

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

401988465

Date Received:

05/16/2019

Spill report taken by:

Spencer, Stan

Spill/Release Point ID:

459506

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>XTO ENERGY INC</u>	Operator No: <u>100264</u>	Phone Numbers
Address: <u>110 W 7TH STREET</u>		Phone: <u>(970) 675-4089</u>
City: <u>FORTH WORTH</u>	State: <u>TX</u>	Zip: <u>76102</u>
Contact Person: <u>Natalie Steiner</u>		Mobile: <u>(970) 250-4867</u>
		Email: <u>natalie_steiner@xtoenergy.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401854817

Initial Report Date: 11/29/2018 Date of Discovery: 11/28/2018 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SWNW SEC 35 TWP 1N RNG 98W MERIDIAN 6

Latitude: 40.013810 Longitude: -108.365660

Municipality (if within municipal boundaries): _____ County: RIO BLANCO

Reference Location:

Facility Type: WELL PAD

☒ Facility/Location ID No 415383

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? 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: ~12.5 Bbls

Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): _____

Weather Condition: Cloudy, calm, ~25F

Surface Owner: FEDERAL

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 11/28/18 ~9:00 AM, a produced water release was discovered on the YCF 35-12-1, ~12.5 Bbls produced water was released due to failure of the 2" steel discharge line from the produced water pump. The tank/pipeline were isolated from pump and a water truck removed free standing fluids (~0.5 bbls produced water recovered). Spill did not leave location.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
11/28/2018	COGCC	Stan Spencer	970-987-2891	
11/28/2018	BLM	Trach Perfors	970-878-3811	
11/28/2018	Rio Blanco County	Lannie Massey	970-878-9586	

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: 05/15/2019		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	12	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) ☒ Soil ☐ Groundwater ☐ Surface Water ☐ Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): 125 Width of Impact (feet): 25

Depth of Impact (feet BGS): 1 Depth of Impact (inches BGS): 6

How was extent determined?

XTO excavated the release area. When field observations indicated the removal of impacted soil, excavation confirmation soil samples were collected from the excavation on 11/30/18 and submitted for laboratory analysis of constituents identified in COGCC Table 910-1. Laboratory analytical results of final excavation confirmation soil samples indicate compliance with COGCC Table 910-1 concentration levels with the exception of pH, SAR, and arsenic. On 1/4/19, XTO returned to the site to collect an additional soil sample (As-Spill Area) from the release area. The soil sample was submitted for laboratory analysis of arsenic. A Site Map detailing the excavation area and soil sample locations is attached to this Form.

Soil/Geology Description:

Yamac loam, 2 to 15 percent slopes

Depth to Groundwater (feet BGS) 100 Number Water Wells within 1/2 mile radius: 0

If less than 1 mile, distance in feet to nearest Water Well None ☒ Surface Water 2118 None ☐

Wetlands None ☒ Springs None ☒

Livestock None ☒ Occupied Building None ☒

Additional Spill Details Not Provided Above:

General COGCC housekeeping Rule 603.f. requires production companies to keep well and surface production facilities weed free via weed spraying and a weed management program. Therefore, XTO is inhibiting any vegetation growth on the production location and the pH and SAR values are not threatening vegetative growth. All pH and SAR exceedances will be addressed during the final reclamation processes of the production location and any soil will concentrations of pH or SAR will be buried beneath at least 3 feet of topsoil per COGCC FAQ 32. In accordance with COGCC FAQ 31, it is reasonable to assume arsenic concentrations within the release area (11 mg/kg) to be naturally occurring and within range of background concentrations observed in the area of the site (10.5 mg/kg). Excavated material was disposed of at Wray Gulch Landfill, Meeker, CO. Backfilling of the excavation will be completed with material meeting COGCC Table 910-1 standards. A Site Map depicting background soil sample locations is included as an attachment. Laboratory analytical reports are attached and summarized in Table 1.

CORRECTIVE ACTIONS

#1	Supplemental Report Date: <u>05/15/2019</u>
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)	
<div>External corrosion of the pipe.</div>	
Describe measures taken to prevent the problem(s) from reoccurring:	
<div>The failed section of line will be replaced and steel discharge lines from the produced water disposal pumps in the Yellow Creek field will be checked for corrosion.</div>	
Volume of Soil Excavated (cubic yards): <u>145</u>	
Disposition of Excavated Soil (attach documentation) <input checked="" type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment	
<input type="checkbox"/> Other (specify) _____	
Volume of Impacted Ground Water Removed (bbls): <u>0</u>	
Volume of Impacted Surface Water Removed (bbls): <u>0</u>	

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:

The release has been laterally and horizontally delineated through excavation and soil sampling activities. Identified impacted soil has been removed to comply with COGCC Table 910-1. Therefore; no additional soil sampling or groundwater delineation is necessary.

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

Signed: _____ Print Name: Natalie Steiner

Title: Sr. EHS Technician Date: 05/16/2019 Email: natalie_steiner@xtoenergy.com

COA Type

Description

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Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402045309	SITE MAP
402045329	DISPOSAL MANIFEST
402045333	ANALYTICAL RESULTS
402045338	ANALYTICAL RESULTS
402045339	ANALYTICAL RESULTS

Total Attach: 5 Files

General Comments

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

Total: 0 comment(s)