

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:

401498430

Date Received:

12/31/2017

Spill report taken by:

Hughes, Jim

Spill/Release Point ID:

453628

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>BP AMERICA PRODUCTION COMPANY</u>	Operator No: <u>10000</u>	Phone Numbers
Address: <u>380 AIRPORT RD</u>		Phone: <u>(832) 787-3922</u>
City: <u>DURANGO</u> State: <u>CO</u> Zip: <u>81303</u>		Mobile: <u>(832) 609-7048</u>
Contact Person: <u>Erin Garifalos</u>		Email: <u>erin.garifalos@bp.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401498430

Initial Report Date: 12/31/2017 Date of Discovery: 12/28/2017 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SENE SEC 22 TWP 34N RNG 8W MERIDIAN M

Latitude: 37.179521 Longitude: -107.699575

Municipality (if within municipal boundaries): _____ County: LA PLATA

Reference Location:

Facility Type: WELL PAD Facility/Location ID No _____
 No Existing Facility or Location ID No.
 Well API No. (Only if the reference facility is well) 05-067-09600

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: 18 bbl

Land Use:

Current Land Use: OTHER Other(Specify): Well Pad

Weather Condition: Clear

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):

Operator was performing site check and found stuffing box leak. Isolated wellhead and replaced packing.

List Agencies and Other Parties Notified:

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: Erin Garifalos

Title: Field Enviro. Coordinator Date: 12/31/2017 Email: erin.garifalos@bp.com

COA Type

Description

<u>COA Type</u>	<u>Description</u>

Attachment Check List

Att Doc Num

Name

401498430	SPILL/RELEASE REPORT(INITIAL)
401498436	OTHER
401500542	FORM 19 SUBMITTED

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

Environmental	Operator shall comply with Rule 910.b.3.	01/02/2018
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Total: 1 comment(s)