

State of Colorado Oil and Gas Conservation Commission

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Document Number:

400870004

Date Received:

07/18/2015

Spill report taken by:

Spill/Release Point ID:

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>OXY USA WTP LP</u>	Operator No: <u>66571</u>	Phone Numbers
Address: <u>760 HORIZON DR #101</u>		Phone: <u>(970) 263-3637</u>
City: <u>GRAND JUNCTION</u>	State: <u>CO</u>	Mobile: <u>(970) 263-3694</u>
Zip: <u>81506</u>		Email: <u>blair_rollins@oxy.com</u>
Contact Person: <u>Blair Rollins</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400870004

Initial Report Date: 07/16/2015 Date of Discovery: 07/15/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SENW SEC 16 TWP 6s RNG 97w MERIDIAN 6Latitude: 39.524565 Longitude: -108.225417Municipality (if within municipal boundaries): _____ County: GARFIELD

Reference Location:

Facility Type: WELL PAD ☒ Facility/Location ID No 335643
☐ 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? 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? Yes

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): >=100Estimated 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: Partly cloudySurface Owner: FEE Other(Specify): OXY USA WTP LP

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):

At approximately 01:00PM Wednesday (July 15, 2015) an Oxy employee discovered a spill of produced water inside secondary containment. Cause of the spill was the result of corrosion to the flame arrester burner attached to Tank A. A total of 145 barrels of produced water was removed from the secondary containment and reintroduced into Oxy's water handling system. 100% of the released produced water was captured inside the secondary containment and recovered. No liquids were released outside secondary containment.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
7/16/2015	COGCC	Stan Spencer	970-625-2497	None
7/17/2015	Garfield County	Kirby Wynn	970-625-5905	None

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 07/15/2015		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	145	145	<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>YES</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 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>24</u>	
Depth of Impact (feet BGS): _____		Depth of Impact (inches BGS): <u>6</u>	
How was extent determined?			
All spilled material was contained inside the secondary containment and captured. All liquids inside the secondary containment were removed by a transport truck and reintroduced into Oxy's water handling system.			
Soil/Geology Description:			
Parachute - Rhone loams, 5-30% slopes			
Depth to Groundwater (feet BGS) <u>200</u>		Number Water Wells within 1/2 mile radius: <u>0</u>	
If less than 1 mile, distance in feet to nearest	Water Well _____ None <input checked="" type="checkbox"/>	Surface Water <u>1300</u>	None <input type="checkbox"/>
	Wetlands <u>1300</u> None <input type="checkbox"/>	Springs <u>1500</u>	None <input type="checkbox"/>
	Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building _____	None <input checked="" type="checkbox"/>
Additional Spill Details Not Provided Above:			
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CORRECTIVE ACTIONS

#1	Supplemental Report Date: 07/15/2015
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Cause of Spill (Check all that apply) ☐ Human Error ☒ Equipment Failure ☐ Historical-Unknown
☐ Other (specify) _____

Describe Incident & Root Cause (include specific equipment and point of failure)

Cause of the spill was the result of corrosion to the flame arrester burner attached to Tank A.

Describe measures taken to prevent the problem(s) from reoccurring:

The tank was drained and the corroded flame arrester burner was removed from the tank. A metal plate was replaced on the tank and the tank was returned to service. Once parts are available, the flame arrester burner will be reinstalled on the tank.

Volume of Soil Excavated (cubic yards): 0

Disposition of Excavated Soil (attach documentation) ☐ Offsite Disposal ☐ Onsite Treatment
☐ 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: Blair Rollins

Title: HES Specialist Date: 07/18/2015 Email: blair_rollins@oxy.com

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)