

# State of Colorado Oil and Gas Conservation Commission

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Document Number:

400917204

Date Received:

10/16/2015

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

443523

## 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        | <b>Phone Numbers</b><br>Phone: (720) 929.4306<br>Mobile: ( )<br>Email: erik.mickelson@anadarko.com |
| Address: P O BOX 173779                           |                           |  |
| City: DENVER                                      | State: CO Zip: 80217-3779 |  |
| Contact Person: Erik Mickelson                    |                           |  |

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400913284

Initial Report Date: 10/07/2015 Date of Discovery: 10/07/2015 Spill Type: Historical Release

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNE SEC 5 TWP 2N RNG 66W MERIDIAN 6

Latitude: 40.173799 Longitude: -104.797669

Municipality (if within municipal boundaries): County: WELD

#### Reference Location:

Facility Type: PIPELINE ☒ Facility/Location ID No 328886  
☐ 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): >=5 and <100

Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): 0

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: Partly cloudy, 65 degrees F

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):

While performing construction activities, historical petroleum hydrocarbon impacts were encountered. The volume of the release is unknown. The impacts were determined to be reportable based on the volume of hydrocarbon impacted soils removed from the location. The impacted soils were removed from the site and hauled to the licensed Kerr-McGee Land Treatment Facility for processing. A topographic Site Location Map showing the general location of the release is attached as Figure 1.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

| Date      | Agency/Party | Contact      | Phone  | Response |
|-----------|--------------|--------------|--------|----------|
| 10/7/2015 | Weld County  | Roy Rudisill | -email |          |
| 10/7/2015 | Weld County  | Troy Swain   | -email |          |
| 10/7/2015 | Weld County  | Tom Parko    | -email |          |
| 10/7/2015 | landowner    | landowner    | -mail  |          |

**SPILL/RELEASE DETAIL REPORTS**

|                 |                                      |                 |                                     |
|-----------------|--------------------------------------|-----------------|-------------------------------------|
| #1              | Supplemental Report Date: 10/14/2015 |                 |                                     |
| <b>FLUIDS</b>   | BBL's SPILLED                        | BBL's RECOVERED | Unknown                             |
| OIL             |                                      |                 | <input checked="" type="checkbox"/> |
| CONDENSATE      | 0                                    | 0               | <input 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: Historical release

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): 107 Width of Impact (feet): 73

Depth of Impact (feet BGS): 21 Depth of Impact (inches BGS): \_\_\_\_\_

How was extent determined?

The extent of impacts was determined by collecting soil samples (SS-1 through SS-25) from the sidewalls and base of the excavation footprint. The excavation was progressively expanded both laterally and vertically to reach the extent of impacts, as indicated by laboratory analytical results. Soil sample (SS) locations SS-1 through -16, -18, -21B, and -22 through -25 were below COGCC Table 910-1 allowable concentrations. Soil sample locations SS-17, -19, -20, and -21 exceeded Table 910-1 allowable concentrations, but were within the interior of the excavation. Laboratory analytical results from soil samples collected from the excavation sidewalls and base were below Table 910-1 allowable concentrations. The regional site location is provided as Figure 1. Laboratory analytical results are included in the attached Table 1.

Soil/Geology Description:

Site geology includes sandy clay.

Depth to Groundwater (feet BGS) 262 Number Water Wells within 1/2 mile radius: 4

If less than 1 mile, distance in feet to nearest Water Well 1800 None ☐ Surface Water 1270 None ☐

Wetlands 315 None ☐ Springs \_\_\_\_\_ None ☒

Livestock 1300 None ☐Occupied Building 550 None ☐

Additional Spill Details Not Provided Above:

Following further excavation activities, the dumpline that had leaked, thus causing the historical release, was decommissioned. Soil samples collected from the base and perimeter sidewalls of the excavation were below COGCC Table 910-1 allowable concentrations of contaminants of concern. In addition to the Form 19-Initial notifications (List Agencies and Other Parties section), Richard Hein (landowner) has been contacted via certified mail.

**CORRECTIVE ACTIONS**

#1 Supplemental Report Date: \_\_\_\_\_

Cause of Spill (Check all that apply) ☐ Human Error ☐ Equipment Failure ☐ Historical-Unknown  
☐ Other (specify) \_\_\_\_\_

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

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

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: Erik MickelsonTitle: Senior HSE Representative Date: 10/16/2015 Email: erik.mickelson@anadarko.com**COA Type****Description**

| COA Type | Description |
|----------|-------------|
|          |             |

**Attachment Check List****Att Doc Num****Name**

|           |                    |
|-----------|--------------------|
| 400917204 | FORM 19 SUBMITTED  |
| 400918975 | TOPOGRAPHIC MAP    |
| 400919408 | ANALYTICAL RESULTS |

Total Attach: 3 Files

**General Comments**

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

Total: 0 comment(s)