| | District I State of New Mexico | | | | | | | | | | | | |
|---|--|---|-----------------|------------|---|---------------------------------------|--|--|-----------|--|---|--------|--|
| | 1625 N Erench Dr. Hohbs NM 88240 | | | | | | ls and Natural Resources | | | Form C-141 Revised October 10, 2003 | | | |
| | 1301 W. Grand . District III | Avenue, Art | esia. NM 8821(|) | | | ervation Division | | | Submit 2 Copies to appropriate | | | |
| | 1000 Rio Brazos Road Aztec, NM 87410 | | | | | | th St. Francis Dr. | | | District Office in accordance with Rule 116 on back | | | |
| (39) | | | | | | | Fe, NM 87505 | | | | side of | | |
| | | Release Notification and Corrective Action | | | | | | | | | | | |
| | | | | | | | OPERA | TOR | | - Initia | al Report 🛛 Final I | Report | |
| | Name of Company: OXY USA, INC | | | | | | Contact: M | ark Andersen | ······ | | | | |
| 3 | Address: OXY USA, INC 6 Desta Dr. Midland TX, 79705 Facility Name: Lost Tank 33 Federal #10 | | | | | | Telephone No.: 432-685-5824 Facility Type: Well Site | | | | | | |
| | | | | | | | | | | | | | |
| | Surface Owner: BLM Mineral Owner | | | | | Owner: | r: BLM | | | Lease No. NM-96231 | | | |
| | | | <u>r</u> | <u> </u> | | | N OF RE | | <u></u> | | | | |
| | Unit Letter A | Unit LetterSectionTownshipRangeFeet fiA3321S31E660' | | | | North North | h/South Line | South Line Feet from the East/V 330' East | | West Line County Eddy | | | |
| | | | | | | | | | | | | | |
| ana. Ne | LatitudeLongitude | | | | | | | | | | | | |
| provide the second s | NATURE OF RELEASE | | | | | | | | | | | | |
| _ | Type of Release: Oil/Water | | | | | | Volume of Release unkown | | | Volume Recovered: 310bbls | | | |
| | Source of Release: Flowline leak | | | | | | Date and Hour of Occurrence 01-26-08 | | | Date and Hour of Discovery 01-27-08 | | | |
| | Was Immediate Notice Given? | | | | | | If YES, To Whom? | | | | | | |
| | Yes No Not Required | | | | | equired | | | | | | | |
| | By Whom? Jody Bennett | | | | | | Date and Hour 01-27-08 | | | | | | |
| - | Was a Watercourse Reached? | | | | | | If YES, Volume Impacting the Watercourse. | | | | | | |
| لتغتنا | If a Watercourse was Impacted, Describe Fully.* | | | | | | | | | | | | |
| 1 | If a watercoul | rse was mi | pacieu, Desch | ibe runy. | | | | | | | | | |
| | | | | | | | | | | | | | |
| | Dens the Queen of Dependicit Action Taken * | | | | | | | | | | | | |
| - | | Describe Cause of Problem and Remedial Action Taken.* Flowline leaked oil and water with an unknown volume released. Of the unknown amount, 310 barrels of oil and water were recovered on January 27, | | | | | | | | | | | |
| | 2008. | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | Describe Area | Affected a | and Cleanup A | Action Tak | en.* | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| ן ב | | | | | was utilized to re thauled to dispos | | | | | | roved by the NMOCD was | | |
| Ŋ | implemented. | mpacted | sons were exe | | | | e she was back | innea with clean i | nater ar. | • | | | |
| | | | | | | | | | | | | | |
| 70 | I hereby certify | y that the i | nformation give | ven above | is true and complete | ete to th | he best of my l | cnowledge and un | derstand | d that pursu | ant to NMOCD rules, and, ises which may endanger | | |
| | public health c | r the envir | onment. The | acceptance | e of a C-141 repor | t by the | e NMOCD ma | rked as "Final Re | port" do | es not relie | ve the operator of liability | | |
| | | | | | | | | | | | surface water, human healt mpliance with any other | h | |
| <u>g</u> | federal, state, o | | | | | | | | sponsio | | aphance with any other | | |
| - - - | | | | | | | OIL CONSERVATION DIVISION | | | | | | |
| | Signature: Milla | | | | | | | | | | | | |
| | Printed Name: Tim Reed, P.G | | | | | | Approved by District Supervisor: | | | | | | |
| " | | | | | | | 1/2-/15 | | | | | | |
| | Title: Senior Project Manager | | | | | | Approval Date: 9/27/1 Expiration Date: 1//A | | | | | | |
| | E-mail Addres | s: tim.reed | l@tetratech.co | m | | (| Conditions of A | Approval: | | ^ | Attached | | |
| 3 | Date: 4-14-10 | | | | -557-4680 | | | | tin | LI | — | | |
| * | Attach Additie | onal Sheet | ts If Necessa | iry | | | | | | | 2RP-121 | | |