

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:

401496906

Date Received:

12/28/2017

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

453550

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: <u>KERR MCGEE OIL &amp; GAS ONSHORE LP</u>	Operator No: <u>47120</u>	<b>Phone Numbers</b>
Address: <u>P O BOX 173779</u>		Phone: <u>(720) 929-6368</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>		Mobile: <u>(785) 691-7788</u>
Contact Person: <u>Mike Dinkel</u>		Email: <u>Mike.Dinkel@anadarko.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401494926

Initial Report Date: 12/22/2017 Date of Discovery: 12/21/2017 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NENW SEC 3 TWP 3N RNG 66W MERIDIAN 6

Latitude: 40.259369 Longitude: -104.765932

Municipality (if within municipal boundaries): \_\_\_\_\_ County: WELD

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) 05-123-15286

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): 0

Estimated Other E&P Waste Spill Volume(bbl): 0 Estimated Drilling Fluid Spill Volume(bbl): >=1 and <5

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

Land Use:

Current Land Use: CROP LAND Other(Specify): \_\_\_\_\_

Weather Condition: Cloudy, ~30 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 December 21, 2017, a release occurred at the Clifford L 3-3 wellhead. While tripping pipe into the well during workover operations, trapped pressure was temporarily relieved and approximately 3 barrels of water-based drilling fluid were released to the ground around the wellhead, outside of secondary containment. Spill recovery and site assessment 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**

Date	Agency/Party	Contact	Phone	Response
12/22/2017	County	Troy Swain	-email	
12/22/2017	County	Tom Parko	-email	
12/22/2017	County	Roy Rudisill	-email	
12/22/2017	Private	Landowner	-phone	

**SPILL/RELEASE DETAIL REPORTS**

#1 Supplemental Report Date: 12/28/2017

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	<u>0</u>	<u>0</u>	<input type="checkbox"/>
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>
PRODUCED WATER	<u>0</u>	<u>0</u>	<input type="checkbox"/>
DRILLING FLUID	<u>3</u>	<u>1</u>	<input type="checkbox"/>
FLOW BACK FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
OTHER E&P WASTE	<u>0</u>	<u>0</u>	<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): \_\_\_\_\_ Width of Impact (feet): \_\_\_\_\_

Depth of Impact (feet BGS): \_\_\_\_\_ Depth of Impact (inches BGS): \_\_\_\_\_

How was extent determined?

On December 21, 2017, a release of approximately 3 barrels of water-based drilling fluid occurred at the Clifford L 3-3 wellhead. Approximately 1 barrel of water-based drilling fluid was recovered via vacuum truck and transported to the Kerr-McGee Aggregate Recycling Facility in Weld County, Colorado. Assessment 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.

Soil/Geology Description:

Unknown

Depth to Groundwater (feet BGS) 8 Number Water Wells within 1/2 mile radius: 10

If less than 1 mile, distance in feet to nearest

Water Well	<u>1100</u>	None <input type="checkbox"/>	Surface Water	<u>510</u>	None <input type="checkbox"/>
Wetlands	_____	None <input checked="" type="checkbox"/>	Springs	_____	None <input checked="" type="checkbox"/>
Livestock	<u>860</u>	None <input type="checkbox"/>	Occupied Building	<u>1125</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

## CORRECTIVE ACTIONS

#1	Supplemental Report Date:	12/28/2017
Cause of Spill (Check all that apply)		
<input type="checkbox"/> Human Error	<input checked="" type="checkbox"/> Equipment Failure	<input type="checkbox"/> Historical-Unknown
<input type="checkbox"/> Other (specify) _____		
Describe Incident & Root Cause (include specific equipment and point of failure)		
While tripping pipe into the well during workover operations, trapped pressure was temporarily relieved, releasing water-based drilling fluid around the wellhead.		
Describe measures taken to prevent the problem(s) from reoccurring:		
The crew shut the annular bag and stabbed the TIW valve to stop the release.		
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:

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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: Mike Dinkel  
Title: Staff HSE Representative Date: 12/28/2017 Email: Mike.Dinkel@anadarko.com

COA Type	Description

## Attachment Check List

Att Doc Num	Name
401496928	OTHER
401496929	TOPOGRAPHIC MAP

Total Attach: 2 Files

## General Comments

**User Group**

**Comment**

**Comment Date**

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

Total: 0 comment(s)