

State of Colorado

Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203

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



Document Number:

404060422

Date Received:

01/17/2025

Spill report taken by:

Spill/Release Point ID:

SPILL/RELEASE REPORT (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) 515-0055</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>Jaron Bartoszek</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 REPORTInitial Spill/Release Report Doc# 404052107

Initial Report Date: 01/08/2025 Date of Discovery: 01/08/2025 Spill Type: Recent Spill

Spill/Release Point Location:QTRQTR NWNE SEC 31 TWP 3N RNG 66W MERIDIAN 6Latitude: 40.186695 Longitude: -104.816311Municipality (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: FLOWLINE SYSTEM☐ Facility/Location ID No _____Spill/Release Point Name: Herman UPRR 31-31 1☒ Well API No. (Only if the reference facility is well) 05-123-14590☐ 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: 32 Sunny

Surface Owner: FEE Other(Specify):

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

On January 8, 2025, a release of unknown volume was discovered at the Herman UPRR 31-31 1 Flowline, due to fluid daylighting from the subsurface during flowline flushing activities. Cleanup and site assessment activities are currently ongoing and will be summarized in a forthcoming Supplemental Form 19 Spill/Release Report. A topographic Site Location Map showing the geographic setting of the release is provided as Figure 1. The State Notification email is provided as Attachment B.

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>
1/8/2025	Ft Vasquez Museum	Ft Vasquez Museum	-	Contacted via email
1/8/2025	Colorado Parks & Wildlife	Colorado Parks & Wildlife	-	Contacted via email
1/8/2025	Surface Owner	Surface Owner	-	Contacted via phone
1/8/2025	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: Threatened to Impact 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:
	<input type="checkbox"/> The presence of free product or hydrocarbon sheen Surface Water <input type="checkbox"/> The presence of free product or hydrocarbon sheen on Groundwater <input type="checkbox"/> The presence of contaminated soil in contact with Groundwater <input type="checkbox"/> 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 daylightis 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: 01/17/2025		
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 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): _____		Width of Impact (feet): _____	
Depth of Impact (feet BGS): _____		Depth of Impact (inches BGS): _____	
How was extent determined?			
<p>On January 8, 2025, a release was discovered following the discovery of fluids daylighting from the subsurface at the Herman UPRR 31 -31 1 Flowline location during flowline flushing activities. Cleanup, site assessment, and site investigation activities into the root cause of this release are currently ongoing and will be summarized in a forthcoming Supplemental Form 19 Spill/Release Report. On January 8, 2025, a preliminary waste characterization soil sample (WC01@3") was collected from the area most likely to be impacted within the release area based on field observations, and submitted for laboratory analysis of the full Table 915-1 analytical suite, using standard ECMC approved methods appropriate for detecting the target analytes in Table 915-1. Preliminary analytical results indicate that the 1,2,4-trimethylbenzene (TMB) concentration in waste characterization soil sample WC01@3" exceeded the applicable ECMC Table 915-1 soil standard. The remaining VOC and metals concentrations in soil sample WC01@3" were in compliance with ECMC Table 915-1 standards, and/or within site specific background levels (x 1.25 for metals). Additional analytical results (PAHs, pH, EC, SAR, boron, & Cr VI) are pending laboratory analysis and final reporting. A topographic Site Location Map showing the geographic setting of the release is provided as Figure 1. The soil sample locations are illustrated on Figure 2. Soil sample location and field screening data are provided in Table 1. Preliminary soil analytical results are summarized in Tables 2 and 3. The preliminary laboratory analytical report is provided as Attachment A. Field notes and a photographic log are provided as Attachment B. The State Notification email is provided as Attachment C.</p>			
Soil/Geology Description:			

Additional Spill Details Not Provided Above:

Number Water Wells within 1/2 mile radius: 12

Water Well	422	None	<input type="checkbox"/>
------------	-----	------	--------------------------

Surface Water	62	None	
---------------	----	------	---

Wetlands 62 None

Sprints ☐ None ☒

Livestock	120	None	<input type="checkbox"/>
-----------	-----	------	--------------------------

Occupied Building 230 None

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 01/17/2025

Root Cause of Spill/Release	Equipment Failure
-----------------------------	-------------------

Other (specify) _____

Type of Equipment at Point of Spill/Release: Wellhead Line

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

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

A release was discovered following the discovery of fluids daylighting from the subsurface at the Herman UPRR 31-31 1 Flowline location during flowline flushing activities. Cleanup, site assessment, and site investigation activities into the root cause of this release are currently ongoing and will be summarized in a forthcoming Supplemental Form 19 Spill/Release Report.

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) ☐ 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, 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:

I hereby certify all statements made in this form are to the best of my knowledge true, correct, and complete.		
Signed: _____	Print Name: _____	Jaron Bartoszek
Title: _____	Date: _____	01/17/2025
Email: _____		DJRemediation_Forms@oxy.com

COA Type**Description**

0 COA	

ATTACHMENT LIST**Att Doc Num****Name**

404060728	TOPOGRAPHIC MAP
404060729	SOIL SAMPLE LOCATION MAP
404060730	ANALYTICAL RESULTS
404060731	ANALYTICAL RESULTS
404060734	PHOTO DOCUMENTATION
404060735	CORRESPONDENCE

Total Attach: 6 Files

General Comments**User Group****Comment****Comment Date**

		Stamp Upon Approval
--	--	---------------------

Total: 0 comment(s)