

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:

402619132

Date Received:

03/05/2021

Spill report taken by:

NEIDEL, KRIS

Spill/Release Point ID:

446037

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# 401056085

Initial Report Date: 05/31/2016 Date of Discovery: 05/24/2016 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR SENE SEC 19 TWP 2N RNG 102W MERIDIAN 6

Latitude: 40.130120 Longitude: -108.879340

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

Reference Location:

Facility Type: ☐ Facility/Location ID No ☒ Well API No. (Only if the reference facility is well) 05-103-06148
 Spill/Release Point Name: ☐ 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): 0	Estimated Condensate Spill Volume(bbl): 0
Estimated Flow Back Fluid Spill Volume(bbl): 0	Estimated Produced Water Spill Volume(bbl): >=100
Estimated Other E&P Waste Spill Volume(bbl): 0	Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: Approx 452 bbls of produced water was spilled with no visible oil or sheen

Land Use:

Current Land Use: NON-CROP LAND Other(Specify):
 Weather Condition: Sunny and 50 degrees
 Surface Owner: FEE Other(Specify): 64

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):

Tuesday (05-31-2016) at approximately 06:15 AM a leak occurred on the 3"Steel lateral injection line to Fee 64.(API- 051030614800). Approximately 452 BBLs of produced water and 0 BBLs oil were released. The lines were shut in immediately upon detection. Spill was contained in Siphon #7. Vacuum truck recovered an estimated 448 BBLs. The affected area will be water washed and soil samples will be taken to meet the COGCC 910-1 table.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
5/31/2016	COGCC	Kris Neidel	-	e-mail
5/31/2016	CVX Land	Chris Cooper	-	e-mail
5/31/2016	RBC	Lannie Massey	-	e-mail
5/31/2016	CDPHE	None reached	-	left a message (call made by Ross Alire-CVX)

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: 03/05/2021

Root Cause of Spill/Release Corrosion

Other (specify) _____

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

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

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

Tuesday (05-31-2016) at approximately 06:15 AM a leak occurred on the 3"Steel lateral injection line to Fee 64.(API- 051030614800). Approximately 452 BBLs of produced water and 0 BBLs oil were released. The lines were shut in immediately upon detection. Spill was contained in Siphon #7. Vacuum truck recovered an estimated 448 BBLs. The affected area will be water washed and soil samples will be taken to meet the COGCC 910-1 table. Failure was due to internal corrosion of 3 inch spool piping.

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

Coated piping was replaced with stainless steel.

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:

Tuesday (05-31-2016) at approximately 06:15 AM a leak occurred on the 3"Steel lateral injection line to Fee 64.(API- 051030614800). Approximately 452 BBLs of produced water and 0 BBLs oil were released. The lines were shut in immediately upon detection. Spill was contained in Siphon #7. Vacuum truck recovered an estimated 448 BBLs. The affected area will be water washed and soil samples will be taken to meet the COGCC 910-1 table. Failure was due to internal corrosion of 3 inch spool piping. Chevron is requesting closure of Spill ID 401056085 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 ENV Specialist Date: 03/05/2021 Email: spwu@chevron.com

COA Type

Description

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Attachment List

Att Doc Num

Name

402619143	ANALYTICAL RESULTS
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)