

State of Colorado Oil and Gas Conservation Commission

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Document Number:

401063799

Date Received:

06/16/2016

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

446143

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>TEP ROCKY MOUNTAIN LLC</u>	Operator No: <u>96850</u>	Phone Numbers
Address: <u>PO BOX 370</u>		Phone: <u>(970) 263-2760</u>
City: <u>PARACHUTE</u>	State: <u>CO</u>	Mobile: <u>(970) 623-4875</u>
Zip: <u>81635</u>		Email: <u>michael.gardner@wpxe</u>
Contact Person: <u>Michael Gardner</u>		<u>nergy.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401061550

Initial Report Date: 06/11/2016 Date of Discovery: 06/10/2016 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESE SEC 23 TWP 1S RNG 98W MERIDIAN 6

Latitude: 39.943532 Longitude: -108.353996

Municipality (if within municipal boundaries): _____ County: RIO BLANCO

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) 05-103-11979

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): >=5 and <100

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: hot, sunny, no windSurface Owner: FEDERAL

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 spill was caused by equipment failure. During fracing operation on the RGU 33-23-198 well, a union on an above ground frac line washed out and approximately 7 bbls of produced water sprayed off location on the pipeline right of way located southeast of the pad. The impacted area was mapped and screened for hydrocarbons. Initial screening indicated that the hydrocarbon impacts are below the COGCC cleanup standards. Two confirmation samples were collected and will be sent to a lab on Monday, June 13, 2016.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
6/11/2016	COGCC	Stan Spencer	970-625-2497	Initial Form 19
6/11/2016	Rio Blanco County	Lannie Massey	970-878-9586	Email
6/11/2016	BLM	James Roberts	970-878-3873	Voicemail
6/11/2016	Fire Department	Marshall Cook	-	Email

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 06/16/2016		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	7	7	<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? <u>NO</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
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) <input checked="" type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): 192		Width of Impact (feet): 38	
Depth of Impact (feet BGS): 0		Depth of Impact (inches BGS): 4	
How was extent determined?			
GPS and field observation			
Soil/Geology Description:			
73—Rentsac channery loam, 5 to 50 percent slopes			
Depth to Groundwater (feet BGS) 100		Number Water Wells within 1/2 mile radius: 9	
If less than 1 mile, distance in feet to nearest		Water Well 383	None <input type="checkbox"/>
		Wetlands 363	None <input type="checkbox"/>
		Livestock	None <input checked="" type="checkbox"/>
		Surface Water 363	None <input type="checkbox"/>
		Springs	None <input checked="" type="checkbox"/>
		Occupied Building 3364	None <input type="checkbox"/>
Additional Spill Details Not Provided Above:			

The impacted area was mapped and screened for hydrocarbons. Initial screening indicated that the hydrocarbon impacts are below the COGCC cleanup standards. Two confirmation samples were collected. Future remediation will be determined based upon sampling results.

CORRECTIVE ACTIONS

#1	Supplemental Report Date: 06/16/2016
Cause of Spill (Check all that apply) <input type="checkbox"/> Human Error <input checked="" type="checkbox"/> Equipment Failure <input type="checkbox"/> Historical-Unknown <input type="checkbox"/> Other (specify) _____	
Describe Incident & Root Cause (include specific equipment and point of failure) <div>The spill was caused by equipment failure. During fracing operation on the RGU 33-23-198 well, a union on an above ground frac line washed out and approximately 7 bbls of produced water sprayed off location on the pipeline right of way located southeast of the pad. O-ring on the swivel failed and caused leak.</div>	
Describe measures taken to prevent the problem(s) from reoccurring: <div>Corrective actions include inspecting equipment and lines for wear and deterioration.</div>	
Volume of Soil Excavated (cubic yards): _____	
Disposition of Excavated Soil (attach documentation) <input type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment <input type="checkbox"/> Other (specify) _____	
Volume of Impacted Ground Water Removed (bbls): _____	
Volume of Impacted Surface Water Removed (bbls): _____	

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: Michael Gardner
Title: EHS	Date: 06/16/2016 Email: michael.gardner@wpxenergy.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

401063839	AERIAL PHOTOGRAPH
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Total: 0 comment(s)