

State of Colorado
Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

402589172

Date Received:

02/02/2021

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

453683

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

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401505457

Initial Report Date: 01/07/2018 Date of Discovery: 01/06/2018 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR NESE SEC 32 TWP 2N RNG 102W MERIDIAN 6

Latitude: 40.097515 Longitude: -108.860161

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

Reference Location:

Facility Type: _____ Facility/Location ID No _____

Spill/Release Point Name: UP 22-32 Well API No. (Only if the reference facility is well) 05-103-06275

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? Yes

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): <u>>0 and <1</u>	Estimated Condensate Spill Volume(bbl): <u>0</u>
Estimated Flow Back Fluid Spill Volume(bbl): <u>0</u>	Estimated Produced Water Spill Volume(bbl): <u>>=100</u>
Estimated Other E&P Waste Spill Volume(bbl): <u>0</u>	Estimated Drilling Fluid Spill Volume(bbl): <u>0</u>

Specify: 167.59 total bbl fluid

Land Use:

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

Weather Condition: Clear and cold

Surface Owner: OTHER (SPECIFY) Other(Specify): Private

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):

Release of 167.59 bbl produced fluid from flowline riser. All fluid stayed on location within secondary containment berm. All fluids recovered via vac truck, and affected area water washed (wash fluid also fully recovered).

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
1/6/2018	COGCC	Kris Neidel	970-846-5097	Left message on cell phone voicemail.
1/6/2018	Chevron	Nick Moschetti	432-631-0646	Affirmed receipt of spill notification and remedial actions.

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

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 02/02/2021

Root Cause of Spill/Release Corrosion _____

Other (specify) _____

Type of Equipment at Point of Spill/Release: _____

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

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

Release of 167.59 bbl produced fluid from a cement lined flowline riser, due to internal corrosion. All fluid stayed on location within secondary containment berm. All fluids were recovered.

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

Replaced riser with coated piping.

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): _____

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:

The location and surrounding area outside of location berm was inspected on April 22, 2020 for evidence of the release noted on the original Form 19 submittal. No evidence of the release was noted on or off location. Some small areas of surface salt crusting was noted on pad surface, however it is unlikely related to the historical spill that occurred in 2016 as the pad surface is bladed each spring. A photographic record is attached. Based on these site observations Chevron requests closure of this spill. Chevron is requesting closure of Spill ID 401505457 under Table 910-1 due to the initial release occurring during Table 910-1 rule. Samples were collected prior to the Table 915 adoption.

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: 02/02/2021 Email: spwu@chevron.com

<u>COA Type</u>	<u>Description</u>

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
402589176	OTHER

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)