

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
402196681
Date Received:
10/02/2019
Spill report taken by:
Heil, John
Spill/Release Point ID:
468668

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

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402190122

Initial Report Date: 09/26/2019 Date of Discovery: 09/24/2019 Spill Type: Recent Spill

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NESE SEC 3 TWP 1S RNG 98W MERIDIAN 6
Latitude: 39.990850 Longitude: -108.370360
Municipality (if within municipal boundaries): County: RIO BLANCO

Reference Location:

Facility Type: WELL PAD Facility/Location ID No 316373
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:

Land Use:

Current Land Use: NON-CROP LAND Other(Specify):
Weather Condition: Clear
Surface Owner: FEDERAL Other(Specify): BLM

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 9/24/2019 ~3:35 PM a line leak was called into the XTO control room. Operators were immediately dispatched to location. Produced water was coming up through the ground by the produced water disposal line/pig launcher. The line was immediately isolated and locked out. After excavation, a 2" hole was found in the 3" Shawor poly water line. The impacted soil will be properly disposed of. No waters were affected

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
9/24/2019	COGCC	Alex Fisher	303-894-2100	left messg.
9/24/2019	BLM	Tracy Perfors	970-878-3811	left messg.
9/24/2019	County	Lannie Massey	970-878-9586	left messg.

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: 10/02/2019

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	<u>0</u>	<u>0</u>	<input type="checkbox"/>
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>
PRODUCED WATER	<u>19</u>	<u>0</u>	<input type="checkbox"/>
DRILLING FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
FLOW BACK FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
OTHER E&P WASTE	<u>0</u>	<u>0</u>	<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): 361 Width of Impact (feet): 8

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

How was extent determined?

Visual Observation

Soil/Geology Description:

Yamac loam, 2-15% slope

Depth to Groundwater (feet BGS) 200 Number Water Wells within 1/2 mile radius: 0

If less than 1 mile, distance in feet to nearest Water Well _____ None Surface Water 1301 None

Wetlands _____ None

Springs _____ None

Livestock _____ None

Occupied Building _____ None

Additional Spill Details Not Provided Above:

On 9/24/2019 ~3:36 line leak was called into the XTO control room. Operators were immediately dispatched to location. Produced Water was found to be bubbling to surface at the area of the Produced water disposal line/pig launcher. The line was immediately isolated. After excavation, a 2" hole was found in the 3" shawcor flexpipe. ~10bbls left the location and followed the road for ~200 ft. no waters were affected. Impacted soils were removed, Table 910-1 confirmation samples(s) will be collected, data pending

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 10/02/2019

Cause of Spill (Check all that apply) Human Error Equipment Failure Historical-Unknown Other (specify) _____

Describe Incident & Root Cause (include specific equipment and point of failure)

Failure of the shawcor line that was install by previous operator BOPCO - Root Cause: incorrect pipe selection

Describe measures taken to prevent the problem(s) from reoccurring:

Line is scheduled to be abandoned

Volume of Soil Excavated (cubic yards): _____

Disposition of Excavated Soil (attach documentation) Offsite Disposal Onsite Treatment

Other (specify) _____

Volume of Impacted Ground Water Removed (bbls): 0

Volume of Impacted Surface Water Removed (bbls): 0

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:

For review by Alex Fisher
Produced water release, discovered 2" split in the 3" shawcor flexpipe. Produced water line is scheduled to be abandoned
Table 910-1 confirmation samples(s) will be collected, data pending

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. SSHE Technician Date: 10/02/2019 Email: natalie_steiner@xtoenergy.com

COA Type

Description

	Operator shall collect the appropriate number of discrete soil samples from the sediment basin and road drainage to demonstrate horizontal delineation.
	Operator shall collect the appropriate number of discrete soil samples from underneath the flowline and the excavation sidewalls to demonstrate vertical and horizontal delineation.

Attachment Check List

Att Doc Num	Name
402196681	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402196838	SITE MAP
402205108	FORM 19 SUBMITTED

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)