

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:

400854793

Date Received:

09/19/2013

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

442318

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 USA INC</u>	Operator No: <u>16700</u>	Phone Numbers
Address: <u>6001 BOLLINGER CANYON RD</u>		Phone: <u>(970) 629-3720</u>
City: <u>SAN RAMON</u>	State: <u>CA</u>	Zip: <u>94583</u>
Contact Person: <u>ross Alire</u>		Mobile: <u>()</u>
		Email: <u>vali@chevron.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400854793

Initial Report Date: 09/19/2013 Date of Discovery: 09/13/2013 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNE SEC 24 TWP 2N RNG 103W MERIDIAN 6Latitude: 40.132143 Longitude: -108.900768Municipality (if within municipal boundaries): _____ County: RIO BLANCO

Reference Location:

Facility Type: WELL PAD☐ Facility/Location ID No _____☐ No Existing Facility or Location ID No.☒ Well API No. (Only if the reference facility is well) 05-103-08104

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? 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): Unknown

Specify: _____

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): _____

Weather Condition: unknownSurface Owner: FEDERAL

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):

On 9/13/2015 Water Injection leak 150 ft north of injection well Emerald 72X. Api number 05-103-0810400. 2 bbls water spilled zero oil. This happened at 0640 AM today September 13. Shut in at 0650 AM from a pin hole leak in a 3" Fiberglass pipebody. Zero bbls recovered.

List Agencies and Other Parties Notified:

OPERATOR COMMENTS:

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: 09/19/2013 Email: tvzf@chevron.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

400854793	FORM 19 SUBMITTED
400854879	SITE MAP

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)