

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:

400759633

Date Received:

12/26/2014

Spill report taken by:

Spill/Release Point ID:

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>PIONEER NATURAL RESOURCES USA INC</u>	Operator No: <u>10084</u>	Phone Numbers
Address: <u>1401 17TH ST STE 1200</u>		Phone: <u>(303) 6752666</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>		Mobile: <u>()</u>
Contact Person: <u>David Castro</u>		Email: <u>david.castro@pxd.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400759633

Initial Report Date: 12/26/2014 Date of Discovery: 12/23/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR neww SEC 13 TWP 34s RNG 67w MERIDIAN 6

Latitude: 37.089180 Longitude: -104.842750

Municipality (if within municipal boundaries): _____ County: LAS ANIMAS

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) 05-071-07646

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? No

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): >=1 and <5

Estimated Other E&P Waste Spill Volume(bbl): 0 Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: 1 bbl produced water

Land Use:

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

Weather Condition: sunny

Surface Owner: FEE Other(Specify): Bobby Hill

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):

2" ball valve froze and broke, allowing approximately 1 bbl of produced water to spill out onto the location. No water left location. The valve was repaired.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
12/24/2014	LACOG	Bob Lucero	-	email
12/24/2014	Landowner	Mike Powell - foreman	-	voice message

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

Signed: _____ Print Name: David Castro

Title: Environmental Specialist Date: 12/26/2014 Email: david.castro@pxd.com

Attachment Check List

Att Doc Num **Name**

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files

General Comments

User Group **Comment** **Comment Date**

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

Total: 0 comment(s)