



NATIONAL OIL SPILL DETECTION AND RESPONSE AGENCY JOINT INVESTIGATION VISIT (JIV) FORM

Note: This Form is to be completed and signed by all participating parties in the field in BLOCK letters

1. Company: **NIGERIAN AGIP OIL COMPANY LTD.**

2. Type of Complaint/Incident:

☐ Oil Pollution ☐ Fire/Explosion ☐ Drilling Mud/Chemical Pollution

☒ Others (Specify) **GAS EMISSION**

3. Incident Details

i. Date of Incident: **16.05.16** ii. Date first reported: **17.05.2016**

iii. Date of first investigation: **22.05.16** iv. Spill Incidence No: **2016/SAR/074/115**

v. Date of follow-up investigation: **-/-/-**

vi. Time investigation started: **1145 HRS**

vii. Estimated quantity spilled(bbls): **NIL** viii. Quantity Recovered: **N/A**

4. Site Details

i. Site/Location: **6" TUDMO-OGBOINBIRI D/L @ OGBO SUWARI**

ii. State: **BAJELSA** iii. L.G.A: **EKEREMOR**

iv. Spill Co-ordinates: N(m) **04° 57' 02.5"**
E(m) **005° 56' 10.9"**

v. Spill area

☐ Land ☒ Swamp ☐ Freshwater ☐ Mangrove ☐ Coastline

☐ Near shore ☐ Offshore ☐ Others (specify).....

vi. Structural Controls in Place

☐ Boom ☐ Trenches ☐ Bund wall ☐ Sorbents ☐ Others (specify)..... **N/A**

5. Circumstances Around Spill Point

i. Visual observation of Hole Position

☐ 12 O' Clock ☐ 10 O' Clock ☐ 2 O' Clock ☐ 3 O' Clock
☐ 4 O' Clock ☐ 5 O' Clock ☐ 6 O' Clock ☒ **IRREGULAR**

ii. Type of Oil contaminant

☐ Crude Oil ☐ Condensate ☐ Chemicals ☐ Refined Products

☒ Others (specify) **N/A**

iii. Facility

☒ Pipeline ☐ Flow line ☐ Wellhead ☐ Manifold ☐ Flow Station ☐ Rig

☐ Storage Tank ☐ Compressor Plant ☐ Others (specify).....

iv. Cause Of Spill.

☐ Corrosion ☐ Equipment Failure ☒ Third Party Interference ☐ Accident

☐ Operational Error ☐ Others (specify).....

v. Visible Sign of Third Party Interference

☐ Hacksaw Marks ☐ Drilled Holes ☒ Blasting ☐ Theft ☐ Acid

☐ Others (specify).....



i. **Properties impacted by the incident**

☐ Farmland ☐ Fish Pond ☐ Vegetation ☐ Fishing Net ☐ Surface water
☐ Venerable Objects ☒ Others (specify) NIL

ii. **Nature of impact**

☐ Oil stained vegetation ☐ Oil stained fishing nets ☐ Dead floating fishes
☐ Dead floating crabs ☐ Withering of vegetation ☒ Others N/A

iii. **Delineation of impacted area**

☒ Within Company's facility/ROW ☒ Outside Company's facility/ROW

7. **Type of properties/ structures, if any, found outside the right-of-way**

☐ Crops ☐ Fish Farm/ Pond ☐ Fishing net ☐ Makeshift
☐ Permanent ☐ Others NIL

8. **Extent of Impact**

a) **Community (indicate name)**

i. /
 ii. /
 iii. /
 iv. /

b) **Land (indicate area in m²)**

i. /
 ii. /
 iii. /
 iv. /

h) **Creeks/Creek lets**

☐ Tidal

☐ Non-tidal

NAME	DIRECTION OF SLICK	LENGTH OF SLICK	WIDTH OF SLICK

c) **Swamp**

☐ Tidal

☐ Non-tidal

NAME	DIRECTION OF SLICK	LENGTH OF SLICK	WIDTH OF SLICK

d) **River**

☐ Tidal

☐ Non-tidal

NAME	DIRECTION OF SLICK	LENGTH OF SLICK	WIDTH OF SLICK

e) **Shoreline/water**

NAME	DIRECTION OF SLICK	LENGTH OF SLICK	WIDTH OF SLICK

9. Photograph/Map/Chart Rel.

☒ Still photographs ☐ Video coverage ☐ Mapping

10. Samples taken..... N/A

11. Investigation carried out by

☒ Foot ☒ Boat ☐ Aircraft

12. Remarks/Recommendation EXPLOSIVE DEVICE WAS
USED TO BLAST THE LINE. THE
FACILITY HAS BEEN REPAIRED.

13. Time investigation ended —

14. Name of Investigator —