

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

401040570

Date Received:

05/03/2016

Spill report taken by:

CANFIELD, CHRIS

Spill/Release Point ID:

443089

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>ENCANA OIL & GAS (USA) INC</u>	Operator No: <u>100185</u>	Phone Numbers
Address: <u>370 17TH ST STE 1700</u>		Phone: <u>(303) 5137504</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202-5632</u>
Contact Person: <u>Nathan Fons</u>		Mobile: <u>()</u>
		Email: <u>nathan.fons@encana.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 400892085

Initial Report Date: 08/28/2015 Date of Discovery: 08/28/2015 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 18 TWP 3N RNG 68W MERIDIAN 6Latitude: 40.229230 Longitude: -105.054130Municipality (if within municipal boundaries): Mead County: WELD

Reference Location:

Facility Type: FLOWLINE☐ Facility/Location ID No. _____☐ No Existing Facility or Location ID No.☒ Well API No. (Only if the reference facility is well) 05-123-36545

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): 0Estimated Condensate Spill Volume(bbl): >=5 and <100Estimated 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): 0Specify: 8 bbls

Land Use:

Current Land Use: CROP LAND

Other(Specify): _____

Weather Condition: ClearSurface 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 leak in a flowline was discovered between the well and the tank battery. The cause is currently under investigation. Upon discovery the well was immediately shut in. Condensate has been removed by vacuum truck for offsite disposal. Once the excavation has been completed, soil samples will be taken to verify cleanup and compliance with COGCC 910 standards.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
9/3/2015	COGCC	Chris Canfield	-	email
8/28/2015	Weld County	Roy Rudisill	-	email
8/28/2015	Mead Municipality (MVFD)	Luann Penfold	-	phone call

CORRECTIVE ACTIONS

#1	Supplemental Report Date:	05/03/2016
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Cause of Spill (Check all that apply) ☐ Human Error ☒ Equipment Failure ☐ Historical-Unknown
☐ Other (specify) _____

Describe Incident & Root Cause (include specific equipment and point of failure)

The cause of the spill was due to corrosion of the flow lines.

Describe measures taken to prevent the problem(s) from reoccurring:

Encana created a procedure to verify that chemical companies performed testing and verify that chemical contractors have created a process to begin/continue treatments during transition/turnover periods.

Volume of Soil Excavated (cubic yards): 150

Disposition of Excavated Soil (attach documentation) ☒ Offsite Disposal ☐ Onsite Treatment
☐ Other (specify) _____

Volume of Impacted Ground Water Removed (bbls): 0

Volume of Impacted Surface Water Removed (bbls): 0

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:

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

Signed: _____ Print Name: Nathan Fons

Title: Env. Coordinator Date: 05/03/2016 Email: nathan.fons@encana.com

<u>COA Type</u>	<u>Description</u>

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401040570	FORM 19 SUBMITTED
401040575	ANALYTICAL RESULTS

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)