

**State of Colorado**  
**Oil and Gas Conservation Commission**

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Document Number:

401415310

Date Received:

09/28/2017

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

452278

## 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: KERR MCGEE OIL & GAS ONSHORE LPOperator No: 47120Address: P O BOX 173779City: DENVERState: COZip: 80217-3779Contact Person: Erik Mickelson

#### Phone Numbers

Phone: (720) 9294306Mobile: ( )Email: Erik.Mickelson@anadarko.com

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401408362Initial Report Date: 09/20/2017Date of Discovery: 09/20/2017Spill Type: Historical Release

#### Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWNW SEC 25 TWP 3N RNG 67W MERIDIAN 6Latitude: 40.201320 Longitude: -104.847968Municipality (if within municipal boundaries): \_\_\_\_\_ County: WELD

#### Reference Location:

Facility Type: TANK BATTERY☐ 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): UnknownEstimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): UnknownEstimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: \_\_\_\_\_

#### Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): \_\_\_\_\_

Weather Condition: Sunny, 85 degrees FSurface 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 September 19, 2017, environmental testing activities associated with a produced water sump closure was conducted at the Erickson Birkle P25-4JI Tank Battery location. Shallow groundwater was encountered at two feet bgs in the sump's excavation. Four sidewall soil samples and one groundwater sample were collected and submitted for laboratory analysis. Soil samples were analyzed for BTEX, TPH - GRO by Method 8260, and TPH - DRO and RRO by Method 8015. The groundwater sample was analyzed for BTEX by Method 8260. The groundwater results were received on September 20 indicating benzene levels at 5.92 ug/L exceeding Table 910 -1 allowable groundwater concentrations. All four soil samples were submitted to the laboratory and the sample with the highest PID reading was analyzed. The laboratory analytical results for soil sample (N01@1.5') were ND for all constituents. Based on the groundwater results, the remaining three soil samples will be analyzed.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
9/20/2017	Weld County	Roy Rudisill	--email	
9/20/2017	Weld County	Troy Swain	--email	
9/20/2017	Weld County	Tom Parko	--email	
9/20/2017	Landowner	Landowner	--phone call	

**SPILL/RELEASE DETAIL REPORTS**

#1	Supplemental Report Date: 09/28/2017		
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL			<input checked="" type="checkbox"/>
CONDENSATE		0	<input type="checkbox"/>
PRODUCED WATER			<input checked="" type="checkbox"/>
DRILLING FLUID		0	<input type="checkbox"/>
FLOW BACK FLUID		0	<input type="checkbox"/>
OTHER E&P WASTE		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 &amp; floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
<b>A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit</b>			
Impacted Media (Check all that apply) <input type="checkbox"/> Soil <input checked="" type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): <u>14</u>		Width of Impact (feet): <u>11</u>	
Depth of Impact (feet BGS): <u>2</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
On September 19, 2017, four confirmation sidewall soil samples (N01@1.5', E01@1.5', S01@1.5', and W01@1.5') were collected from the excavation for laboratory analysis of TPH, BTEX, pH, and EC. Concentrations of all confirmation sidewall soil sample analyzed constituents were either not detectable at the lab's detection limit or below COGCC Table 910-1 allowable concentrations. Both pH and EC were within COGCC allowable thresholds. Groundwater was encountered in the excavation at two feet below ground surface and one sample was collected for laboratory analysis of BTEX. The laborator results indicated benzene exceeded COGCC Table 910-1 allowable concentrations at 5.92 ug/L. Toluene, ethylbenzene, and total xylenes were detected in the groundwater sample, but below Table 910-1 allowable concentrations. No impacted soil was removed from this location.			
Soil/Geology Description:			
Site geology includes sandy loam/clay.			
Depth to Groundwater (feet BGS) <u>2</u>		Number Water Wells within 1/2 mile radius: <u>4</u>	
If less than 1 mile, distance in feet to nearest Water Well <u>1268</u> None <input type="checkbox"/>		Surface Water <u>1426</u> None <input type="checkbox"/>	

Wetlands 1214 NoneSprings 370 NoneLivestock 2552 None ☐Occupied Building 687 None ☐

Additional Spill Details Not Provided Above:

**CORRECTIVE ACTIONS**#1 Supplemental Report Date: 09/28/2017Cause of Spill (Check all that apply) ☐ Human Error ☐ Equipment Failure ☒ Historical-Unknown☐ Other (specify) \_\_\_\_\_

Describe Incident &amp; Root Cause (include specific equipment and point of failure)

On September 19, 2017, environmental testing activities associated with a produced water sump closure was conducted at the Erickson Birkle P25-4JI Tank Battery location. Shallow groundwater was encountered at two feet below ground surface in the sump's excavation. Due to operations conducted at the sump and the proximity to groundwater, minor environmental impacts were detected in the groundwater sample. Prior to backfilling the excavation, 50 pounds of Chemically Oxygenated Granular Activated Carbon (COGAC) was applied to the groundwater.

Describe measures taken to prevent the problem(s) from reoccurring:

The onsite equipment has been decommissioned.

Volume of Soil Excavated (cubic yards): \_\_\_\_\_

Disposition of Excavated Soil (attach documentation) ☐ Offsite Disposal ☐ Onsite Treatment☐ 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: Erik MickelsonTitle: Senior HSE Representative Date: 09/28/2017 Email: erik.mickelson@anadarko.com**COA Type****Description**

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**Attachment Check List****Att Doc Num****Name**

401415310	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401415332	TOPOGRAPHIC MAP
401415335	SITE MAP

401415336	ANALYTICAL RESULTS
401415338	ANALYTICAL RESULTS
401415340	ANALYTICAL RESULTS
401418666	FORM 19 SUBMITTED

Total Attach: 7 Files

**General Comments**

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

Total: 0 comment(s)