

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

401218033

Date Received:

02/23/2017

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

449303

SPILL/RELEASE REPORT (SUPPLEMENTAL)

This form is to be submitted by the party responsible for the oil and gas spill or release. Refer to COGCC Rule 906.b. for reporting requirements of spills or releases of E&P Waste or produced fluids. Submit a Site Investigation and Remediation Workplan (Form 27) when requested by the Director.

OPERATOR INFORMATION

Name of Operator: NOBLE ENERGY INC	Operator No: 100322	Phone Numbers
Address: 1625 BROADWAY STE 2200		Phone: (970) 3045329
City: DENVER State: CO Zip: 80202		Mobile: ()
Contact Person: Jacob Evans		Email: jacob.evans@nblenergy.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401213749

Initial Report Date: 02/17/2017 Date of Discovery: 02/15/2017 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWSW SEC 11 TWP 6N RNG 65W MERIDIAN 6

Latitude: 40.498900 Longitude: -104.639760

Municipality (if within municipal boundaries): County: WELD

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No 305650
 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): >=1 and <5

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

Estimated Other E&P Waste Spill Volume(bbl): 0 Estimated Drilling Fluid Spill Volume(bbl): 0

Specify:

Land Use:

Current Land Use: CROP LAND Other(Specify):

Weather Condition: sunny 50

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 bypass line on the separator developed a leak causing an unintentional release of condensate. The location is shut in and excavation of impacted soil above COGCC Table 910-1 standards is underway.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
2/15/2017	COGCC	Rick Allison	-	Emailed Notice
2/15/2017	Weld County	Roy Rudisill	-	Emailed Notice
2/17/2017	Noble Land	Landowner	-	Notified landowner of release

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 02/23/2017

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	<u>0</u>	<u>0</u>	<input type="checkbox"/>
CONDENSATE	<u> </u>	<u> </u>	<input checked="" type="checkbox"/>
PRODUCED WATER	<u>0</u>	<u>0</u>	<input type="checkbox"/>
DRILLING FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
FLOW BACK FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
OTHER E&P WASTE	<u>0</u>	<u>0</u>	<input type="checkbox"/>

specify: _____

Was spill/release completely contained within berms or secondary containment? NO Was an Emergency Pit constructed? NO

Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.

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) Soil Groundwater Surface Water Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): _____ Width of Impact (feet): _____

Depth of Impact (feet BGS): _____ Depth of Impact (inches BGS): _____

How was extent determined?

The extent of impacts will be determined through excavation of impacted soil above COGCC Table 910-1 standards. Lab confirmation soil samples will be collected by a third party environmental consultant.

Soil/Geology Description:

Sandy clay

Depth to Groundwater (feet BGS) 70 Number Water Wells within 1/2 mile radius: 6

If less than 1 mile, distance in feet to nearest

Water Well	<u>965</u>	None <input type="checkbox"/>	Surface Water	<u>2740</u>	None <input type="checkbox"/>
Wetlands	<u> </u>	None <input checked="" type="checkbox"/>	Springs	<u> </u>	None <input checked="" type="checkbox"/>
Livestock	<u> </u>	None <input checked="" type="checkbox"/>	Occupied Building	<u>450</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

No additional spill details

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: Jacob Evans

Title: Environmental Coordinator Date: 02/23/2017 Email: jacob.evans@nblenergy.com

<u>COA Type</u>	<u>Description</u>
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<u>COA Type</u>	<u>Description</u>
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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401218033	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401219198	FORM 19 SUBMITTED

Total Attach: 2 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)