

# 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:

400973348

Date Received:

01/20/2016

Spill report taken by:

CHESSON, BOB

Spill/Release Point ID:

443445

## 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>KERR MCGEE GATHERING LLC</u>	Operator No: <u>47121</u>	<b>Phone Numbers</b>
Address: <u>PO BOX 173779</u>		Phone: <u>(720) 929-6000</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(720) 929-4306</u>
Zip: <u>80217</u>		Email: <u>erik.mickelson@anadarko.com</u>
Contact Person: <u>Erik Mickelson</u>		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400908441

Initial Report Date: 09/30/2015 Date of Discovery: 09/29/2015 Spill 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: 01/18/2016

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?

Reference Initial / Supplemental Form 19 (Document No. 400908441). See Attached Form 27.

Soil/Geology Description:

Clayey sand

Depth to Groundwater (feet BGS) 390 Number Water Wells within 1/2 mile radius: 0

If less than 1 mile, distance in feet to nearest

Water Well	3591	None <input type="checkbox"/>	Surface Water	2085	None <input type="checkbox"/>
Wetlands		None <input checked="" type="checkbox"/>	Springs		None <input checked="" type="checkbox"/>
Livestock		None <input checked="" type="checkbox"/>	Occupied Building	1175	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

## 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:

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

Signed: \_\_\_\_\_ Print Name: Erik Mickelson

Title: Senior HSE Representative Date: 01/20/2016 Email: erik.mickelson@anadarko.com

### COA Type

### Description

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### Attachment Check List

#### Att Doc Num

#### Name

400973382	OTHER
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Total Attach: 1 Files

### General Comments

#### User Group

#### Comment

#### Comment Date

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Total: 0 comment(s)