

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:

400930422

Date Received:

11/04/2015

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

443365

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: <u>NOBLE ENERGY INC</u>	Operator No: <u>100322</u>	Phone Numbers
Address: <u>1625 BROADWAY STE 2200</u>		Phone: <u>(970) 3045329</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Jacob Evans</u>		Mobile: <u>()</u>
		Email: <u>jacob.evans@nblenergy.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400906499

Initial Report Date: 09/28/2015 Date of Discovery: 09/28/2015 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWNW SEC 2 TWP 8N RNG 58W MERIDIAN 6Latitude: 40.693000 Longitude: -103.836930Municipality (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) 05-123-13966

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): >=1 and <5Estimated Condensate Spill Volume(bbl): 0Estimated 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: 80 P/CSurface Owner: FEDERAL

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):

During plugging and abandonment of the wellhead, historical impacts to soil was observed. Excavation will be initiated.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
9/28/2015	COGCC	Rick Allison	-	Submitted E-Form 19 as notification
9/28/2015	Weld County	Gracie Marquez	-	Emailed notice
9/28/2015	Noble Land	Luke Musgrave	-	Emailed notice

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:

Please review attached Form 27 and respond via email with a remediation number, thanks

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

Signed: _____ Print Name: Jacob Evans

Title: Environmental Specialist Date: 11/04/2015 Email: jacob.evans@nblenergy.com

Attachment Check List

Att Doc Num	Name
400930423	OTHER

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)