

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:

402749391

Date Received:

07/16/2021

Spill report taken by:

ALLISON, RICK

Spill/Release Point ID:

480281

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>WHITING OIL & GAS CORPORATION</u>	Operator No: <u>96155</u>	Phone Numbers
Address: <u>1700 LINCOLN STREET SUITE 4700</u>		Phone: <u>(970) 437-4113</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80290</u>		Mobile: <u>(432) 661-6647</u>
Contact Person: <u>Kyle Waggoner</u>		Email: <u>kyle.waggoner@whiting.com</u>

Transfer of Operatorship: Pursuant to Rule 912.f, this Supplemental Form 19 is being submitted to designate the Buying Operator as the responsible Operator for this Spill and Release.

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402743747

Initial Report Date: 07/11/2021 Date of Discovery: 07/10/2021 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR LOR 2 SEC 6 TWP 9N RNG 59W MERIDIAN 6

Latitude: 40.785565 Longitude: -104.019345

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

Enter Lat./long measurement of the actual Spill/Release Point. Lat./Long. Data shall meet standards of Rule 216.

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No 427410

Spill/Release Point Name: Wildhorse 06-0634H Well API No. (Only if the reference facility is well) 05- -

No Existing Facility or Location ID No.

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

Estimated Oil Spill Volume(bbl): >=1 and <5 Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): 0

Estimated Other E&P Waste Spill Volume(bbl): 0 Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Has the subject Spill/Release been controlled at the time of reporting? Yes

Land Use:

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

Weather Condition: 50-70 degrees F, Sunny

Surface Owner: FEE Other(Specify): Timbro Land and Cattle Co

Describe what is known about the spill/release event (what happened -- including how it was stopped, contained, and recovered):

On 7/10/2021, a release occurred at the Wildhorse 06-0634H. Approximately, 3 bbl of crude oil released on location. Additionally, a hydrocarbon mist left the west side of location. The cause of this release is due to the sight glass on the heater treater broke. The sight glass was immediately isolated, and a crew was dispatched to recover free liquids.

List of Agencies and Other Parties Notified Pursuant to Rule 912.b.(7)-(11):

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
7/11/2021	Land Owner	Timbro Land and Cattle	970-396-5885	Notified
7/11/2021	Weld County	Roy Rudisill	-	OEM Spill Report

REPORT CRITERIA

Rule 912.b.(1) Report to the Director (select all criteria that apply):

No Rule 912.b.(1).A: A Spill or Release of any size that impacts or threatens to impact any Waters of the State, Public Water System, residence or occupied structure, livestock, wildlife, or publicly-maintained road.

Waters of the State: _____ Public Water System: _____
Residence or Occupied Structure: _____ Livestock: _____
Wildlife: _____ Publicly-Maintained Road: _____

No Rule 912.b.(1).B: A Spill or Release in which 1 barrel or more of E&P Waste or produced fluids is spilled or released outside of berms or other secondary containment.

No Rule 912.b.(1).C: A Spill or Release of 5 barrels or more of E&P Waste or produced Fluids regardless of whether the Spill or Release is completely contained within berms or other secondary containment.

No Rule 912.b.(1).D: Within 6 hours of discovery, a Grade 1 Gas Leak. For a Grade 1 Gas Leak from a Flowline, the Operator also must submit the Form 19 – Initial, document number on a Form 44, Flowline Report, for the Grade 1 Gas Leak

Enter the approximate time of discovery _____ (HH:MM)
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? _____
Enter the Document Number of the Initial Accident Report, Form 22 _____
Was there damage during excavation? _____
Was CO 811 notified prior to excavation? _____

No Rule 912.b.(1).E: The discovery of 10 cubic yards or more of impacted material resulting from a current or historic Spill or Release. Discovery and reporting will not be contingent upon confirmation samples demonstrating exceedance of Table 915-1 standards.

Estimated Volume of Impacted Solids (cu. yd.): _____

No Rule 912.b.(1).F: The discovery of impacted Waters of the State, including Groundwater. Discovery and reporting will not be contingent upon confirmation samples demonstrating exceedance of Table 915-1 standards. The presence of free product or hydrocarbon sheen on Groundwater or surface water is reportable. The presence of contaminated soil in contact with Groundwater or surface water is reportable. Check all that apply:

- The presence of free product or hydrocarbon sheen Surface Water
- The presence of free product or hydrocarbon sheen on Groundwater
- The presence of contaminated soil in contact with Groundwater
- The presence of contaminated soil in contact with Surface water

No	Rule 912.b.(1).G: A suspected or actual Spill or Release of any volume where the volume cannot be immediately determined, including a spill or release of any volume that daylight from the subsurface.
Yes	Rule 912.b.(1).H: Spill or Release resulting in vaporized hydrocarbon mists that leave the Oil and Gas Location or Off-Location Flowline right of way from an Oil and Gas Location and impacts or threatens to impact off-location property.
	<input checked="" type="checkbox"/> Areas offsite of Oil & Gas Location <input type="checkbox"/> Off-Location Flowline right of way
No	Rule 912.b.(1).I: A Release of natural gas that results in an accumulation of soil gas or gas seeps.
No	Rule 912.b.(1).J: A Release that results in natural gas in Groundwater.

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: <u>07/16/2021</u>		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	<u>3</u>	<u>3</u>	<input type="checkbox"/>
CONDENSATE	<u>0</u>	<u>0</u>	<input type="checkbox"/>
PRODUCED WATER	<u>0</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? <u>NO</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
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) <input checked="" type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): <u>45</u>		Width of Impact (feet): <u>41</u>	
Depth of Impact (feet BGS): <u>0</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
Visually inspected and measured			
Soil/Geology Description:			
5- Ascalon fine sandy loam			
Depth to Groundwater (feet BGS) <u>85</u>		Number Water Wells within 1/2 mile radius: <u>1</u>	
If less than 1 mile, distance in feet to nearest		Water Well <u>2600</u> None <input type="checkbox"/>	Surface Water <u>2200</u> None <input type="checkbox"/>
		Wetlands _____ None <input checked="" type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>
		Livestock _____ None <input checked="" type="checkbox"/>	Occupied Building _____ None <input checked="" type="checkbox"/>
Additional Spill Details Not Provided Above:			
Brandon with the Colorado Parks and Wildlife have been notified of this release			

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 07/16/2021

Root Cause of Spill/Release Natural Force Damage

Other (specify)

Type of Equipment at Point of Spill/Release: Vertical Heater Treater

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

Empty text box for specifying other equipment details.

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

It appears that the treater sight glass was damaged by hail/storm. Upon discovery, sight glass was isolated to stop release.

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

We are evaluating similar equipment for proper protection from breakage.

Volume of Soil Excavated (cubic yards): 14

Disposition of Excavated Soil (attach documentation) [X] 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, check all that apply) [] Horizontal and Vertical extents of impacts have been delineated. [] Documentation of compliance with Table 915-1 is attached. [] All E&P Waste has been properly treated or disposed. [] Work proceeding under an approved Form 27 (Rule 912.c). Form 27 Remediation Project No: [] SUSPECTED Spill/Release did not occur or was below Rule 912.a.(5) reporting thresholds.

OPERATOR COMMENTS:

Empty text box for 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: Tom Banks

Title: Environmental Coordinator Date: 07/16/2021 Email: tom.banks@whiting.com

Condition of Approval

COA Type Description

Table with 2 columns: COA Type, Description. Row 1: 0 COA

Attachment List

Att Doc Num	Name
402749391	SPILL/RELEASE REPORT(SUPPLEMENTAL)
402749983	PHOTO DOCUMENTATION
402752456	FORM 19 SUBMITTED

Total Attach: 3 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)