

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:

402060760

Date Received:

05/31/2019

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

464647

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>KERR MCGEE OIL & GAS ONSHORE LP</u> | Operator No: <u>47120</u> | Phone Numbers |
| Address: <u>P O BOX 173779</u> | | Phone: <u>(970) 336-3500</u> |
| City: <u>DENVER</u> | State: <u>CO</u> | Mobile: <u>(970) 515-1353</u> |
| Zip: <u>80217-3779</u> | | Email: <u>Taylor.Rowley@anadar</u> |
| Contact Person: <u>Taylor Rowley</u> | | <u>ko.com</u> |

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402055245

Initial Report Date: 05/24/2019 Date of Discovery: 05/24/2019 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWSW SEC 34 TWP 3N RNG 66W MERIDIAN 6Latitude: 40.181290 Longitude: -104.768912Municipality (if within municipal boundaries): _____ County: WELD

Reference Location:

Facility Type: CENTRALIZED EP
WASTE MGMT FAC☐ 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): 0Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): 0Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): >=1 and <5

Specify: _____

Land Use:

Current Land Use: CROP LAND

Other(Specify): _____

Weather Condition: Sunny, ~ 65 degrees F.Surface Owner: OTHER (SPECIFY)Other(Specify): Kerr-McGee Oil & Gas Onshore LP

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 May 24, 2019, approximately 1 barrel of oil-based drilling mud (OBM) was released onto the ground surface by an unauthorized party at the Kerr-McGee Drilling Fluid Management Facility #1. Recovery activities are ongoing and will be summarized in a forthcoming Supplemental Form 19 Spill/Release Report. 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 |
|-----------|--------------|--------------|----------|----------|
| 5/24/2019 | County | Jason Maxey | -email | |
| 5/24/2019 | County | Roy Rudisill | -email | |
| 5/24/2019 | Landowner | KMG O&G | -on-site | |

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: 05/31/2019 | | |
| FLUIDS | BBL's SPILLED | BBL's RECOVERED | Unknown |
| OIL | 0 | 0 | <input type="checkbox"/> |
| CONDENSATE | 0 | 0 | <input type="checkbox"/> |
| PRODUCED WATER | 0 | 0 | <input type="checkbox"/> |
| DRILLING FLUID | 1 | 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): _____ Width of Impact (feet): _____

Depth of Impact (feet BGS): _____ Depth of Impact (inches BGS): _____

How was extent determined?

On May 24, 2019, approximately 1 barrel of oil-based drilling mud (OBM) was released onto the ground surface by an unknown third-party at the Kerr-McGee Drilling Fluid Management Facility #1. Approximately 12.5 cubic yards of impacted material have been removed via hydro-excavation activities and transported to the Kerr-McGee Aggregate Recycle Facility in Weld County Colorado for treatment. Additional hydro-excavation recovery activities are currently on hold due to wet surface conditions at the site, and will be completed and summarized in a forthcoming Supplemental Form 19 Spill/Release Report. Hydro-excavation activities are being guided in the field by screening soil for volatile organic compound (VOC) concentrations using a photoionization detector (PID), and will resume as conditions allow. A topographic Site Location Map showing the geographic setting of the release is provided as Figure 1.

Soil/Geology Description:

Vona loamy sand

| | | | | | | | | |
|--|------------|--|------|-------------------------------------|-------------------|-------------|------|-------------------------------------|
| Depth to Groundwater (feet BGS) | <u>20</u> | Number Water Wells within 1/2 mile radius: | | | | <u>6</u> | | |
| If less than 1 mile, distance in feet to nearest | Water Well | <u>1475</u> | None | <input type="checkbox"/> | Surface Water | <u>660</u> | None | <input type="checkbox"/> |
| | Wetlands | <u></u> | None | <input checked="" type="checkbox"/> | Springs | <u></u> | None | <input checked="" type="checkbox"/> |
| | Livestock | <u>1980</u> | None | <input type="checkbox"/> | Occupied Building | <u>2010</u> | None | <input type="checkbox"/> |
| Additional Spill Details Not Provided Above: | | | | | | | | |
| | | | | | | | | |

CORRECTIVE ACTIONS

| | | |
|---|---------------------------|------------|
| #1 | Supplemental Report Date: | 05/31/2019 |
| Cause of Spill (Check all that apply) | | |
| <input checked="" type="checkbox"/> Human Error <input 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) | | |
| An unknown third-party dumped approximately 1 barrel of OBM at the Kerr-McGee Drilling Fluid Management Facility #1, resulting in the release of this material onto the ground surface. | | |
| Describe measures taken to prevent the problem(s) from reoccurring: | | |
| Increased signage stating facility closure has been posted. In addition, site access has been altered to prevent future unauthorized access. | | |
| Volume of Soil Excavated (cubic yards): <u>12</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): _____ | | |
| Volume of Impacted Surface Water Removed (bbls): _____ | | |

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:

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

Signed: _____ Print Name: Taylor Rowley

Title: Senior HSE Representative Date: 05/31/2019 Email: Taylor.Rowley@anadarko.com

| <u>COA Type</u> | <u>Description</u> |
|-----------------|--------------------|
| | |

Attachment Check List

| <u>Att Doc Num</u> | <u>Name</u> |
|--------------------|------------------------------------|
| 402060760 | SPILL/RELEASE REPORT(SUPPLEMENTAL) |

| | |
|-----------|-------------------|
| 402060847 | TOPOGRAPHIC MAP |
| 402060849 | OTHER |
| 402061700 | 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)