



National Oil Spill Detection & Response Agency



FORM A

OIL SPILL/LEAK NOTIFICATION REPORT

This report must be submitted within 24 hours of Spill Incidence

|                                                                      |                                                                                                                                                                                                                        |                                           |                                |                                             |
|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------------------------|---------------------------------------------|
| 1. GENERAL INFORMATION:                                              |                                                                                                                                                                                                                        |                                           |                                |                                             |
| i. Company Name:                                                     | NNPC/PPMC                                                                                                                                                                                                              |                                           |                                |                                             |
| ii. Incident Details:-                                               | Date of Incidence (dd/mm/yy)                                                                                                                                                                                           | Time of Incidence (24h standard/daylight) | Date of Observation (dd/mm/yy) | Time of Observation (24h standard/daylight) |
| iii. Spill Reference No:                                             | 15/03/14                                                                                                                                                                                                               | hrs to hrs                                | 15/03/14                       | 0700 hrs to 0800 hrs                        |
| Survey By                                                            | Foot Boat / Helicopter / Overlook /                                                                                                                                                                                    |                                           |                                |                                             |
| Level of impact:                                                     | <input type="checkbox"/> No Impact <input checked="" type="checkbox"/> Slight Impact <input type="checkbox"/> Heavy Impact                                                                                             |                                           |                                |                                             |
| Estimated quantity spilled:                                          | The spill resulted to fire incident.                                                                                                                                                                                   |                                           |                                |                                             |
| 2. Site Details                                                      |                                                                                                                                                                                                                        |                                           |                                |                                             |
| i. Site Name:                                                        | Imore Island                                                                                                                                                                                                           |                                           | OML:                           |                                             |
| ii. GPS FIELD POINTS                                                 | Total Length _____ m                                                                                                                                                                                                   | Length Surveyed _____ m                   | Differential GPS Yes/No        |                                             |
| Spill Start Point GPS: EASTINGS                                      | _____ meters                                                                                                                                                                                                           | NOTHINGS                                  | _____ meters                   |                                             |
| Spill End Point GPS: EASTINGS                                        | _____ meters                                                                                                                                                                                                           | NOTHINGS                                  | _____ meters                   |                                             |
| iii. Site area                                                       | <input checked="" type="checkbox"/> Land Swamp <input type="checkbox"/> Freshwater <input type="checkbox"/> Mangrove <input type="checkbox"/> Coastline <input type="checkbox"/> Near Shore                            |                                           |                                |                                             |
|                                                                      | <input type="checkbox"/> Offshore <input type="checkbox"/> Others (Specify) _____                                                                                                                                      |                                           |                                |                                             |
| iv. Containment Measures in Place                                    | <input type="checkbox"/> Boom <input checked="" type="checkbox"/> Trenches <input type="checkbox"/> Bund wall <input type="checkbox"/> Sorbents <input type="checkbox"/> Others (Specify) _____                        |                                           |                                |                                             |
| v. Type of Contaminant                                               | <input type="checkbox"/> Crude Oil <input type="checkbox"/> Condensate <input type="checkbox"/> Chemicals <input checked="" type="checkbox"/> Refined Products <input type="checkbox"/> Others (Specify) PMS           |                                           |                                |                                             |
| vi. Facility                                                         | <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Flow line <input type="checkbox"/> Wellhead <input type="checkbox"/> Manifold <input type="checkbox"/> Flow Station <input type="checkbox"/> Rig |                                           |                                |                                             |
|                                                                      | <input type="checkbox"/> Storage Tank <input type="checkbox"/> Compressor Plant <input type="checkbox"/> Others (Specify) _____                                                                                        |                                           |                                |                                             |
| vii. Properties at Risk                                              | <input type="checkbox"/> Farmland <input type="checkbox"/> Fish Pond <input checked="" type="checkbox"/> Vegetation <input type="checkbox"/> Fishing Net <input checked="" type="checkbox"/> Surface water             |                                           |                                |                                             |
|                                                                      | <input type="checkbox"/> Venerable Objects <input type="checkbox"/> Others (Specify) _____                                                                                                                             |                                           |                                |                                             |
| 3. SURVEY TEAM NO Name Organization Phone Numbers                    |                                                                                                                                                                                                                        |                                           |                                |                                             |
| 1.                                                                   | Bashir Abdul-qzeez                                                                                                                                                                                                     | NNPC/PPMC                                 | 09095798348                    |                                             |
| 2.                                                                   | Malik, R.A.                                                                                                                                                                                                            | NNPC/PPMC                                 | 08033424503                    |                                             |
| 3.                                                                   | Muhammed Salihu                                                                                                                                                                                                        | NNPC/PPMC                                 | 08032805904.                   |                                             |
| REPORTING OFFICER Gongden, J.J.                                      |                                                                                                                                                                                                                        |                                           |                                |                                             |
| DESIGNATION Area Pollution Control Officer                           |                                                                                                                                                                                                                        |                                           |                                |                                             |
| SIGNATURE: [Signature] DATE: 26/05/14.                               |                                                                                                                                                                                                                        |                                           |                                |                                             |
| *RBA Report must be submitted within 24 Hours of the Spill Incidence |                                                                                                                                                                                                                        |                                           |                                |                                             |

CC: Area Manager, Mosimi

CES,