

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:

402266736

Date Received:

12/20/2019

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

469883

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) 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@oxy.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402260584

Initial Report Date: 12/11/2019 Date of Discovery: 12/11/2019 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NWSW SEC 19 TWP 3N RNG 66W MERIDIAN 6

Latitude: 40.207980 Longitude: -104.826563

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

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No _____
 Spill/Release Point Name: Camp No Existing Facility or Location ID No.
 Number: 13-19A 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): <u>Unknown</u>	Estimated Condensate Spill Volume(bbl): <u>Unknown</u>
Estimated Flow Back Fluid Spill Volume(bbl): <u>0</u>	Estimated Produced Water Spill Volume(bbl): <u>Unknown</u>
Estimated Other E&P Waste Spill Volume(bbl): <u>0</u>	Estimated Drilling Fluid Spill Volume(bbl): <u>0</u>

Specify: _____

Land Use:

Current Land Use: OTHER Other(Specify): Tank Battery Pad
 Weather Condition: Partly Cloudy, 45°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):

During dump line removal activities associated with the Camp 13-19A facility, historical petroleum hydrocarbon impacts to the subsurface were encountered. The volume of the release is unknown. An excavation groundwater sample (GW01) collected on December 10, 2019 indicated benzene exceeded the COGCC Table 910-1 allowable level for groundwater. Assessment activities are ongoing. The complete assessment details and analytical results will be summarized in a supplemental report. The topographic Site Location Map showing the geographic setting of the release is provided as Figure 1. The excavation groundwater sample results are summarized in Table 1. The laboratory analytical report is attached.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
12/11/2019	Weld County	Weld County	-	Notified via Office of Emergency Management Online Spill Report
12/12/2019	Landowner	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: _____

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date:			
	12/19/2019			
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown	
OIL	_____	_____	<input checked="" type="checkbox"/>	
CONDENSATE	_____	_____	<input checked="" type="checkbox"/>	
PRODUCED WATER	_____	_____	<input checked="" 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): 59 Width of Impact (feet): 10

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

How was extent determined?

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: Greg Hamilton

Title: Sr. Staff Enviro. Rep. Date: 12/20/2019 Email: Gregory_Hamilton@oxy.com

COA Type	Description
----------	-------------

--	--

Attachment Check List

Att Doc Num	Name
402266736	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402266752	TOPOGRAPHIC MAP
402268061	SITE MAP
402268516	ANALYTICAL RESULTS
402269283	FORM 19 SUBMITTED

Total Attach: 5 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)