

State of Colorado Energy & Carbon Management Commission

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Document Number:

404032478

Date Received:

12/19/2024

Spill report taken by:

Spill/Release Point ID:

SPILL/RELEASE REPORT (INITIAL /w SUPPLEMENTAL)

This form is to be submitted by the party responsible for the oil and gas spill or release. Refer to ECMC Rule 912.b. for reporting requirements of spills or releases of E&P Waste, produced Fluids, or unauthorized Releases of natural gas. Submit a Site Investigation and Remediation Workplan (Form 27) if Rule 913.c. applies.

OPERATOR INFORMATION

Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Operator No: <u>47120</u>	Phone Numbers
Address: <u>P O BOX 173779</u>		Phone: <u>(970) 515-1727</u>
City: <u>DENVER</u>	State: <u>CO</u>	Mobile: <u>()</u>
Zip: <u>80217-3779</u>		Email: <u>DJRemediation_Forms@oxy.com</u>
Contact Person: <u>Eve Bugarin</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# 404032478

Initial Report Date: 12/17/2024 Date of Discovery: 12/17/2024 Spill Type: Historical Release

Spill/Release Point Location:

QTRQTR SWNW SEC 7 TWP 2N RNG 66W MERIDIAN 6Latitude: 40.153650 Longitude: -104.826670Municipality (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.

☐ Check this box if this spill/release is related to a loss of integrity of a flowline, pipeline, crude oil transfer line, or produced water transfer line.

Reference Location:

Facility Type: WELL☐ Facility/Location ID No _____Spill/Release Point Name: HSR-Miller Fed 5-7A Wellhead☒ Well API No. (Only if the reference facility is well) 05-123-19985☐ No Existing Facility or Location ID No.

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

Estimated Oil Spill Volume(bbl): UnknownEstimated Condensate Spill Volume(bbl): UnknownEstimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): UnknownEstimated Other E&P Waste Spill Volume(bbl): 0Estimated 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:	50F Cloudy	
Surface Owner:	FEE	Other(Specify):

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

While conducting wellhead and flowline removal activities at the HSR-Miller Fed 5-7A Wellhead, historically impacted groundwater was discovered. The volume of the release is unknown. Assessment activities are ongoing. The assessment details will be summarized in a supplemental Form 27 report (Remediation No. 35592; Form 27 Initial Document No. 403791790). The topographic Site Location Map showing the geographic setting of the release is provided as Figure 1.

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>
12/17/2024	Colorado Parks & Wildlife	Colorado Parks & Wildlife	-	Contacted via email
12/18/2024	Surface Owner	Surface Owner	-	Contacted via phone
12/17/2024	Weld County	Weld County	-	Contacted via email

REPORT CRITERIA

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

- Yes 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: Impacted Public Water System: n/a
- Residence or Occupied Structure: n/a Livestock: n/a
- Wildlife: n/a Publicly-Maintained Road: n/a
- 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

Yes	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 daylights from the subsurface.
No	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 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: 12/19/2024		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL			<input checked="" type="checkbox"/>
CONDENSATE			<input checked="" 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? <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 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?			
Assessment and remediation activities are being conducted under Table 915-1 standards and the impacted groundwater will be monitored. The analytical results and assessment details will be provided in a supplemental Form 27 report (Remediation No. 35592; Form 27 Initial Document No. 403791790). A photo log is included as an attachment.			
Soil/Geology Description:			
Aquolls and Aquents, gravelly substratum			
Depth to Groundwater (feet BGS) <u>3</u>		Number Water Wells within 1/2 mile radius: <u>3</u>	
If less than 1 mile, distance in feet to nearest	Water Well <u>1840</u> None <input type="checkbox"/>	Surface Water <u>580</u> None <input type="checkbox"/>	
	Wetlands <u>95</u> None <input type="checkbox"/>	Springs _____ None <input checked="" type="checkbox"/>	
	Livestock <u>1500</u> None <input type="checkbox"/>	Occupied Building <u>1730</u> None <input type="checkbox"/>	
Additional Spill Details Not Provided Above:			

CORRECTIVE ACTIONS

#1	Supplemental Report Date:	12/19/2024
Root Cause of Spill/Release <u>Unknown (Historical)</u>		
Other (specify) _____		
Type of Equipment at Point of Spill/Release: <u>Wellhead Line</u>		
If "Other" selected above, specify or describe here:		
Describe Incident & Root Cause (include specific equipment and point of failure)		
While conducting wellhead and flowline removal activities at the HSR-Miller Fed 5-7A Wellhead, historically impacted groundwater was discovered. The volume of the release is unknown. Assessment activities are ongoing.		
Describe measures taken to prevent the problem(s) from reoccurring:		
The wellhead and flowline are being permanently removed.		
Volume of Soil Excavated (cubic yards): _____		
Disposition of Excavated Soil (attach documentation) <input checked="" type="checkbox"/> Offsite Disposal <input type="checkbox"/> Onsite Treatment <input type="checkbox"/> Other (specify) _____		
Volume of Impacted Ground Water Removed (bbls): _____		
Volume of Impacted Surface Water Removed (bbls): _____		

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.

OPERATOR COMMENTS:

Signed: _____ Print Name: Eve Bugarin

Title: Eng. Staff Environmental Date: 12/19/2024 Email: DJRemediation_Forms@oxy.com

ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>
404035784	TOPOGRAPHIC MAP
404035786	CORRESPONDENCE
404035787	ANALYTICAL RESULTS
404035789	PHOTO DOCUMENTATION

Total Attach: 4 Files

General Comments

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

Total: 0 comment(s)