

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

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

401467576

Date Received:

11/25/2017

Spill report taken by:

Kosola, Jason

Spill/Release Point ID:

453167

## 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>PIONEER NATURAL RESOURCES USA INC</u>	Operator No: <u>10084</u>	<b>Phone Numbers</b>
Address: <u>5205 N O'CONNOR BLVD STE 200</u>		Phone: <u>(719) 846-7898</u>
City: <u>IRVING</u>	State: <u>TX</u>	Mobile: <u>( )</u>
Zip: <u>75039</u>		Email: <u>james.roybal@pxd.com</u>
Contact Person: <u>James Roybal</u>		

### INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401467576

Initial Report Date: 11/25/2017      Date of Discovery: 11/24/2017      Spill Type: Recent Spill

#### Spill/Release Point Location:

Location of Spill/Release:    QTRQTR NWSE    SEC 32    TWP 32S    RNG 66W    MERIDIAN 6

Latitude: 37.211740      Longitude: -104.799570

Municipality (if within municipal boundaries): \_\_\_\_\_ County: LAS ANIMAS

#### Reference Location:

Facility Type: WELL      ☐ Facility/Location ID No \_\_\_\_\_  
☐ No Existing Facility or Location ID No.  
☒ Well API No. (Only if the reference facility is well) 05-071-06296

#### 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: Warm sunny

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):

We had a spill that was found yesterday 11-24-17 on the Wharton 33-32 well site (API# 05-071-06296). Lease operator reported a broken fitting on the well head allowed produced water to be spilled on location. The leak was isolated upon discovery, plans for repairs are being made. It is estimated at this time that 2bbls of produced water were spilled with no State Waters involved. Most of the water remained on location and a small amount ran off toward the lease road about 10'.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
11/25/2017	COGCC	Jason Kosola	-	email
11/25/2017	LACOG	Bob Lucero	-	email
11/24/2017	Land owner	Gary James	-	Voice mail

**OPERATOR COMMENTS:**

Repairs and investigation are 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: James Roybal

Title: Environmental Supervisor Date: 11/25/2017 Email: james.roybal@pxd.com

**COA Type**

**Description**

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**Attachment Check List**

**Att Doc Num**

**Name**

401467576	SPILL/RELEASE REPORT(INITIAL)
401467577	TOPOGRAPHIC MAP
401470241	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)