



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:		NPSC		
II. Incident Details:		Date of Incidence (dd/mm/yy)	Time of Incidence (24h standard/daylight)	Date of Observation (dd/mm/yy)
III. Spill Reference No:		02-7-18	hrs to hrs	02-7-18 08 hrs to 00 hrs
Survey By: Foot/Boat / Helicopter / Overlook /		Sun / Clouds / Fog / Rain / Snow / Windy		
Level of Impact:		☐ No Impact ☐ Slight Impact ☒ Heavy Impact		
Estimated quantity spilled:		NOT YET QUANTIFIED		
2. Site Details				
I. Site Name:		ILARA OML:		
II. GPS FIELD POINTS Total Length _____ m		Length Surveyed _____ m		
Spill Start Point GPS: EASTINGS _____ meters		Differential GPS Yes/No		
Spill End Point GPS: EASTINGS _____ meters		NOTHING meters		
III. Site area		NOTHING meters		
☒ Land Swamp ☐ Freshwater ☐ Mangrove ☐ Coastline ☐ Near Shore				
☐ Offshore ☐ Others (Specify) _____				
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. Facility		☒ 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) _____				
3. SURVEY TEAM NO Name Organization Phone Numbers				
REPORTING OFFICER: MAMMAN AMINU				
DESIGNATION: SUPT. H.S.E				
SIGNATURE: <i>[Signature]</i> DATE: 09/7/18				
*RBA Report must be submitted within 24 Hours of the Spill Incidence.				

