

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:

401722974

Date Received:

08/06/2018

Spill report taken by:

CHESSON, BOB

Spill/Release Point ID:

456074

**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>CONOCO PHILLIPS COMPANY</u>	Operator No: <u>19160</u>	<b>Phone Numbers</b>
Address: <u>P O BOX 2197</u>		Phone: <u>(832) 4866014</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77252-2197</u>		Mobile: <u>(281) 4675712</u>
Contact Person: <u>Liang Yu</u>		Email: <u>liang.yu@cop.com</u>

**INITIAL SPILL/RELEASE REPORT**

Initial Spill/Release Report Doc# 401701118

Initial Report Date: 07/12/2018 Date of Discovery: 07/12/2018 Spill Type: Recent Spill

**Spill/Release Point Location:**

Location of Spill/Release: QTRQTR SENE SEC 2 TWP 4S RNG 64W MERIDIAN 6

Latitude: 39.732803 Longitude: -104.509206

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

**Reference Location:**

Facility Type: WELL PAD  Facility/Location ID No 433299  
 Spill/Release Point Name: Cline  No Existing Facility or Location ID No.  
 Number: 4-64 2 1H  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? No  
*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): <u>0</u>	Estimated Condensate Spill Volume(bbl): <u>0</u>
Estimated Flow Back Fluid Spill Volume(bbl): <u>0</u>	Estimated Produced Water Spill Volume(bbl): <u>&gt;=5 and &lt;100</u>
Estimated Other E&P Waste Spill Volume(bbl): <u>0</u>	Estimated Drilling Fluid Spill Volume(bbl): <u>0</u>

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

**Land Use:**

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

Operations personnel arrived on site at 9 am 7/12/18 and found a hole in the sidewall of the water tank. According to cygnet trends, the spill happened around 7:12pm 7/11/18. A temporary plug was applied to stop the leak and a vacuum truck was used to empty the tank and suck up the freestanding water on the ground. Total volume of produced water leaked from the tank was 73.5bbbls and 20bbbls was recovered from the ground inside the tank containment. The fluid stayed in the secondary containment and had less than 1 bbl seepage outside the containment wall. Contaminated soil will be remediated and the well will remain shut in until the tank and internal lining can be repaired.

**List Agencies and Other Parties Notified:**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
7/12/2018	COGCC	Susan Sherman	719-7751111	Acknowledged
7/13/2018	Landowner	Chris Robertson	303-8408198	Acknowledged
7/13/2018	Arapahoe County	Diane Kocis	720-8746751	Acknowledged

Was there a Grade 1 Gas Leak associated with this E & P waste spill or release? Yes  No

If YES, enter the Document Number of the Initial Grade 1 Gas Leak Report Form 44: \_\_\_\_\_

Was there a reportable accident associated with this E & P waste spill or release? Yes  No

If YES, enter the Document Number of the Initial Accident Report, Form 22: \_\_\_\_\_

**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:**

Sample results didn't meet the concentrations in table 910-1, please see attachment. Plan forward is to flush inside the secondary containment and vacuum the fluid, also excavate the impacted soil and refill. More information will be followed after remediation.

I hereby certify all statements made in this form are to the best of my knowledge true, correct, and complete.

Signed: \_\_\_\_\_ Print Name: Liang Yu

Title: Sr Regulatory Coordinator Date: 08/06/2018 Email: liang.yu@cop.com

**COA Type**

**Description**

COA Type	Description

**Attachment Check List**

**Att Doc Num**

**Name**

401723168	ANALYTICAL RESULTS
401723209	SITE MAP

Total Attach: 2 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)