

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:

401660177

Date Received:

06/01/2018

Spill report taken by:

CHESSON, BOB

Spill/Release Point ID:

455231

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>NOBLE ENERGY INC</u>	Operator No: <u>100322</u>	Phone Numbers
Address: <u>1001 NOBLE ENERGY WAY</u>		Phone: <u>(970) 3045329</u>
City: <u>HOUSTON</u>	State: <u>TX</u>	Zip: <u>77070</u>
Contact Person: <u>Jacob Evans</u>		Mobile: <u>()</u>
		Email: <u>jacob.evans@nblenergy.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401654823

Initial Report Date: 05/27/2018 Date of Discovery: 05/26/2018 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NESE SEC 26 TWP 4N RNG 65W MERIDIAN 6

Latitude: 40.281430 Longitude: -104.621410

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

Reference Location:

Facility Type: TANK BATTERY

Facility/Location ID No _____

Spill/Release Point Name: Beebe Draw RG 26-9, 23

No Existing Facility or Location ID No.

Number: _____

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): 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: CROP LAND

Other(Specify): _____

Weather Condition: Sunny 80

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 dismantlement of the tank battery a historical release was discovered. Excavation of impacted material will be scheduled.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
5/26/2018	Bob Chesson	COGCC	-	
5/26/2018	Roy Rudisill	Weld County	-	
5/26/2018	Troy Swain	Weld County	-	
5/27/2018	Noble Land	Landowner	-	

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:	06/01/2018	
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	0	0	<input type="checkbox"/>
CONDENSATE	0	0	<input 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
<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 checked="" type="checkbox"/> Groundwater	<input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature
Surface Area Impacted:	Length of Impact (feet): _____	Width of Impact (feet): _____	
	Depth of Impact (feet BGS): _____	Depth of Impact (inches BGS): _____	
How was extent determined?	_____		
The extent of impacts will be determined through laboratory confirmation sampling.			
Soil/Geology Description:	_____		
Sandy clay			

Depth to Groundwater (feet BGS) 13

Number Water Wells within 1/2 mile radius: 6

If less than 1 mile, distance in feet to nearest

Water Well 1417 None

Surface Water 690 None

Wetlands _____ None

Springs _____ None

Livestock _____ None

Occupied Building 1330 None

Additional Spill Details Not Provided Above:

No additional spill details

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: Jacob Evans

Title: Environmental Coordinator Date: 06/01/2018 Email: jacob.evans@nblenergy.com

Condition of Approval

COA Type

Description

0 COA

Attachment List

Att Doc Num

Name

401660177	SPILL/RELEASE REPORT(SUPPLEMENTAL)
401672053	FORM 19 SUBMITTED

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)