

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

400892013

Date Received:

08/28/2015

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

442987

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

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400888536

Initial Report Date: 08/22/2015 Date of Discovery: 08/21/2015 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENW SEC 31 TWP 5s RNG 97w MERIDIAN 6

Latitude: 39.574947 Longitude: -108.323193

Municipality (if within municipal boundaries): County: GARFIELD

Reference Location:

Facility Type: PIT Facility/Location ID No 284695
 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
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: NON-CROP LAND Other(Specify):
Weather Condition: warm, sunny
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

Once the impacted area is excavated, confirmation samples will be collected and analyzed for constituents listed in Table 910-1. The excavated material will be treated on location. Form 27 with the laboratory results will be submitted for COGCC's approval prior to backfilling activities.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 08/28/2015

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)

The lined production pit did not retain all of the fluids that were placed into it. Therefore, some of the fluids have migrated into the underlying soil.

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

Leakage will not occur again as the pit is being permanently closed.

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): _____

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: _____

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: Karolina Blaney
Title: Environmental Specialist Date: 08/28/2015 Email: karolina.blaney@wpenergy.com

Attachment Check List

Att Doc Num	Name
400892040	AERIAL PHOTOGRAPH

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)