

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

401251499

Date Received:

04/05/2017

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

449880

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: XTO ENERGY INC	Operator No: 100264	Phone Numbers
Address: PO BOX 6501		Phone: (970) 675-4122
City: ENGLEWOOD	State: CO Zip: 80155	Mobile: (970) 769-6048
Contact Person: Jessica Dooling		Email: jessica_dooling@xtoenergy.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401248967

Initial Report Date: 04/02/2017 Date of Discovery: 03/31/2017 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 16 TWP 2S RNG 97W MERIDIAN 6

Latitude: 39.883050 Longitude: -108.291650

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

Reference Location:

Facility Type: FLOWLINE Facility/Location ID No 335727
 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): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): >=1 and <5

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: overcast

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):

On 3/31/17 at 7:30am bubbles were noticed coming up from under a pipe rack at Love Ranch 6, all possible supply lines and wells were shut down to stop the release. It has been determined to be the 4" carbon steel combined liquids line leaving location. Estimated spill impact 2.4bbl's.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
4/1/2017	COGCC	Stan Spencer	970-625-5682	
4/1/2017	Rio Blanco County	Lannie Massey	970-878-9590	

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 04/05/2017

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	2	2	<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? 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): 10 Width of Impact (feet): 11

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

How was extent determined?

Visual Observation

Soil/Geology Description:

Silty, clayey sand to sandstone bedrock at approximately 4 feet

Depth to Groundwater (feet BGS) 15 Number Water Wells within 1/2 mile radius: 0

If less than 1 mile, distance in feet to nearest

Water Well	_____	None <input checked="" type="checkbox"/>	Surface Water	<u>700</u>	None <input type="checkbox"/>
Wetlands	_____	None <input checked="" type="checkbox"/>	Springs	_____	None <input checked="" type="checkbox"/>
Livestock	_____	None <input checked="" type="checkbox"/>	Occupied Building	_____	None <input checked="" type="checkbox"/>

Additional Spill Details Not Provided Above:

CORRECTIVE ACTIONS

#1	Supplemental Report Date: 04/05/2017
Cause of Spill (Check all that apply)	
<input type="checkbox"/> Human Error	<input checked="" type="checkbox"/> Equipment Failure
<input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Historical-Unknown
Describe Incident & Root Cause (include specific equipment and point of failure)	
On 3/31/17 at 7:30am bubbles were noticed coming up from under a pipe rack at Love Ranch 6, all possible supply lines and wells were shut down to stop the release. upon completion of hte emergency One Call excavation commenced to identify the source. The source was determined to be a pin hole in the 4" carbon steel Combined Liquids Line leaving location. Root Cause: Internal Corrosion/Erosion	
Describe measures taken to prevent the problem(s) from reoccurring:	
Path forward in development based on engineering and operational need.	
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:

For review by Stan Spencer.
 Impact Delineation currently underway, COGCC Table 910-1 confirmation soil samples have been / will be collected, results pending. Additional information to follow.

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

Signed: _____ Print Name: Jessica Dooling
 Title: Piceance EHS Supervisor Date: 04/05/2017 Email: jessica_dooling@xtoenergy.com

COA Type	Description

Attachment Check List

Att Doc Num	Name
401251598	SITE MAP

Total Attach: 1 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)