

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:

400962248

Date Received:

12/31/2015

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

444888

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

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400962248

Initial Report Date: 12/31/2015 Date of Discovery: 12/30/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWSW SEC 13 TWP 3N RNG 68W MERIDIAN 6Latitude: 40.221656 Longitude: -104.956428Municipality (if within municipal boundaries): _____ County: WELD

Reference Location:

Facility Type: TANK BATTERY ☒ Facility/Location ID No 328410☐ 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? No

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): >=5 and <100Estimated 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: 20 Degrees, 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):

On December 30, 2015, a release was discovered from a hole at the base of the oil tank at the PSC-63N68W production facility. It is estimated that approximately 10 barrels of oil were released within secondary containment. Site investigation activities are on-going and will be summarized in the forthcoming 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> |
|-------------|---------------------|----------------|--------------|-----------------|
| 12/30/2015 | County | Roy Rudisill | -Email | |
| 12/30/2015 | County | Troy Swain | -Email | |
| 12/30/2015 | County | Tom Parko | -Email | |
| 12/30/2015 | Landowner | - | -Email | |

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: Sam LaRue

Title: Senior HSE Representative Date: 12/31/2015 Email: sam.larue@anadarko.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

| | |
|-----------|-------------------|
| 400962248 | FORM 19 SUBMITTED |
| 400962454 | TOPOGRAPHIC MAP |

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)