

State of Colorado Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

400877650

Date Received:

07/31/2015

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

437364

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: KERR MCGEE OIL & GAS ONSHORE LP	Operator No: 47120	Phone Numbers
Address: P O BOX 173779		Phone: (970) 336-3500
City: DENVER State: CO Zip: 80217-3779		Mobile: (720) 666-9891
Contact Person: Sam LaRue		Email: sam.larue@anadarko.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400613268

Initial Report Date: 05/22/2014 Date of Discovery: 05/21/2014 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWNE SEC 24 TWP 3N RNG 68W MERIDIAN 6

Latitude: 40.214516 Longitude: -104.947667

Municipality (if within municipal boundaries): County: WELD

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) 05-123-08180

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): Unknown

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): Unknown

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

Specify:

Land Use:

Current Land Use: CROP LAND Other(Specify):

Weather Condition: Sunny, Dry

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):

A historical release was discovered while plugging and abandoning the Reynolds Cattle Company GU 1 wellhead. The flowline was flushed, cut, and capped immediately following the discovery. Excavation of impacted soil commenced on May 21, 2014, and approximately 150 cubic yards of impacted material was removed and disposed of at the Front Range Regional Landfill in Erie, Colorado.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
5/22/2014	Weld County	Roy Rudisill	-	
5/22/2014	Weld County	Tom Parko	-	

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 07/31/2015		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE			<input checked="" type="checkbox"/>
PRODUCED WATER			<input checked="" 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>			
Secondary containment, including walls & floor regardless of construction material , must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.			
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 checked="" type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): <u>25</u>		Width of Impact (feet): <u>20</u>	
Depth of Impact (feet BGS): <u>7</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
Reference supplemental Form 19 (document no. 400615587). See attached Form 27.			
Soil/Geology Description:			
Fine sand.			
Depth to Groundwater (feet BGS) <u>7</u>		Number Water Wells within 1/2 mile radius: <u>2</u>	
If less than 1 mile, distance in feet to nearest		Water Well <u>1900</u> None <input type="checkbox"/>	Surface Water <u>20</u> None <input type="checkbox"/>
		Wetlands _____ None <input checked="" type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>
		Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building <u>1720</u> None <input type="checkbox"/>
Additional Spill Details Not Provided Above:			

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: _____

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: Sam LaRue

Title: Sr. HSE Representative Date: 07/31/2015 Email: sam.larue@anadarko.com

Attachment Check List

Att Doc Num

Name

400877662

OTHER

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)