

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

402565339

Date Received:

01/04/2021

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

479008

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: CHEVRON USA INC	Operator No: 16700	Phone Numbers Phone: (970) 675-3814 Mobile: (307) 871-5363 Email: spwu@chevron.com
Address: 100 CHEVRON ROAD		
City: RANGELY	State: CO Zip: 81648	
Contact Person: Chris patterson		

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402564380

Initial Report Date: 12/31/2020 Date of Discovery: 12/30/2020 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NWNE SEC 29 TWP 2N RNG 102W MERIDIAN 6

Latitude: 40.119712 Longitude: -108.864861

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

Reference Location:

Facility Type: FLOWLINE SYSTEM

☐ Facility/Location ID No

Spill/Release Point Name: UP 48-29

☒ Well API No. (Only if the reference facility is well) 05-103-06231

☐ No Existing Facility or Location ID No.

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): 0

Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): >=1 and <5

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: Partly Cloudy, Cold 22F

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):

Gasket failed on 1" Ballon Valve on WAG-Skid. Field Specialist isolated the line, notified supervisor, then called a Vac-Truck to remove standing fluids. Area was washed with fresh water from the Main Water Plant.

List Agencies and Other Parties Notified:

Was there a Grade 1 Gas Leak? Yes ☐ No ☒

If YES, enter the Document Number of the Grade 1 Gas Leak Report Form 44: _____

Was there a reportable accident associated with either a Grade 1 Gas Leak or an E&P waste spill or release? Yes ☐ No ☒

If YES, enter the Document Number of the Initial Accident Report, Form 22: _____

Was there damage during excavation? Yes ☐ No ☒

If YES, was CO 811 notified prior to excavation? Yes ☐ No ☐

SPILL/RELEASE DETAIL REPORTS

#1 Supplemental Report Date: 01/04/2021

FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	3	0	<input type="checkbox"/>
DRILLING FLUID	0	0	<input checked="" type="checkbox"/>
FLOW BACK FLUID	0	0	<input type="checkbox"/>
OTHER E&P WASTE	160	160	<input type="checkbox"/>

specify: Clean water from the main water plant used to water wash spill area.

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): 56 Width of Impact (feet): 4

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

How was extent determined?

Field measured with measuring tape and wheel.

Soil/Geology Description:

High Clay

Depth to Groundwater (feet BGS) 3970 Number Water Wells within 1/2 mile radius: 0

If less than 1 mile, distance in feet to nearest
Water Well _____ None ☒ Surface Water _____ None ☒
Wetlands _____ None ☒ Springs _____ None ☒
Livestock _____ None ☒ Occupied Building _____ None ☒

Additional Spill Details Not Provided Above:

Operator discovered leaking valve at the well's WAG skid during daily routine duties, isolated line, made all proper notifications and replaced leaking valve. Spill area was water washed with clean water from the main water plant. HSE Specialist notified Chevron Land and Rio Blanco County of spill via email, will be diligent about entering other agency notifications on future F19 Initial Reports. See attached spill map.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 01/04/2021

Root Cause of Spill/Release Equipment Failure

Other (specify)

Type of Equipment at Point of Spill/Release: Manifold Piping

If "Other" selected above, specify or describe here:

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

Operator discovered leaking valve at the well's WAG skid during daily routine duties, isolated line, made all proper notifications and replaced leaking valve. Valve's internal gasket had failed.

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

Replaced valve.

Volume of Soil Excavated (cubic yards): 0

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:

Operator discovered leaking valve at the well's WAG skid during daily routine duties, isolated line, made all proper notifications and replaced leaking valve. Spill area was water washed with clean water from the main water plant. HSE Specialist notified Chevron Land and Rio Blanco County of spill via email, will be diligent about entering other agency notifications on future F19 Initial Reports. See attached spill map.

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

Signed: _____ Print Name: Chris patterson

Title: Lead HSE Specialist Date: 01/04/2021 Email: spwu@chevron.com

COA Type

Description

	Assess the nature and extent of contamination with confirmation soil samples. Delineate the horizontal and vertical extent of impacted area and remediate impacts to Table 910-1 standards. Provide documentation in either a Supplemental Form 19 if cleaned up immediately and/or Form 27 if additional site investigation and remediation is required. Documentation must include a figure showing spill area with sample locations plus laboratory results.
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Attachment List

Att Doc Num

Name

402565339	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402565404	AERIAL PHOTOGRAPH
402568423	FORM 19 SUBMITTED

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)