

# 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:

400981130

Date Received:

01/30/2016

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: 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# 400981130

Initial Report Date: 01/30/2016

Date of Discovery: 01/30/2016

Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWSE SEC 12 TWP 32S RNG 66W MERIDIAN 6

Latitude: 37.269890 Longitude: -104.730160

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): &gt;=5 and &lt;100

Estimated Other E&amp;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: Warm, 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):

The lease Operator found a valve on the gathering line at the well head split open spraying water on the location. For reference the spill occurred on the Frodo 33-12 well site. It is estimated that 10bbbls of produced water were spilled and it did leave location running offsite to the west about 400'. No State Waters were involved. It appears that freeze may have caused the valve to split. The leak was isolated upon Lease operator arrival.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
1/29/2016	COGCC	Jason Kosola	-	email
1/29/2016	LACOG	Bob Lecero	-	email
1/30/2016	Land owner	Fred Avi	-	Voicemail

**OPERATOR COMMENTS:**

Repairs and investigation will follow.

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: Environmental Supervisor Date: 01/30/2016 Email: james.roybal@pxd.com

**COA Type**

**Description**

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**Attachment Check List**

**Att Doc Num**

**Name**

400981131	TOPOGRAPHIC MAP
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Total Attach: 1 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

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Total: 0 comment(s)