

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:

401733418

Date Received:

08/14/2018

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

446746

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>CHEVRON USA INC</u>	Operator No: <u>16700</u>	Phone Numbers Phone: <u>(970) 675-3814</u> Mobile: <u>(970) 697-8385</u> Email: <u>mhaub@chevron.com</u>
Address: <u>6301 DEAUVILLE BLVD</u>		
City: <u>MIDLAND</u>	State: <u>TX</u> Zip: <u>79706</u>	
Contact Person: <u>Michael Haub</u>		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401078822

Initial Report Date: 07/14/2016 Date of Discovery: 07/12/2016 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESW SEC 14 TWP 2N RNG 103W MERIDIAN 6

Latitude: 40.139486 Longitude: -108.928128

Municipality (if within municipal boundaries): None County: RIO BLANCO

Reference Location:

Facility Type: WELL PAD

☐ Facility/Location ID No

Spill/Release Point Name:

☐ No Existing Facility or Location ID No.

Number:

☒ Well API No. (Only if the reference facility is well) 05-103-06420

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): >=100

Estimated Other E&P Waste Spill Volume(bbl): 0

Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: 182 BBLs of injection water

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify):

Weather Condition: Sunny and 65

Surface Owner: FEDERAL

Other(Specify): AC McLaughlin

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):

Tuesday (07-12-16) at approximately 6:15 AM a leak occurred on a 3" Steel injection line(coated spool) to AC McLaughlin 56X (API 05-103-06420). The spill was all contained in the containment system that drains to the syphon. Approximately 182 BBLS of injection water and 0 BBLS Oil were released. 30 BBLS of injection water were recovered from the well pad location by vac truck and taken to the water plant. The line was shut in immediately upon detection. The affected area was water washed, and line is being replaced with stainless.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
7/12/2016	COGCC	Kris Neidel	970-871-1963	Phone conversation reminded to submit written doc within 72 hrs.
7/14/2016	RBC	Lannie Massey	-	e-mail
7/14/2016	Chevron Land	Chris Cooper	-	e-mail

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:

Per COA... Source was the flowline leading to ACM 56X on the pad, table 910-1 data is attached, BLM was notified on 7/14/16 per BLM requirements to notify via NTL-3A within 15 days. Map attached shows source.

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

Signed: _____ Print Name: Michael Haub

Title: HES Specialist Date: 08/14/2018 Email: mhaub@chevron.com

COA Type

Description

	Based on review of information presented it appears that no further action is necessary at this time, and COGCC approves the closure request. However, should future conditions at the site indicate contaminant concentrations in soils exceeding COGCC standards or if ground water is found to be significantly impacted, then further investigation and/or remediation activities may be required at the site.
--	--

Attachment Check List

Att Doc Num

Name

401733418	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401733464	ANALYTICAL RESULTS
401733495	SITE MAP
401770819	FORM 19 SUBMITTED

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)