

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:

400759904

Date Received:

12/29/2014

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

440663

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 PRODUCTION COMPANY</u>	Operator No: <u>16700</u>	Phone Numbers
Address: <u>100 CHEVRON RD</u>		Phone: <u>(970) 675-3705</u>
City: <u>RANGELY</u> State: <u>CO</u> Zip: <u>81648</u>		Mobile: <u>()</u>
Contact Person: <u>Tammie Lee Crossen</u>		Email: <u>tvzf@chevron.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400759904

Initial Report Date: 12/29/2014 Date of Discovery: 12/27/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWNW SEC 20 TWP 2N RNG 102W MERIDIAN 6

Latitude: 40.128600 Longitude: -108.876100

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) 05-103-08761

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: 10 degrees and sunny

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):

Saturday (12-27-2014) at approximately 8:30 AM a leak occurred on an injection line at Fee 137 (40.1286, -108.8761). Approximately 8 BBLs of produced water was released. The lateral valves were shut in immediately upon detection. Vacuum truck recovered an estimated 1 BBL.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
12/27/2014	COGCC	Kris Neidel	970-871-1963	Sent Email
12/27/2014	Rio Blanco County	Mark Sprague	970-878-9584	Sent Email
12/27/2014	CChevron Land Rep	Chris Cooper	432-687-7730	Sent Email

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

Signed: _____ Print Name: Tammie Lee Crossen

Title: HE Specialist Date: 12/29/2014 Email: tvzf@chevron.com

COA Type

Description

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

Attachment Check List

Att Doc Num

Name

400759904	FORM 19 SUBMITTED
400759944	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)