

State of Colorado Oil and Gas Conservation Commission

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Document Number:

400905336

Date Received:

11/19/2015

Spill report taken by:

AXELSON, JOHN

Spill/Release Point ID:

443263

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: PIONEER NATURAL RESOURCES USA INC

Operator No: 10084

Phone Numbers

Address: 5205 N O'CONNOR BLVD STE 200

Phone: (719) 846-7898

City: IRVING

State: TX

Zip: 75039

Mobile: ()

Contact Person: James Roybal

Email: james.roybal@pxd.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400902883

Initial Report Date: 09/21/2015

Date of Discovery: 09/18/2015

Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR nwnw SEC 29 TWP 31S RNG 65W MERIDIAN 6

Latitude: 37.322264 Longitude: -104.701090

Municipality (if within municipal boundaries): County: LAS ANIMAS

Reference Location:

Facility Type: WATER GATHERING SYSTEM/LINE

☒ Facility/Location ID No 427440☐ 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? Yes

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): 0

Estimated Other E&P Waste Spill Volume(bbl): 0

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: 5bbls

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify):

Weather Condition: sunny

Surface Owner: FEE

Other(Specify): Trust Land

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):

Crews found water bubbling out of the ground on Friday 9/18/15 at 12:00 PM, Lease operator was called and leak was isolated. after review it was determined that it was a reportable spill estimating 5bbls of produced water were spilled. The spill ran down the lease road for about 225' were it left the access road and entered a dry drainage that was considered waters of the state with no live water. Plans for repair are being made with investigation to follow. A call was made to the CDPHE hotline, and for reference the spill occurred at the intersection of Cool Whip 22-29 well site.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
9/21/2015	CGCC	John Axelson	-	email
9/21/2015	CDPHE	Ann Nedro	-	CDPHE Hotline
9/21/2015	LACOG	Bob Lucero	-	email
9/21/2015	Land Owner	Boydenson Trust Prop.	-	Voicemail

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 09/25/2015		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	5	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? <u>NO</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
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) <input checked="" type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input checked="" type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): 405		Width of Impact (feet): 1	
Depth of Impact (feet BGS): 0		Depth of Impact (inches BGS): 1	
How was extent determined?			
GPS and visual inspection			
Soil/Geology Description:			
Taken off Form 2A. Sheet #- Delagua, Soil complex - Mt, Soil Name- Littlepine Sandy Loam			
Depth to Groundwater (feet BGS) 125		Number Water Wells within 1/2 mile radius: 4	
If less than 1 mile, distance in feet to nearest		Water Well 2150	None <input type="checkbox"/>
		Wetlands	None <input checked="" type="checkbox"/>
		Livestock	None <input checked="" type="checkbox"/>
		Surface Water 540	None <input type="checkbox"/>
		Springs	None <input checked="" type="checkbox"/>
		Occupied Building 2150	None <input type="checkbox"/>
Additional Spill Details Not Provided Above:			

During repiar an elctro fuse collar was found to be leaking on the 8"line that was previously repaired. Repiars to the line have been made but has not been put back in service as of yet, plans to instal a gasbuster on the line are being made and presure testing of the line will be done after the instalation of the gas buster is complete.

CORRECTIVE ACTIONS

#1	Supplemental Report Date: 09/25/2015
Cause of Spill (Check all that apply) <input checked="" type="checkbox"/> Human Error <input type="checkbox"/> Equipment Failure <input type="checkbox"/> Historical-Unknown <input type="checkbox"/> Other (specify) _____	
Describe Incident & Root Cause (include specific equipment and point of failure) <div>Inadequate Design or installation have been determined as cause.</div>	
Describe measures taken to prevent the problem(s) from reoccurring: <div>A gasbuster will be installed on the lateral and pressure testing of the line and repairs will be done after the insallation of the gas buster is complete.</div>	
Volume of Soil Excavated (cubic yards): _____	
Disposition of Excavated Soil (attach documentation) <input type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment <input type="checkbox"/> 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:

Repairs to line have been made but is not back in service as of yet, plans to install a gasbuster on lateral are being made and presure testing of line will ocur after this is complete. Have atached Lab report for the well loctaions on this gahtering line. Produced water quality data from the well associated with or representative of the spill is attached.

Pioneer and its consulting geochemical specialists have found, after 20 years operating in the Raton Basin CBM field, that soil sampling no longer adds useful data on smaller, short-term spills as land uses and the environment are not sensitive to short-term exposure to CBM produced water. Effects to soil chemistry from short-term CBM produced water spills are temporary and shallow for several reasons: the water does not contain crude oil or liquid hydrocarbons; the TDS is significantly less than 10,000 mg/L; it is suitable for livestock watering, wildlife and in many cases surface discharge. Mixed with other water it is suitable for irrigation without impact. When requested by the agency or landowner Pioneer has and will collect soil samples. Pioneer Natural Resources request closure of this spill based on this statement and attached water quality data.

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

Signed: _____ Print Name: James Roybal
Title: Enviromental Supervisor Date: 11/19/2015 Email: james.roybal@pxd.com

COA Type

Description

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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400935443	ANALYTICAL RESULTS

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)