

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

400884992

Date Received:

08/17/2015

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

442799

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: XTO ENERGY INC	Operator No: 100264	Phone Numbers
Address: 382 CR 3100		Phone: (970) 675-4122
City: AZTEC	State: NM	Zip: 87410
Contact Person: Jessica Dooling		Mobile: (970) 769-6048
		Email: jessica_dooling@xtoenergy.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400880734

Initial Report Date: 08/06/2015 Date of Discovery: 08/06/2015 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 21 TWP 2S RNG 97W MERIDIAN 6

Latitude: 39.869660 Longitude: -108.288373

Municipality (if within municipal boundaries): County: RIO BLANCO

Reference Location:

Facility Type: OTHER Facility/Location ID No 435082
 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): 0 Estimated Condensate Spill Volume(bbl): >0 and <1

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): >0 and <1

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: Clear, calm, dry

Surface Owner: FEE Other(Specify): XTO Energy

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):

During normal operations visual staining was noted in the area adjacent to the heater-treater skid load out on the Black Sulfur Tank Battery location. Preliminary investigation indicates historic impacts of produced water and condensate in soils adjacent to the heater-treater. Impacted soils will be removed and transported to an approved disposal/recycling facility and confirmation samples will be collected to verify COGCC Table 910-1 compliance. Additional information will be provided in the Form 19A.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
8/6/2015	Rio Blanco County	Mark Sprague	970-878-9584	voicemail

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 08/17/2015

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	_____	<u>0</u>	<input type="checkbox"/>
CONDENSATE	_____	_____	<input checked="" type="checkbox"/>
PRODUCED WATER	_____	_____	<input checked="" type="checkbox"/>
DRILLING FLUID	_____	<u>0</u>	<input type="checkbox"/>
FLOW BACK FLUID	_____	<u>0</u>	<input type="checkbox"/>
OTHER E&P WASTE	_____	<u>0</u>	<input type="checkbox"/>

specify: _____

Was spill/release completely contained within berms or secondary containment? NO Was an Emergency Pit constructed? NO

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) Soil Groundwater Surface Water Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): _____ Width of Impact (feet): _____

Depth of Impact (feet BGS): _____ Depth of Impact (inches BGS): 0

How was extent determined?

Initial delineation determined by visual and olfactory observation. Impacted soils were removed to a depth of 3 feet bgs, COGCC Table 910-1 compliance samples were collected (data pending). Additional impacted soils will be removed and COGCC Table 910-1 soil compliance samples will be collected if needed.

Soil/Geology Description:

Harve loam, 0-4% slopes

Depth to Groundwater (feet BGS) 9 Number Water Wells within 1/2 mile radius: 1

If less than 1 mile, distance in feet to nearest

Water Well	<u>2078</u>	None <input type="checkbox"/>	Surface Water	<u>780</u>	None <input type="checkbox"/>
Wetlands	<u>780</u>	None <input type="checkbox"/>	Springs	_____	None <input checked="" type="checkbox"/>
Livestock	<u>792</u>	None <input type="checkbox"/>	Occupied Building	<u>792</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 08/17/2015

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)

Impacts from a historic release were identified during normal operations, possibly due to truck loading operations related to the heater-treater.

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

Perform increased training of truck drivers on proper loading/unloading operations and increase frequency of inspections to unloading equipment on trucks.

Volume of Soil Excavated (cubic yards): _____

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: _____

OPERATOR COMMENTS:

For review by Stan Spencer

Upon completion of remediation activities a Notice of Completion including a summary of Table 910-1 confirmation data will be submitted and impacted soils will be disposed of at Wray Gulch Landfill, Meeker, CO (manifests available upon request).

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

Signed: _____ Print Name: Jessica Dooling
 Title: Piceance EHS Supervisor Date: 08/17/2015 Email: jessica_dooling@xtoenergy.com

Attachment Check List

Att Doc Num	Name
400885141	SITE MAP

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)