

UNITED STATES DEPARTMENT OF THE INTERIOR
Bureau of Land Management
New Mexico State Office

REPORT OF UNDESIRABLE EVENT

DATE OF OCCURRENCE/DISCOVERY: 7-17-93 TIME OF OCCURRENCE: Approx. 10 A.M.

DATE REPORTED TO BLM: _____ TIME REPORTED: _____

BLM OFFICE REPORTED TO: (RESOURCE AREA/DISTRICT/OTHER): Farmington

LOCATION: ($\frac{1}{4}$ $\frac{1}{4}$) SE/NW SECTION 31 T. 29N R. 8W MERIDIAN NMPM

COUNTY: San Juan STATE: New Mex. WELL NAME Pritchard No. 4A

OPERATOR: COMPANY NAME Amoco Production Company PHONE NO. 505-326-9200
CONTACT PERSON'S NAME Buddy Shaw

SURFACE OWNER: Federal MINERAL OWNER: _____
(FEDERAL/INDIAN/FEE/STATE)

LEASE NO.: 1408001352 RIGHT-OF-WAY NO.: _____

UNIT NAME / COMMUNITIZATION AGREEMENT No.: _____

TYPE OF EVENT, CIRCLE APPROPRIATE ITEM(S):

BLOWOUT, FIRE, FATALITY, INJURY, PROPERTY DAMAGE, OIL SPILL, SALTWATER SPILL,
OIL AND SALTWATER SPILL, TOXIC FLUID SPILL, HAZARDOUS MATERIAL SPILL,
UNCONTROLLED FLOW OF WELLBORE FLUIDS, OTHER (SPECIFY):
Condensate Spill

CAUSE OF EVENT: Equipment Failure - Rotten Tank Bottom

HazMat Notified: (for spills) _____

Law Enforcement Notified: (for thefts) _____

CAUSE AND EXTENT OF PERSONAL INJURIES/CAUSE OF DEATH(S): _____

Safety Officer Notified: _____

EFFECTS OF EVENT: _____

ACTION TAKEN TO CONTROL EVENT: Installed new tank and mixed contaminated soil
with dry and spread on location.

LENGTH OF TIME TO CONTROL BLOWOUT OR FIRE: _____

Condensate
VOLUMES DISCHARGED: 20 Bbls. WATER _____ GAS _____

OTHER AGENCIES NOTIFIED: EMOCD

11/17/93 See Notes

