

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:

404260925

Date Received:

07/02/2025

Spill report taken by:

Robinson, Taylor

Spill/Release Point ID:

490964

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> Zip: <u>80217-3779</u>		Mobile: <u>()</u>
Contact Person: <u>Jaron Bartoszek</u>		Email: <u>DJRemediation_Forms@oxy.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# 404253029

Initial Report Date: 06/24/2025 Date of Discovery: 06/23/2025 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR SENW SEC 11 TWP 3N RNG 66W MERIDIAN 6

Latitude: 40.242863 Longitude: -104.748612

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: WELL

Facility/Location ID No _____

Spill/Release Point Name: PLUSS L 11-2D Wellhead

Well API No. (Only if the reference facility is well) 05-123-16142

No Existing Facility or Location ID No.

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

Estimated Oil Spill Volume(bbl): Unknown

Estimated Condensate Spill Volume(bbl): Unknown

Estimated Flow Back Fluid Spill Volume(bbl): 0

Estimated Produced Water Spill Volume(bbl): Unknown

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: ~75 degrees F, 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 June 23, 2025, a release was discovered at the Pluss L 11-2D wellhead. The cause of the release was due to pressure increase associated with offset completions activity. This resulted in fluids daylighting at the surface around the wellhead. Investigation and assessment activities are ongoing and will be summarized in a forthcoming Supplemental Form 19 Spill/Release Report. A topographic Site Location Map showing the geographic location 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>
6/24/2025	Surface Owner	Private	-phone	
6/24/2025	Weld County	B. Cavanagh	-email	
6/24/2025	Weld County	R. Burton	-email	
6/24/2025	Weld County	R. Rudisill	-email	

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.): _____

Depth to Groundwater (feet BGS) 45

Number Water Wells within 1/2 mile radius: 11

If less than 1 mile, distance in feet to nearest

Water Well 1455 None

Surface Water 2565 None

Wetlands 2538 None

Springs _____ None

Livestock 1598 None

Occupied Building 1110 None

Additional Spill Details Not Provided Above:

Empty rectangular box for additional spill details.

CORRECTIVE ACTIONS

#1 Supplemental Report Date: 07/02/2025

Root Cause of Spill/Release Equipment Failure

Other (specify) _____

Type of Equipment at Point of Spill/Release: Other

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

Wellhead

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

The cause of the release was due to pressure increase associated with offset completions activity. This resulted in fluids daylighting at the surface around the wellhead. This is currently under investigation 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 is being plugged and abandoned.

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:

Empty rectangular 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: Jaron Bartoszek

Title: Environmental Advisor Date: 07/02/2025 Email: DJRemediation_Forms@oxy.com

COA Type **Description**

0 COA	

ATTACHMENT LIST

Att Doc Num **Name**

404260925	FORM 19 SUBMITTED
404261016	TOPOGRAPHIC MAP
404261017	SOIL SAMPLE LOCATION MAP
404261018	PHOTO DOCUMENTATION
404261019	CORRESPONDENCE

Total Attach: 5 Files

General Comments

User Group **Comment**

Comment Date

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

Total: 0 comment(s)