

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:

400758898

Date Received:

12/23/2014

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

440442

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>WPX ENERGY ROCKY MOUNTAIN LLC</u>	Operator No: <u>96850</u>	Phone Numbers
Address: <u>1001 17TH STREET - SUITE #1200</u>		Phone: <u>(970) 6832295</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(970) 5890743</u>
Zip: <u>80202</u>		Email: <u>karolina.blaney@wpenergy.com</u>
Contact Person: <u>Karolina Blaney</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400751677

Initial Report Date: 12/14/2014 Date of Discovery: 12/13/2014 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESW SEC 30 TWP 6S RNG 94W MERIDIAN 6Latitude: 39.488661 Longitude: -107.931283Municipality (if within municipal boundaries): _____ County: GARFIELD

Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 436318☐ 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? No

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): 0Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): >=1 and <5Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): _____

Weather Condition: CloudySurface 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):

A buried produced water pipeline failed resulting in a produced water spill. The discovery of the spill occurred when produced water migrated to the surface. The release was discovered by water management personnel when the fluids day lighted at the surface during a water transfer. 1 bbl of released fluid was recovered. The impacted area will be excavated and confirmation samples, for the spill remediation, will be collected at that time. None of the fluids have left the pad.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
12/14/2014	COGCC	Stan Spencer	970-625-2497	Initial form 19
12/20/2014	County	Kirby Wynn	970-625-5905	Email
12/14/2014	Fire Department	David Blair	970-285-9119	Email
12/14/2014	Landowner	Gillispie	-	Phone call

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 12/23/2014		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	2	1	<input type="checkbox"/>
DRILLING FLUID	0	0	<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>NO</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
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): <u>52</u>		Width of Impact (feet): <u>15</u>	
Depth of Impact (feet BGS): <u>4</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
By field measurements and mapping with a Trimble GPS unit.			
Soil/Geology Description:			
Potts loam – loam with interbedded clay loam			
Depth to Groundwater (feet BGS) <u>90</u>		Number Water Wells within 1/2 mile radius: <u>20</u>	
If less than 1 mile, distance in feet to nearest		Water Well <u>960</u> None <input type="checkbox"/>	Surface Water <u>2892</u> None <input type="checkbox"/>
		Wetlands _____ None <input checked="" type="checkbox"/>	Springs <u>1760</u> None <input type="checkbox"/>
		Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building <u>1075</u> None <input type="checkbox"/>
Additional Spill Details Not Provided Above:			

A buried steel produced water pipeline failed due to corrosion resulting in a produced water spill. The spill was discovered by water management personnel when the fluids day lighted at the surface during a water transfer. When the release was discovered, water management personnel immediately halted the water transfer. A vac truck was dispatched to the location and was able to recover approximately 1 bbl of free standing fluids. As the release occurred in the subsurface, a majority of the fluids spilled infiltrated into the surrounding sub surface soil and were not recovered. The entire spill was contained to a small area on the location. No fluids migrated off-site. The area impacted by the release was excavated in order to complete maintenance of the line. Confirmation samples were collected from the sidewalls and bottom of the excavation. All are in compliance with Table 910-1 standards with the exception of benzo (a)pyrene on the east wall. This area will be re-sampled and any additional remediation activities will be based on these results. The impacted soil from the excavation tested below Table 910-1 and will be utilized to backfill the excavation once the east wall complies with Table 910-1 standards.

CORRECTIVE ACTIONS

#1	Supplemental Report Date:	12/23/2014		
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)				
A buried steel produced water pipeline failed due to corrosion resulting in a produced water spill. The spill was discovered by water management personnel when the fluids day lighted at the surface during a water transfer.				
Describe measures taken to prevent the problem(s) from reoccurring:				
The steel water transfer line on the location is being replaced by a flex steel line which is less prone to failure due to corrosion.				
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: Karolina Blaney
Title: Environmental Specialist Date: 12/23/2014 Email: karolina.blaney@wpenergy.com

COA Type

Description

--	--

Attachment Check List

Att Doc Num	Name
400758898	FORM 19 SUBMITTED
400758910	AERIAL PHOTOGRAPH

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)