

State of Colorado Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

401276454

Date Received:

05/08/2017

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

450199

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: CHEVRON USA INC	Operator No: 16700	Phone Numbers
Address: 6301 DEAUVILLE BLVD		Phone: (432) 6877108
City: MIDLAND State: TX Zip: 79706		Mobile: (432) 9408524
Contact Person: Amy Barnhill		Email: ABarnhill@chevron.com

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401265092

Initial Report Date: 04/24/2017 Date of Discovery: 04/21/2017 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NESE SEC 30 TWP 2N RNG 102W MERIDIAN 6

Latitude: 40.114100 Longitude: -108.879300

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

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- -

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: Estimated 10 BBLS

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify):

Weather Condition: 38 with a slight drizzle

Surface Owner: OTHER (SPECIFY)

Other(Specify): Chevron

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):

Shut the main injection lateral to the wells and the half way valve to isolate the injection lateral. Called RNR Trucking to start immediate clean up of area as best as possible.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
4/22/2017	COGCC	Kris Neidel	970-871-1963	Left message

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 05/08/2017		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	13	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	0	<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): <u>5833</u>		Width of Impact (feet): <u>15</u>	
Depth of Impact (feet BGS): <u>0</u>		Depth of Impact (inches BGS): <u>5</u>	
How was extent determined?			
Extent determined by measurement and google maps			
Soil/Geology Description:			
High Clay			
Depth to Groundwater (feet BGS) <u>0</u>		Number Water Wells within 1/2 mile radius: <u>0</u>	
If less than 1 mile, distance in feet to nearest		Water Well <u> </u> None <input checked="" type="checkbox"/>	Surface Water <u> </u> None <input checked="" 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> </u> None <input checked="" type="checkbox"/>
Additional Spill Details Not Provided Above:			

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:

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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: Amy Barnhill

Title: Environmental Compliance Date: 05/08/2017 Email: ABarnhill@chevron.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

401276554	TOPOGRAPHIC MAP
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)