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: Nigeria Bottling Company Ltd - Ikeja

ii. Incident Details:-

iii. Spill Reference No:

Date of Incidence (dd/mm/yy)	Time of Incidence (24h standard/daylight)	Date of Observation (dd/mm/yy)	Time of Observation (24h standard/daylight)
16/01/17	19:20 hrs to 07:40 hrs	17/01/17	07:00 hrs to hrs

Survey By: Foot/Boat / Helicopter / Overlook / Foot Sun / Clouds / Fog / Rain / Snow / Windy

Level of Impact: ☑ No Impact ☐ Slight Impact ☐ Heavy Impact

Estimated quantity spilled: 2311 Litres

2. Site Details

i. Site Name: NBC Ltd - Ikeja 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

☐ Land Swamp ☐ Freshwater ☐ Mangrove ☐ Coastline ☐ Near Shore

☐ Offshore ☑ Others (Specify) Bottling Site

iv. Containment Measures in Place

☑ Boom ☐ Trenches ☑ Bund wall ☑ Sorbents ☐ Others (Specify).....

v. Type of Contaminant

☐ Crude Oil ☐ Condensate ☐ Chemicals ☑ Refined Products ☐ Others (Specify).....

vi. Facilty

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

☑ Storage Tank ☐ Compressor Plant ☐ Others(Specify).....

vii. Properties at Risk

☐ Farmland ☐ Fish Pond ☐ Vegetation ☐ Fishing Net ☐ Surface water

☐ Venerable Objects ☑ Others (Specify) Wastewater Treatment plant.

3. SURVEY TEAM NO

Name	Organization	Phone Numbers
Nyeso Paul	NBC Ltd	
Emmerenini Kingsley	NBC Ltd	

REPORTING OFFICER: Nyeso Paul

DESIGNATION: EHP Compliance Manager

SIGNATURE: _____ DATE: 23rd January, 2017

**RBA Report must be submitted within 24 Hours of the Spill Incidence.*

NATIONAL OIL SPILL DETECTION & RESPONSE AGENCY
RECEIVED
DATE 30/01/2017

National Oil Spill Detection & Response Agency

FORM B

RISK BASED ASSESSMENT OF OIL SPILL INCIDENCE (RBA)

Note: This report must be submitted within 2 weeks of Spill Incidence

1.GENERAL INFORMATION:

i. Company Name: Nigeria Bottling Company Ltd - Ikeja

ii. Date of Assessment: 17th January, 2017

iii. Incident Details:

Date of Incidence (dd/mm/yy)	Date spill was stopped	Method Used
12/01/17	22/01/17	☐ Clamping ☐ Well Shut-in ☐ Valve Shut-in ☐ F/Station Shut down ☑ Others (specify).....

iv. Estimated quantity spilled: 2,311 Liters

v. Estimated quantity recovered: 1,500 Liters

vi. Cause of Spill
☐ Corrosion ☐ Equipment Failure ☑ Third Party Interference ☐ Accident
☐ Operational Error ☐ Others (specify).....

2. Site Details

i. Site Name: NBC Ltd, Ikeja 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
☐ Land Swamp ☐ Freshwater ☐ Mangrove ☐ Coastline ☐ Near Shore
☐ Offshore ☑ Others (Specify)..... Factory Site.....

iv. Facilty
☐ Pipeline ☐ Flow line ☐ Wellhead ☐ Manifold ☐ Flow Station
☐ Rig ☑ Storage Tank ☐ Compressor Plant
☐ Others(Specify).....

v. Site Characterization

a. Sea Conditions
☐ Calm ☐ Rough ☐ Not Applicable ☐ Low Tide ☐ High Tide
Current direction: NA
Swell Height: NA
Current Strength: NA

b. Weather Conditions
☑ Bright Sunny ☐ Party Cloudy ☐ Slight rain ☐ Others (Specify).....
Temperature: NA Wind Direction: NA
Wind Speed: NA Relative Humidity: NA

vi. Visual Observation of Impacted area

(i)	Any oil sheen on water	Yes	☑	No	☐	N/A	☐
(ii)	Any oil sheen on water	Yes	☑	No	☐	N/A	☐
(iii)	Any oil sheen on water	Yes	☑	No	☐	N/A	☐
(iv)	Any oil sheen on water	Yes	☑	No	☐	N/A	☐
(v)	Any oil sheen on water	Yes	☑	No	☐	N/A	☐

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Receptor Assessment

Receptor	Pathway to Impacted Area(m^2)	Distance to Impacted Area(m^2)	Estimated Area of Impact Area(m^2)	Receptor Impacted (Yes/No)	Remarks
Farmland					
Fish Pond					
Vegetation					
Surface Water					
Ground Water					
Venerable Object	Pipe line	100 metres	2073 $6m^3$	Yes	Contained.
Human Habitation					
Livestock					
Plantation					
Swamp					

vii. Any Casualties ☐ Yes ☑ No

If yes, give details..... NIL

viii. Clean-up Program details

a. Method of clean-up..... Use of Boom, absorbent and dispersant.

b. Time frame for clean-up..... three (3) days.

ix. General Remarks

Carried out oil spill assessment to determine the risk magnitude of all stored hazardous material. Also initiated retainer arrangement with oil spill cleaner expert to intervene in any event of spill of certain defined magnitude.

REPORTING OFFICER: ..... Mojin Bill

DESIGNATION: ..... FTP Compliance Manager

SIGNATURE: ..... DATE: ..... 23rd January 2017

*Clean-up program report must be submitted within 2 weeks of spill incidence.

National Oil Spill Detection & Response Agency

FORM C

SITE CLEAN-UP/REMEDIATION ASSESSMENT REPORT

1. GENERAL INFORMATION:

i. Company Name: Nigerian Bottling Company Ltd, Ikeja

ii. Date of Assessment:

2. Site Details

i. Site Name: NBC Ltd - Ikeja OML:

ii. Date/Time of Incident:

iii. Area and Depth of Impact: 2,078.6 m^2

iv. 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

v. Contaminated Media
☐ Vegetation ☐ Soil ☐ Sediment ☐ Inland Surface Water ☐ Brackish Swamp Surface Water
☐ Off shore Surface Water ☐ Underground Water ☑ Others (Specify) WW TP

3. (i) Date Clean-up Programme Comenced:

(ii) Method of Clean-Up
☐ Low Pressure Wash ☑ Mannual ☐ Mechanical ☐ Surface Wash ☑ Sorbents ☑ Chemical Disparsant
☐ Vacuum Skimming ☐ Others(Specify).....

(iii) Estimated quantity of oil / containment recovered 1500 Litres.

(iv) Method of Debris Disposal
☐ Controled Inciniration ☐ Buried in lined pit ☐ Chemical Treatment ☐ Sanitary Landfill
☐ Land farming ☐ Others (Specify).....

4. Site Visual Observation

(i) Nature of Soil
☐ Show Heavy Impact ☐ Medium Impact ☑ Minimal Impact ☐ Others.....

(ii) Nature of Surface Water
☑ Oil Sheen Present ☐ No Oil Sheen Present ☐ Others (Specify).....

(iii) Nature of Vegetation
☐ Withered ☐ Withering ☐ Luxuriant

(iv) Site Photos ☑ Yes ☐ No

(v) Date Site clean-up ended.....

(vi) Sample collected after the clean-up program
☐ Soil ☐ Sediment ☑ Water ☐ Others (Specify).....

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5. Result of Laboratory Analysis of Samples Collected

Parameter	Sample	Test Method	Result	
			Pre-Remd.	Post Remd.
TPH				
BTEX				
Trace Metals			Pre-Remd.	Post Remd.
Arsenic				
Barium				
Cadmium				
Chromium				
Copper				
Mercury				
Lead				
Nickel				
Zinc				
Total Dissolved	4.0mg/L	Colorimetric		
Total suspended Solids				

6. Does Site require remediation ☑ Yes ☐ No

If yes,

(i) Date Site remediation commenced..... 17th January, 2017

(ii) Method of Remediation

☐ Land farming ☐ Biopile ☐ Bio venting ☐ Air Sparging ☑ Chemical Oxidation

☐ Washing/Leading ☐ Phyto remediation ☐ Enhanced Natural Attenuation

☐ Monitored Enhanced Natural Attenuation ☐ Thermal Desorption ☐ Others (specify).....

(iii) Is remediation method ☑ in situ or ☐ ex situ?

(iv) Details of remedial method (attached as an annex)

7. Details of rehabilitation plan for impacted population (attached as an annex)

8. Cost of Spill

a. Clean-up cost:- ₦ 3,320,940 =

b. Clean-up remediation:- —

c. Cost of Repair works: —

d. Naira loss due to oil Spilled: —

e. Lost Man Hours —

Total..... ₦ 3,320,940 =

9. Compensation paid, if any: NA

8. Method of Settlement of Claim

☐ Arbitration/Mediation ☐ Direct negotiation between Landlord and operator

☐ Court Settlement ☑ Not Applicable ☐ Others (specify).....

11. Date/Time of Visit by Regulations: .....

12. Remarks by any Third Party

The Lift station pump was turned off to prevent process water from entering the ETP. This is a very proactive step that must have limited the spread of the spill to the receiving water body.

13. General Remarks

Long term action plan has been agreed during the meeting for implementation

14. NOTE: Officials of NOSDRA must be present when samples are collected, and when analyses begin.

REPORTING OFFICER: Mohu, Basil

DESIGNATION: ETP Compliance Manager

SIGNATURE: ..... DATE: .....