

State of Colorado  
Energy & Carbon Management Commission

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Document Number:

404561741

Date Received:

03/01/2026

Spill report taken by:

Ahmadian, Alexander

Spill/Release Point ID:

493409

### 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>NOBLE ENERGY INC</u>	Operator No: <u>100322</u>	<b>Phone Numbers</b>
Address: <u>1099 18TH STREET SUITE 1500</u>		Phone: <u>(970) 304-5000</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>		Mobile: <u>( )</u>
Contact Person: <u>Lauren Hoff</u>		Email: <u>ARCOF19@chevron.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# 404561741

Initial Report Date: 03/01/2026 Date of Discovery: 02/26/2026 Spill Type: Historical Release

#### Spill/Release Point Location:

QTRQTR SWNW SEC 8 TWP 2N RNG 64W MERIDIAN 6

Latitude: 40.154656 Longitude: -104.582960

Municipality (if within municipal boundaries): Keenesburg 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: Pioneer Y 08-05

Well API No. (Only if the reference facility is well) 05-123-31011

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: High 57 °F, Low 32 °F

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 02/12/2026, Pioneer Y 08-05 wellhead supplemental site investigation activities were completed. During the completion of the activities, no potential presence of impacted material(s) was observed/smelled. Consistent with Rule 912, samples were collected and analyzed to determine whether any constituents were present at levels in excess of Table 915-1 standards. Final laboratory analytical results received on 2/26/2026 indicate that soil sample WH01, discovered at the wellhead, exceeded ECMC Table 915 standards for naphthalene at 0.029 mg/kg, benzo(a)anthracene at 0.963 mg/kg, benzo(b)fluoranthene at 0.566 mg/kg, pyrene at 2.40 mg/kg, 1-methy-naphthalene at 0.027 mg/kg, 2-methyl-naphthalene at 0.029 mg/kg, benzo(a)pyrene at 0.512 mg/kg, and dibenzo (a,h)anthracene at 0.120 mg/kg. Groundwater was not encountered during decommissioning activities. This location is located within the municipality of Keenesburg.

**List of Agencies and Other Parties Notified Pursuant to Rule 912.b.(7)-(11):**

**OTHER NOTIFICATIONS**

Date	Agency/Party	Contact	Phone	Response
2/27/2026	NOBLE LAND	LANDOWNER	---	EMAIL/VERBAL NOTIFICATION
2/27/2026	Municipality of Keenesburg	MARK CANTERBURY	---	
2/27/2026	WELD COUNTY	BRETT CAVANAGH	---	
2/27/2026	WELD COUNTY	DAVID BURNS	---	
2/27/2026	ECMC	ALEXANDER AHMADIAN	---	

**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.): \_\_\_\_\_

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 daylight 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.

Areas offsite of Oil & Gas Location  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: 03/01/2026

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	<u>0</u>	<u>0</u>	<input type="checkbox"/>
FLOW BACK FLUID	<u>0</u>	<u>0</u>	<input type="checkbox"/>
OTHER E&P WASTE	<u>0</u>	<u>0</u>	<input type="checkbox"/>

specify: \_\_\_\_\_

Was spill/release completely contained within berms or secondary containment? NO Was an Emergency Pit constructed? NO

*Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.*

**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)  Soil  Groundwater  Surface Water  Dry Drainage Feature

Surface Area Impacted: \_\_\_\_\_ Length of Impact (feet): \_\_\_\_\_ Width of Impact (feet): \_\_\_\_\_

Depth of Impact (feet BGS): 6 Depth of Impact (inches BGS): \_\_\_\_\_

How was extent determined?

The extent of impacts will be determined through an environmental site assessment. An additional Form 19-Supplemental will be submitted requesting closure within 90 days of the discovery of this spill.

Soil/Geology Description:

SW

Depth to Groundwater (feet BGS) 18 Number Water Wells within 1/2 mile radius: 3

If less than 1 mile, distance in feet to nearest

Water Well	<u>1750</u>	None <input type="checkbox"/>	Surface Water	<u>1680</u>	None <input type="checkbox"/>
Wetlands	<u>1400</u>	None <input type="checkbox"/>	Springs	_____	None <input checked="" type="checkbox"/>
Livestock	_____	None <input checked="" type="checkbox"/>	Occupied Building	<u>2490</u>	None <input type="checkbox"/>

Additional Spill Details Not Provided Above:

No additional spill details.

## CORRECTIVE ACTIONS

#1 Supplemental Report Date: 03/01/2026

Root Cause of Spill/Release Unknown (Historical)

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)

Historical impacts were discovered during wellhead supplemental site investigation activities at the base of the wellhead excavation. Due to the historical nature of the release, an exact cause was not able to be identified.

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

Noble conducts routine AVO inspections of all oil and gas wellheads in order to identify and mitigate potential releases. Further, this wellhead is no longer active and is in the process of being decommissioned. The wellhead has been taken out of service, and there is no longer a possibility of a release originating from this infrastructure.

Volume of Soil Excavated (cubic yards): 0

Disposition of Excavated Soil (attach documentation)  Offsite Disposal  Onsite Treatment  
 Other (specify) \_\_\_\_\_

Volume of Impacted Ground Water Removed (bbls): 0

Volume of Impacted Surface Water Removed (bbls): 0

## 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: Paulette Ozaeta

Title: HSE Advisor Date: 03/01/2026 Email: paulette.ozaeta@chevron.com

**COA Type****Description**

	Pursuant to Rule 912.b.(6) Operator is required to submit a Form 19 Supplemental Report for the associated spill within 90 days of the spill date requesting closure pursuant to Rule 913.h and supported by adequate documentation to demonstrate that the Spill or Release has been fully cleaned up and complies with Table 915-1; or A Form 27 if any of the criteria listed in Rules 912.b.(6).B.i-iii apply. If Remediation will continue under an approved Form 27, the Operator will also submit a Form 19 – Supplemental which requests closure of the Spill or Release and includes the Remediation project number assigned by the Director.
1 COA	

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

404561741	SPILL/RELEASE REPORT(I/S)
404561742	LABORATORY ANALYTICAL REPORT
404561743	OTHER
404570331	FORM 19 SUBMITTED

Total Attach: 4 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)