

State of Colorado
Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402010557

Date Received:

04/23/2019

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

461162

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: KERR MCGEE OIL & GAS ONSHORE LP | Operator No: 47120 | Phone Numbers Phone: (970) 336-3500 Mobile: (970) 515-1698 Email: Gregory.Hamilton@ana-darko.com |
| Address: P O BOX 173779 | | |
| City: DENVER | State: CO Zip: 80217-3779 | |
| Contact Person: Gregory Hamilton | | |

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401916728

Initial Report Date: 01/24/2019 Date of Discovery: 01/23/2019 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SESW SEC 4 TWP 3N RNG 66W MERIDIAN 6

Latitude: 40.247889 Longitude: -104.786169

Municipality (if within municipal boundaries): County: WELD

Reference Location:

Facility Type: OTHER ☐ 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- -

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): Unknown

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): 0

Specify:

Land Use:

Current Land Use: CROP LAND Other(Specify):

Weather Condition: Clear ~ 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):

Historical impacts were discovered during the abandonment of a gas sales line associated with the Kern L 4-14 production facility. Approximately 190 cubic yards of impacted material were removed and transported to the Kerr-McGee Land Treatment Facility in Weld County, Colorado. Excavation activities were guided in the field by screening soil for volatile organic compound (VOC) concentrations using a photoionization detector (PID). Groundwater was encountered within the excavation at approximately 4.5 feet below ground surface (bgs). 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 |
|-----------|--------------|--------------|--------|----------|
| 1/23/2019 | County | Jason Maxey | -email | |
| 1/23/2019 | County | Roy Rudisill | -email | |
| 1/23/2019 | Private | Landowner | -phone | |

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: _____

SPILL/RELEASE DETAIL REPORTS

| | | | |
|---|--------------------------------------|---|-------------------------------------|
| #1 | Supplemental Report Date: 04/16/2019 | | |
| FLUIDS | BBL's SPILLED | BBL's RECOVERED | Unknown |
| OIL | 0 | 0 | <input type="checkbox"/> |
| CONDENSATE | | | <input checked="" type="checkbox"/> |
| PRODUCED WATER | 0 | 0 | <input type="checkbox"/> |
| DRILLING FLUID | 0 | 0 | <input type="checkbox"/> |
| FLOW BACK FLUID | 0 | 0 | <input type="checkbox"/> |
| OTHER E&P WASTE | 0 | 0 | <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) <input checked="" type="checkbox"/> Soil <input checked="" type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature | | | |
| Surface Area Impacted: Length of Impact (feet): 32 | | Width of Impact (feet): 30 | |
| Depth of Impact (feet BGS): 4 | | Depth of Impact (inches BGS): _____ | |
| How was extent determined? | | | |
| Reference Initial-Supplemental Form 19 (Document No. 401916728) and Initial eForm 27 (Document No. 401961182). | | | |
| Soil/Geology Description: | | | |
| Clayey sand | | | |
| Depth to Groundwater (feet BGS) 4 | | Number Water Wells within 1/2 mile radius: 12 | |
| If less than 1 mile, distance in feet to nearest Water Well 440 | | None <input type="checkbox"/> Surface Water 250 None <input type="checkbox"/> | |

Wetlands _____ None ☒Springs _____ None ☒Livestock _____ 200 None ☐Occupied Building _____ 435 None ☐

Additional Spill Details Not Provided Above:

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: _____ 12739 _____

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: _____ Gregory Hamilton

Title: _____ Senior Staff Env Rep Date: _____ 04/23/2019 Email: _____ Gregory.Hamilton@anadarko.com

COA Type**Description**

Based on review of the information submitted in project 12739, it appears that the proposed investigation activities and proposed remedial actions in the approved site investigation and remediation plan will be adequate to remediate impacted groundwater at the site of the spill. 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, further investigation and/or remediation activities may be required at the site.

Attachment Check List**Att Doc Num****Name**

| | |
|-----------|------------------------------------|
| 402010557 | SPILL/RELEASE REPORT(SUPPLEMENTAL) |
| 402018871 | FORM 19 SUBMITTED |

Total Attach: 2 Files

General Comments**User Group****Comment****Comment Date**

| | | |
|--|--|---------------------|
| | | Stamp Upon Approval |
|--|--|---------------------|

Total: 0 comment(s)