

State of Colorado

Energy & Carbon Management Commission

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Document Number:

404156461

Date Received:

04/09/2025

Spill report taken by:

Graber, Candice
(Nikki)

Spill/Release Point ID:

489153

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 Phone: <u>(832) 814-7792</u> Mobile: <u>()</u> Email: <u>DJRemediation_Forms@oxy.com</u>
Address: <u>P O BOX 173779</u>		
City: <u>DENVER</u>	State: <u>CO</u> Zip: <u>80217-3779</u>	
Contact Person: <u>Ariana Ochoa</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: <u>01/08/2025</u>	Date of Discovery: <u>01/08/2025</u>	Spill Type: <u>Recent Spill</u>
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Spill/Release Point Location:

QTRQTR NWNE SEC 31 TWP 3N RNG 66W MERIDIAN 6

Latitude: 40.186695 Longitude: -104.816311

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.

☐ 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): <u>Unknown</u>	Estimated Condensate Spill Volume(bbl): <u>Unknown</u>
Estimated Flow Back Fluid Spill Volume(bbl): <u>0</u>	Estimated Produced Water Spill Volume(bbl): <u>Unknown</u>
Estimated Other E&P Waste Spill Volume(bbl): <u>0</u>	Estimated Drilling Fluid Spill Volume(bbl): <u>0</u>

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. 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 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: 04/09/2025		
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): <u>16</u>		Width of Impact (feet): <u>15</u>	
Depth of Impact (feet BGS): <u>4</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
On January 8, through March 18, 2025, excavation and site investigation activities were conducted to address the soil impacts at the release location. On March 18, 2025, a total of five (5) soil samples were collected from the base and each sidewall of the excavation area and were submitted for laboratory analysis of TPH, 1,2,4-TMB, boron, and Table 915-1 metals based on the waste characterization profile created using the analytical results of sample WC01@3". On March 18, 2025, groundwater was encountered in the base of the excavation area at approximately 4 feet bgs and groundwater sample REL-GW01 was collected from the excavation area and submitted for laboratory analysis of all analytes listed in ECMC Table 915-1 Organic Compounds in Groundwater (benzene, toluene, ethylbenzene, total xylenes (BTEX), naphthalene, 1,2,4-trimethylbenzene (1,2,4 – TMB), and 1,3,5-trimethylbenzene (1,3,5 – TMB)) and Groundwater Inorganic Parameters (total dissolved solids (TDS), chloride, and sulfate). Laboratory analytical results for soil and groundwater samples are pending. Site investigation activities are on-going and shall be reported along with final laboratory analytical results on a subsequent Form 27 supplemental. Soil sample location and field screening data are presented in Table 1. Partial soil analytical results are summarized in Tables 2 through 5. The soil sample locations are illustrated on Figures 2 and 3.			
Soil/Geology Description:			
Tassel fine sandy loam, 5 to 20 percent slopes			
Depth to Groundwater (feet BGS) <u>4</u>		Number Water Wells within 1/2 mile radius: <u>12</u>	

If less than 1 mile, distance in feet to nearest Water Well 422 None ☐ Surface Water 62 None ☐
Wetlands 62 None ☐ Springs None ☒
Livestock 120 None ☐ Occupied Building 230 None ☐

Additional Spill Details Not Provided Above:

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 04/09/2025

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 prior to permanent removal. Reporting shall be continued under remediation number 37871 that has been assigned to Form 27 Initial document no. 403961426 associated with the decommissioning of the associated Herman UPRR 31-31 1 wellhead and flowline.

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

The wellhead and flowline are being permanently removed.

Volume of Soil Excavated (cubic yards): 18

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: 37871

☐ SUSPECTED Spill/Release did not occur or was below Rule 912.a.(5) reporting thresholds.

OPERATOR COMMENTS:

Site assessment activities and investigation into the root-cause of this spill are currently ongoing and will be summarized in a forthcoming Supplemental Form 19. Reporting shall be continued under remediation number 37871 that has been assigned to Form 27 Initial document no. 403961426 associated with the decommissioning of the associated Herman UPRR 31-31 1 wellhead and flowline.

I hereby certify all statements made in this form are to the best of my knowledge true, correct, and complete.

Signed: _____ Print Name: Ariana Ochoa

Title: Sr. HSE Advisor Date: 04/09/2025 Email: DJRemediation_Forms@oxy.com

COA Type

Description

	Quarterly reporting (90 days) is required under Remediation Project #37871. Operator shall include the Spill ID associated with this form on the subsequent Supplemental Form 27 and select Rule 913.c.(3): Remediation of Spill and Releases pursuant to Rule 912 in addition to the previous Rule selection.
1 COA	

ATTACHMENT LIST

Att Doc Num

Name

404156461	FORM 19 SUBMITTED
404157029	TOPOGRAPHIC MAP
404157105	SOIL SAMPLE LOCATION MAP
404157111	SOIL SAMPLE LOCATION MAP
404157114	ANALYTICAL DATA SUMMARY TABLE(S)
404157115	PHOTO DOCUMENTATION
404157117	CORRESPONDENCE
404157159	ANALYTICAL RESULTS

Total Attach: 8 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)