

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

402136329

Date Received:

08/07/2019

SPILL/RELEASE REPORT (INITIAL)

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.

Spill report taken by:
GINTAUTAS, PETER

Spill/Release Point ID:
466516

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) 515-1698</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80217-3779</u>		Mobile: <u>()</u>
Contact Person: <u>Greg Hamilton</u>		Email: <u>Gregory.Hamilton@ana darko.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402136329

Initial Report Date: 08/06/2019 Date of Discovery: 08/06/2019 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR SENW SEC 4 TWP 2N RNG 67W MERIDIAN 6

Latitude: 40.169300 Longitude: -104.896740

Municipality (if within municipal boundaries): Firestone County: WELD

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No 330811

Spill/Release Point Name: BABCOCK No Existing Facility or Location ID No.

Number: 19N-33HZ 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: _____

Land Use:

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

Weather Condition: 90's and sunny

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):

On the afternoon of August 6, 2019, approximately 5 barrels of produced water was released outside of containment at the BABCOCK 19N-33HZ location (Location ID: 330811). This release was caused by a mechanical failure on a hydro-vac truck. The majority of the liquid was recovered from the pad surface and cleanup activities are currently underway. Excavation activities will be summarized in a forthcoming Supplemental Form 19 Spill/Release Report. A Topographic Map showing the geographic setting of the release is provided as Figure 1.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
8/6/2019	County	Jason Maxey	-	Notified via Email
8/6/2019	County	Roy Rudisill	-	Notified via Email
8/7/2019	Private	Landowner	-	Notified via 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: _____

OPERATOR COMMENTS:

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

Signed: _____ Print Name: Greg Hamilton
 Title: Senior Environmental Rep. Date: 08/07/2019 Email: Gregory.Hamilton@anadarko.com

<u>COA Type</u>	<u>Description</u>
	Provide documentation justifying closure request within 45 days of release via supplemental form 19. If investigation and remediation require further actions beyond 45 days then submit form 27 for approval within 45 days of spill (20September2019).

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402136329	SPILL/RELEASE REPORT(INITIAL)
402137187	OTHER
402137188	TOPOGRAPHIC MAP
402137294	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)