluids were released due to lost circulation while drilling at the surface through sandy soils in the wellbore. Approximately 40 bbls of water-based drilling fluid surfaced in two locations on the bermed wellpad. Approximately 40 bbls of the released water-based drilling fluid were recovered for beneficial reuse. Approximately 14 cubic yards of soil were excavated and added to the cuttings bin for beneficial reuse. Confirmation soil samples were collected from the two release areas. A topographic Site Location Map showing the general location of the release areas is attached as Figure 1.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
12/2/2014	County/Municipality	Roy Rudisill	-Email	
12/2/2014	County/Municipality	Tom Parko	-Email	

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 12/03/2014

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	40	40	<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? YES 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): 15 Width of Impact (feet): 10

Depth of Impact (feet BGS): 2 Depth of Impact (inches BGS): _____

How was extent determined?

Soil samples were collected from the two release areas. Two surface soil samples (SS01 and SS02) were collected from the northwestern release area. The southeastern release area was excavated and four excavation sidewall soil samples (N01@2', E01@2', S01@2', and W01@2') and one excavation base soil sample (B01@2.5') were collected. The surface and excavation soil samples were submitted for laboratory analysis of TPH and BTEX and were in compliance with COGCC allowable levels within the release areas. The general site layout, release area and excavation dimensions, and soil sample locations are shown on the Site Map attached as Figure 2. The soil sample analytical results are summarized in Table 1 and the laboratory analytical reports are attached.

Soil/Geology Description:

Sand and Gravel / Roadbase

Depth to Groundwater (feet BGS) 10 Number Water Wells within 1/2 mile radius: 6

If less than 1 mile, distance in feet to nearest

Water Well	<u>1005</u>	None <input type="checkbox"/>	Surface Water	<u>800</u>	None <input type="checkbox"/>
Wetlands	<u>1950</u>	None <input type="checkbox"/>	Springs	_____	None <input checked="" type="checkbox"/>
Livestock	<u>3000</u>	None <input type="checkbox"/>	Occupied Building	<u>2700</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

No further action is required. Laboratory analytical results for confirmation soil samples SS01, SS02, N01@2', E01@2', S01@2', W01@2', and B01@2.5' indicate that TPH and BTEX concentrations within the release area are in compliance with COGCC allowable levels. Based on the soil sample analytical results, Kerr-McGee is requesting a NFA status for this site.

CORRECTIVE ACTIONS

#1	Supplemental Report Date:	12/03/2014
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)		
During surface casing drilling operations for the Greenleaf 30N-2HZ well, water-based drilling fluids were released due to lost circulation while drilling at the surface through sandy soils in the wellbore. Approximately 40 bbls of water-based drilling fluid surfaced in two locations on the bermed wellpad. Approximately 40 bbls of the released water-based drilling fluid were recovered for beneficial reuse. Approximately 14 cubic yards of soil were excavated and added to the cuttings bin for beneficial reuse.		
Describe measures taken to prevent the problem(s) from reoccurring:		
The drilling rate will be slowed during surface drilling and a conductor casing will be used.		
Volume of Soil Excavated (cubic yards):		
14		
Disposition of Excavated Soil (attach documentation)		
<input type="checkbox"/> Offsite Disposal	<input checked="" 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: Mike Dinkel

Title: Sr. HSE Representative Date: 12/05/2014 Email: Mike.Dinkel@anadarko.com

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

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400743857	FORM 19 SUBMITTED
400744029	OTHER
400744107	TOPOGRAPHIC MAP
400745977	ANALYTICAL RESULTS
400745978	ANALYTICAL RESULTS
400746000	SITE MAP

Total Attach: 6 Files

General Comments

User Group

Comment

Comment Date

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

Total: 0 comment(s)