

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:

400908441

Date Received:

10/01/2015

Spill report taken by:

CHESSON, BOB

Spill/Release Point ID:

443445

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: KERR MCGEE GATHERING LLCOperator No: 47121Address: PO BOX 173779City: DENVERState: COZip: 80217Contact Person: Charles Chase

Phone Numbers

Phone: (970) 336-3500Mobile: ()Email: charles.chase@anadarko.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400908441Initial Report Date: 09/30/2015Date of Discovery: 09/29/2015Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESE SEC 11 TWP 4S RNG 63W MERIDIAN 6Latitude: 39.709735 Longitude: -104.396589Municipality (if within municipal boundaries): _____ County: ARAPAHOE

Reference Location:

Facility Type: PIPELINE☐ Facility/Location ID No _____☒ 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): 0Estimated Condensate Spill Volume(bbl): UnknownEstimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): 0Estimated 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: 70s, sunnySurface 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 release due to internal corrosion of the pipeline was discovered at the 38-0000-5854-4" Pipeline. Approximately 140 cubic yards of impacted material were excavated and transported to the Tower Landfill in Commerce City, Colorado for disposal. Additional excavation details are provided in the Spill/Release Detail Report of this form.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
9/30/2015	County	Diane Kocis	-Email	

SPILL/RELEASE DETAIL REPORTS

#1

Supplemental Report Date: 10/01/2015

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE			<input checked="" type="checkbox"/>
PRODUCED WATER	0	0	<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? 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): 37 Width of Impact (feet): 22

Depth of Impact (feet BGS): 20 Depth of Impact (inches BGS): _____

How was extent determined?

Following the discovery of the release, excavation activities were initiated. Approximately 140 cubic yards of impacted material were removed and transported to the Tower Landfill in Commerce City, Colorado for disposal. Excavation activities were guided by field screening soil for volatile organic compound (VOC) concentrations using a photoionization detector (PID). Eight soil samples were collected from the sidewalls and base of the excavation at approximately 19 feet and 20 feet below ground surface (bgs), respectively. Soil samples were submitted to Origins Laboratory in Denver, Colorado for analysis of benzene, toluene, ethylbenzene, total xylenes (BTEX), total petroleum hydrocarbons (TPH) – gasoline range organics (GRO) by USEPA Method 8260, and TPH – diesel range organics and oil range organics (DRO and ORO) by USEPA Method 8015. Analytical results indicated benzene and TPH concentrations were in exceedance of applicable COGCC Table 910-1 standards in one soil sample (B02 @ 20) collected from the base of the excavation area. Constituent concentrations were below regulatory standards in the remaining seven sample locations. Soil analytical data is summarized in Table 1 and illustrated on Figure 2. Due to the excavation depth and risk of sidewall collapse, excavation activities were discontinued. A remediation strategy to address remaining hydrocarbon impacts in soil will be provided in a subsequent Form 27.

Soil/Geology Description:

Clayey sand

Depth to Groundwater (feet BGS)	<u>390</u>	Number Water Wells within 1/2 mile radius:	<u>0</u>
If less than 1 mile, distance in feet to nearest	Water Well <u>3591</u>	None <input type="checkbox"/>	Surface Water <u>2085</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>1175</u> None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 10/01/2015

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 failure in the line was caused by internal corrosion.

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

The pipeline will be repaired and sacrificial anodes will be installed to prevent corrosion.

Volume of Soil Excavated (cubic yards): 140

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:

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

Signed: _____ Print Name: Charles Chase

Title: Staff HSE Representative Date: 10/01/2015 Email: charles.chase@anadarko.com

COA Type

Description

Attachment Check List

Att Doc Num

Name

400908443	FORM 19 SUBMITTED
400908502	ANALYTICAL RESULTS
400908764	TOPOGRAPHIC MAP
400908765	SITE MAP

Total Attach: 4 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)