

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

401329524

Date Received:

06/30/2017

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

451308

SPILL/RELEASE REPORT (INITIAL)

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: <u>KERR MCGEE GATHERING LLC</u>	Operator No: <u>47121</u>	Phone Numbers
Address: <u>PO BOX 173779</u>		Phone: <u>(970) 336-3500</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>(970) 515-1238</u>
Zip: <u>80217</u>		Email: <u>Sam.LaRue@anadarko.com</u>
Contact Person: <u>Sam LaRue</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401329524

Initial Report Date: 06/30/2017 Date of Discovery: 06/30/2017 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNE SEC 26 TWP 2N RNG 66W MERIDIAN 6Latitude: 40.115727 Longitude: -104.743976Municipality (if within municipal boundaries): _____ County: WELD

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- -

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): 0Estimated Condensate Spill Volume(bbl): >0 and <1Estimated 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): 0

Specify: _____

Land Use:

Current Land Use: CROP LAND

Other(Specify): _____

Weather Condition: Mostly cloudy, ~ 70 degrees F.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 June 30, 2017, a release of at least 1 barrel of condensate occurred at the 16-80-40-4" Gathering Line when the line was struck during excavation activities. Emergency response personnel were notified and responded to the location. The affected line was isolated and controlled. Assessment and remediation activities are ongoing and will be summarized in a forthcoming Supplemental Form 19 Spill/Release Report. A topographic Site Location Map showing the geographic setting of the release is provided as Figure 1.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
6/30/2017	County	Roy Rudisill	-email	
6/30/2017	County	Troy Swain	-email	
6/30/2017	County	Tom Parko	-email	
6/30/2017	Private	Land owner	-in-person	

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: Sam LaRue

Title: Senior HSE Representative Date: 06/30/2017 Email: Sam.LaRue@anadarko.com

COA Type

Description

	Provide documentation justifying closure request within 90 days of release via supplemental form 19. If investigation and remediation require further actions beyond 90 days then submit form 27 for approval within 90 days of spill (28September2017).
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Attachment Check List

Att Doc Num

Name

401329524	SPILL/RELEASE REPORT(INITIAL)
401329538	TOPOGRAPHIC MAP
401330276	FORM 19 SUBMITTED

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)