

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:

400976547

Date Received:

01/22/2016

Spill report taken by:

Spill/Release Point ID:

**SPILL/RELEASE REPORT (INITIAL)**

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 OIL &amp; GAS ONSHORE LP</u>	Operator No: <u>47120</u>	<b>Phone Numbers</b>
Address: <u>P O BOX 173779</u>		Phone: <u>(970) 336-3500</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>		Mobile: <u>(970) 515-1238</u>
Contact Person: <u>Sam LaRue</u>		Email: <u>Sam.LaRue@anadarko.com</u>

**INITIAL SPILL/RELEASE REPORT**

Initial Spill/Release Report Doc# 400976547

Initial Report Date: 01/22/2016 Date of Discovery: 01/21/2016 Spill Type: Recent Spill

**Spill/Release Point Location:**

Location of Spill/Release: QTRQTR SWSE SEC 22 TWP 5N RNG 67W MERIDIAN 6

Latitude: 40.377630 Longitude: -104.876615

Municipality (if within municipal boundaries): \_\_\_\_\_ County: WELD

**Reference Location:**

Facility Type: TANK BATTERY  Facility/Location ID No 306751  
 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): 0 Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): Unknown

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: 30's, sunny.

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):

During routine operations, an overflow of less than 5 barrels from the produced water sump was discovered inside the containment at the Callen-USX N 65N67W/27NWNE production facility. Excavation activities are on-going and are being guided in the field by screening soils for volatile organic compound (VOC) concentrations using a photoionization detector (PID). Approximately 260 cubic yards of impacted material have been excavated and transported to the Buffalo Ridge Landfill in Keenesburg, Colorado and North Weld Landfill in Ault, Colorado for disposal. Confirmation soil samples will be collected from the final extent of the excavation area. Site investigation and excavation activities will be summarized in a subsequent Supplemental Form 19.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
1/21/2016	County	Roy Rudisill	--Email	
1/21/2016	County	Troy Swain	--Email	
1/21/2016	County	Tom Parko	--Email	
1/21/2016	Land Owner	Private	-- Mail	

**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: Sam LaRue

Title: Senior HSE Representative Date: 01/22/2016 Email: Sam.LaRue@anadarko.com

**COA Type**

**Description**

--	--

**Attachment Check List**

**Att Doc Num**

**Name**

400976613	TOPOGRAPHIC MAP
400976615	FORM 19 SUBMITTED

Total Attach: 2 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

--	--	--

Total: 0 comment(s)