



14-08-14 19W3 19951226

COMPLETE THIS SECTION FOR ALL SPILLS:

Date of Spill: Dec 26/95 Date Found: Dec 26/95 Date Reported: Dec 26/95
 Area: SWIFT CURRENT Pool: SUFFIELD UPPER SHAUNAVON & ROSERAY SAND.
 Surface Land Location: LS 14 SC B TP 14 RG 19 W 3 Horizontal: Yes ___ No X
 Company: WASCANA ENERGY Phone No: (306) 778-3100
 Reported By: CORY SMUCK Company Rep X Landowner ___ Other ___
 Substance Spilled: Oil ___ Salt Water X Emulsion ___ Condensate ___ Fresh Water ___
 Spill Source: Line ___ Well X Facility ___ Misc ___
 Status of Line/Facility/Well: Active ✓ Suspended ___ Abandoned ___
 Estimate of Fluid Spilled: 5.0 m³ Oil ___ m³ Water 5.0 m³ Condensate ___ m³
 Estimate of Fluid Recovered: nil m³ Oil ___ m³ Water ___ m³ Condensate ___ m³
 Surface Feature Affected: (Choose up to 3)
 Cultivated X Uncultivated ___ Bush ___ Surface Water ___ Groundwater ___ Access X Other ___
 Size of Area Affected: (Fill in one) Square Meters 400 OR Hectares ___
 Total Area Affected: On Lease 10 % Off Lease 90 %
 Landowner: DENNIS PENNER Phone No: (306) 672-3975 Crown Land: Yes ___ No ✓
 Occupant: ___ Phone No: () ___
 Contacted by Company: Yes ✓ No ___ Contacted by SEM: Yes ___ No ✓
 Comments: all fluid soaked away before recovery
 Signature: [Signature] SEM - Regina SEM - Field ENV - Canada

COMPLETE THIS SECTION FOR LINE SPILLS:

Location: From Point: LX ___ LS ___ SC ___ TP ___ RG ___ W ___
 To Point: LX ___ LS ___ SC ___ TP ___ RG ___ W ___
 Break Location: ___ Meters, North ___ South ___ East ___ West ___ of, LS ___ SC ___ TP ___ RG ___ W ___
 Date Installed: ___ OR Date Replaced: ___ OR Date Upgraded: ___
 Type of Line: Flowline ___ Transfer ___ Inj/Disp ___ Condensate ___
 Pipeline ___ Fresh Water ___ Produced Water ___
 Material: Steel ___ Fiberglass ___ Aluminum ___ Lined ___ (Date Lined: ___)
 Corrosion Protection: External ___ Internal ___ Cathodic ___
 Size: ___ mm Wall Thickness: ___ mm
 Cause: Corrosion ___ Mechanical Failure ___ Human Error ___ Vandalism ___ Test Failure ___

COMPLETE THIS SECTION FOR WELL SPILLS:

Well Type: Oil ___ Gas ___ Water Source ___ Water Inj/Disp X Steam Injector ___ Other Injector ___
 Cause: Stuffing Box ___ Valve X Equipment Failure ___ Storage Tank ___ Human Error ___
 Vandalism ___ Cattle ___ Lightning ___ Blowout ___

COMPLETE THIS SECTION FOR FACILITY SPILLS:

Facility Type: Battery ___ Water Plant ___ Satellite ___ Compressor/Dehydrator ___
 Reclaimer ___ Steam Boiler ___ Pit ___
 Equipment Type: Treater ___ Tank ___ Separator ___ Pumps ___
 Cause: Equipment Failure ___ Corrosion ___ Human Error ___ Lightning ___ Vandalism ___ Fire ___

COMPLETE THIS SECTION FOR MISCELLANEOUS SPILLS:

Type: Truck Other Cause: Human Error Mechanical Error Road Conditions

COMPLETE THIS SECTION FOR CLEAN-UP:

Date Clean-up Started: Dec 26/95 Initial Inspection Date: Dec 27/95
 Number of Subsequent Inspections: 3 Final Inspection Date: Jan 18/96
 Clean-up Condition: Satisfactory Unsatisfactory

Clean-up Procedures: Amendments Added Removal of Soil Spread-on Lease Burning Nothing Required

Details of Clean-up: ALL FLUID SOAKED AWAY. LCA-II WILL BE WORKED INTO SOIL IN SPRING

Details of Repairs Conducted: VALVE & NIPPLE REPLACED

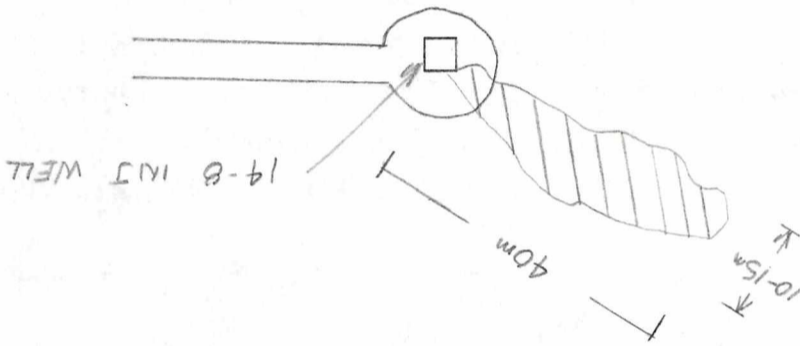
Contaminated Material Moved to: Treat on site.

Contaminated Material Used for: _____

Type and Amount of Soil Amendment Added: LCA-II.

DIAGRAM OF SPILL AREA:

NORTH



Additional Comments: _____



SPILL & MATERIAL FAILURE REPORT

INCIDENT NUMBER
95-02-04-157

REPORT STATUS:

Preliminary
Final

COMPANY INCIDENT
CONTRACTING INCIDENT

CONTRACTOR NAME: _____

GENERAL INFORMATION

INCIDENT DATE: Dec 23 TIME: 2:00 PM

OPERATIONS AREA: Sw. Pt Current (West) Saffield AREA PHONE # 778-3147

LEGAL LSD LOCATION OF SPILL LA 14 LSD 08 SEC 14 TWP 19 RGE W 3rd MER (POOL NAME)

REPORTED BY: Corrie Smole TO: Darcy Thorson DATE Dec 23 TIME 3:00 Pm

DETAILS: DESCRIPTION OF EVENT (What, When, Where, Why, Who, How)

If more space needed, attach extra sheet.
while checking Fry well I went to 14-08-14-19 and found master valve to be leaking around bonnet. It appears gasket and face of bonnet washed out.

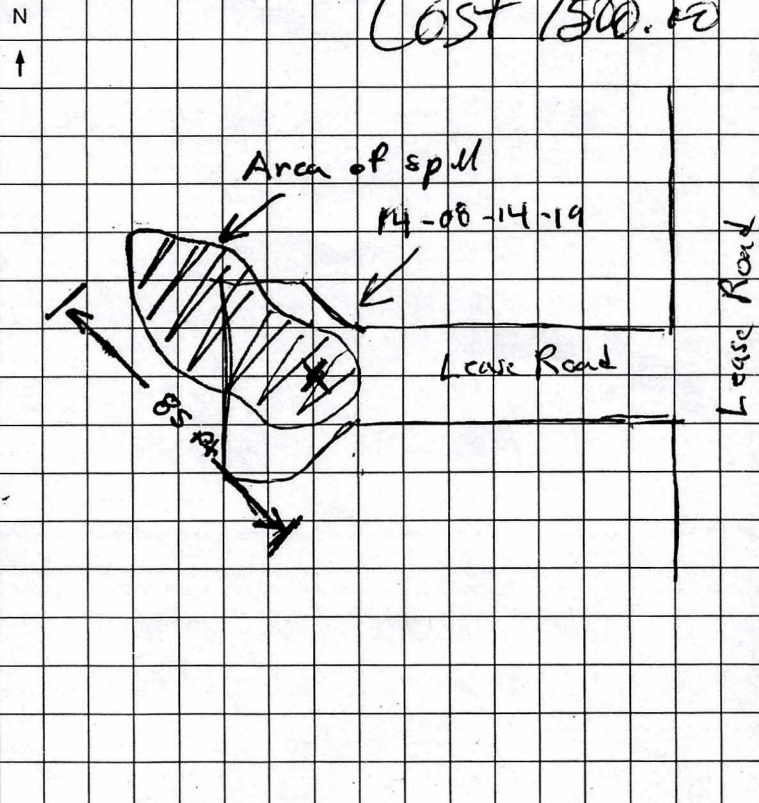
Wellhead equipment leak

ACTION TAKEN FOLLOWING FAILURE/SPILL

Well was S.I., Tubing was bled down to tank truck and master valve was replaced.

REPAIRS/MATERIALS REPLACED? DATE?

Master Valve Dec 23 /95



TYPE OF SPILL: OIL WATER CHEMICAL OTHER

CAUSE OF SPILL: EQUIPMENT FAILURE CORROSION HUMAN ERROR OTHER

VOLUME (m³) 6.0 On Company Property 1.0 Off Company Property 0 Recovered 100 % %H₂O

LAND USE: AGRICULTURE PASTURE SLOUGH FOREST OTHER

PARTIES NOTIFIED

SEM ERCB BCEMPR MEMPR CONTACTED YES NO NAME Scott Lenz

LAND OWNER CONTACTED YES NO NAME Dennis Penner PH# 672 3975 DATE: Dec 23

OCCUPANT CONTACTED YES NO NAME _____ PH# _____ DATE: _____

LAND DEPT CONTACTED YES NO LAND SETTLEMENT REQUIRED YES NO

STANDARD RECLAMATION PROCEDURES IMPLEMENTED YES NO

EXPLAIN REASON _____

