

**WCSS
OIL SPILL CO-OPERATIVE
TRAINING EXERCISE REPORT**

Oil Spill Co-Operative: **W**

Oil Spill Co-Op Chairman: Tim McTaggart

Exercise Date: June 14, 2011

Type of Exercise: Incident Commander for Oil Spills

Location of Exercise: Eagle River Casino

LSD/Sec/Twp/Rge/Mer:

Area Control Point:

Host Company:

On Scene Commander: Tim McTaggart

EXERCISE OBJECTIVES

The objectives of the exercise were to: (check applicable ones)

	Objectives Met	
	Yes	No
1 Supply theoretical training (classroom)	Yes	
2 Evaluate deployment methods (hands-on training)	N/A	
3 Evaluate safety procedures		
4 Evaluate boat handling and operations		
5 Evaluate response capabilities		
6 Evaluate communications		
7 Evaluate Control Point		
8 Evaluate Co-op equipment - Shallow water exercise		
9 Evaluate WCSS equipment		
10 Evaluate new equipment		
11 Other (please specify) Mutual Aid joint exercise		

Petroleum Industry's Commitment to Spill Preparedness and Environmental Protection

1538 25 Avenue NE
Calgary, AB T2E 8Y3
Phone (403) 250-9606 Fax (403) 291-9408

Mailing Address
Box 503, 3545 – 32 Avenue NE
Calgary, AB T1Y 6M6

EXERCISE REPORT - CHRONOLOGICAL

Time	Event and Description	Problems
8:00-8:30	Exercise Registration	Gave out WCSS attendance card in the morning-next exercise save till the end to ensure attendance for all of the training
8:30	Introduction and agenda overview	
9:15-9:45	Overview of WCSS and Regulatory issues	
9:00	Incident Commander Course	
10:30	Coffee Break	
10:45	Class Resumes	
12:00	Lunch	
1:00	Class	
2:30	Coffee break to be announced	

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CONTAINMENT AND RECOVERY

CLASSROOM SESSION

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SAFETY

WCSS Oil Spill Cooperative Exercise Hazard Assessment

1. Equipment

Task/Activity

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Parking | <input checked="" type="checkbox"/> Equipment Spotting | <input checked="" type="checkbox"/> Loading/Unloading |
| <input checked="" type="checkbox"/> Staging | <input checked="" type="checkbox"/> Dryland Equipment Deployment | <input type="checkbox"/> Helicopter Use |
| <input type="checkbox"/> Other _____ | | |

Hazard (high)

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Personnel Injuries | <input checked="" type="checkbox"/> Health Issue | <input checked="" type="checkbox"/> Equipment Damage |
| <input checked="" type="checkbox"/> Other _____ | | |

Mitigation/Safety Controls

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> Health Screening | <input checked="" type="checkbox"/> Health Restrictions | <input checked="" type="checkbox"/> Equipment Orientation |
| <input checked="" type="checkbox"/> Safety Meeting | <input checked="" type="checkbox"/> PPE | <input checked="" type="checkbox"/> Crew Member Assignment |
| <input checked="" type="checkbox"/> Track Attendees | <input checked="" type="checkbox"/> Warning Signs | <input checked="" type="checkbox"/> Barriers |
| <input checked="" type="checkbox"/> Identify Restricted Areas | <input checked="" type="checkbox"/> Identify Work Zones | <input checked="" type="checkbox"/> Buddy System |
| <input checked="" type="checkbox"/> Emergency Signal | <input checked="" type="checkbox"/> Muster Station | <input checked="" type="checkbox"/> First Aid |
| <input checked="" type="checkbox"/> EMS | <input checked="" type="checkbox"/> Communications Plan | <input checked="" type="checkbox"/> Weather Tracking |
| <input checked="" type="checkbox"/> Weather Restrictions | <input checked="" type="checkbox"/> Warming Tent/Facility | <input checked="" type="checkbox"/> Sanitation |
| <input checked="" type="checkbox"/> Water/Food | <input checked="" type="checkbox"/> Wildlife Identification | <input checked="" type="checkbox"/> Wildlife Strategy |
| <input checked="" type="checkbox"/> Identify Equipment Deployment Strategy | | |
| <input checked="" type="checkbox"/> Other _____ | | |

- pinch points and tripping hazards
- only initial responders deployed equipment with assistance from volunteers

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2. Working Along Shoreline

Task/Activity

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> <input type="checkbox"/> Transporting Equipment Hazard (medium/high) | <input checked="" type="checkbox"/> <input type="checkbox"/> Loading Boats | <input checked="" type="checkbox"/> <input type="checkbox"/> Deploying Equipment |
| <input checked="" type="checkbox"/> <input type="checkbox"/> Personnel Injuries | <input checked="" type="checkbox"/> <input type="checkbox"/> Equipment Damage | <input type="checkbox"/> <input type="checkbox"/> Utilities Hit |
| <input checked="" type="checkbox"/> <input type="checkbox"/> Other _____ | | |

Mitigation/Safety Controls

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> <input type="checkbox"/> Health Screening | <input checked="" type="checkbox"/> <input type="checkbox"/> Health Restrictions | <input checked="" type="checkbox"/> <input type="checkbox"/> Equipment Orientation |
| <input checked="" type="checkbox"/> <input type="checkbox"/> Safety Meeting | <input checked="" type="checkbox"/> <input type="checkbox"/> PPE | <input checked="" type="checkbox"/> <input type="checkbox"/> Crew Member Assignment |
| <input checked="" type="checkbox"/> <input type="checkbox"/> Track Attendees | <input checked="" type="checkbox"/> <input type="checkbox"/> Warning Signs | <input checked="" type="checkbox"/> <input type="checkbox"/> Barriers |
| <input checked="" type="checkbox"/> <input type="checkbox"/> Identify Restricted Areas | <input checked="" type="checkbox"/> <input type="checkbox"/> Identify Work Zones | <input checked="" type="checkbox"/> <input type="checkbox"/> Buddy System |
| <input checked="" type="checkbox"/> <input type="checkbox"/> Emergency Signal | <input checked="" type="checkbox"/> <input type="checkbox"/> Muster Station | <input checked="" type="checkbox"/> <input type="checkbox"/> First Aid |
| <input checked="" type="checkbox"/> <input type="checkbox"/> EMS | <input checked="" type="checkbox"/> <input type="checkbox"/> Communications Plan | <input checked="" type="checkbox"/> <input type="checkbox"/> Weather Tracking |
| <input checked="" type="checkbox"/> <input type="checkbox"/> Weather Restrictions | <input checked="" type="checkbox"/> <input type="checkbox"/> Warming Tent/Facility | <input checked="" type="checkbox"/> <input type="checkbox"/> Sanitation |
| <input type="checkbox"/> <input type="checkbox"/> Water/Food | <input checked="" type="checkbox"/> <input type="checkbox"/> Wildlife Identification | <input checked="" type="checkbox"/> <input type="checkbox"/> Wildlife Strategy |
| <input type="checkbox"/> <input type="checkbox"/> Safety Boat | <input checked="" type="checkbox"/> <input type="checkbox"/> Shoreline Safety Station | <input checked="" type="checkbox"/> <input type="checkbox"/> Crew Briefing |
| <input checked="" type="checkbox"/> <input type="checkbox"/> Identify Equipment Deployment Strategy | <input checked="" type="checkbox"/> <input type="checkbox"/> Identify Underground Facilities | |
| <input checked="" type="checkbox"/> <input type="checkbox"/> Waist Belt on Chest Waders | <input checked="" type="checkbox"/> <input type="checkbox"/> Other _____ | |

3. Boat Operation

Task/Activity

- | | | |
|--|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Equipment Loading | <input type="checkbox"/> Launching | <input type="checkbox"/> Operating |
| <input type="checkbox"/> Private Vessels | <input type="checkbox"/> Other _____ | |

Hazard (high)

- | | | |
|---|--|---|
| <input type="checkbox"/> Personnel Injuries | <input type="checkbox"/> Public Injuries | <input type="checkbox"/> Equipment Damage |
|---|--|---|

Mitigation/Safety Controls

- | | | |
|---|---|--|
| <input type="checkbox"/> Health Screening | <input type="checkbox"/> Health Restrictions | <input type="checkbox"/> Equipment Orientation |
| <input type="checkbox"/> Safety Meeting | <input type="checkbox"/> PPE | <input type="checkbox"/> Crew Member Assignment |
| <input type="checkbox"/> Track Attendees | <input type="checkbox"/> Warning Signs | <input type="checkbox"/> Barriers |
| <input type="checkbox"/> Identify Restricted Areas | <input type="checkbox"/> Identify Work Zones | <input type="checkbox"/> Buddy System |
| <input type="checkbox"/> Emergency Signal | <input type="checkbox"/> Muster Station | <input type="checkbox"/> First Aid |
| <input type="checkbox"/> EMS | <input type="checkbox"/> Communications Plan | <input type="checkbox"/> Weather Tracking |
| <input type="checkbox"/> Weather Restrictions | <input type="checkbox"/> Warming Tent/Facility | <input type="checkbox"/> Sanitation |
| <input type="checkbox"/> Water/Food | <input type="checkbox"/> Wildlife Identification | <input type="checkbox"/> Wildlife Strategy |
| <input type="checkbox"/> Operator Certification | <input type="checkbox"/> PFD | <input type="checkbox"/> Crew Briefings |
| <input type="checkbox"/> Equipment Service Checks | <input type="checkbox"/> Identify Roles | <input type="checkbox"/> Identify Traffic Patterns |
| <input type="checkbox"/> Set Distances for Operations | <input type="checkbox"/> Safety Boat | <input type="checkbox"/> Up & Downstream Bouys |
| <input type="checkbox"/> Up & Downstream Signage | <input type="checkbox"/> Identify Equipment Deployment Strategy | |
| <input type="checkbox"/> Other _____ | | |

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DEBRIEFING

Auxiliary Services:

Were auxiliary services such as parking, registration, meals, toilets, etc. sufficient? Yes No

Comments: Will do registration in the morning and certification at the end of day for next exercise

Pre-Planning Organization:

Was pre-planning organization adequate? Yes **Yes** No

Comments: _____

Crew Organization:

Were manpower requirements sufficient for this exercise? Yes No

Comments: Utilized initial response team members and membered companies

Were communications within the working groups efficient and effective? Yes No

Comments: _____

Equipment:

Was the equipment effective for this type of deployment exercise? Yes No

Comments: _____

Was the equipment deployment technique effective for this site? Yes No

Comments: _____

Training Coordinator Evaluation:

Did the Training Coordinator do an adequate job? Yes No

Comments: _____

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Spill Medium:

What Spill Medium was used for the exercise? Yes No
 What percentage of spill medium was recovered at the site? % _____

Control Point Evaluation:

Is this an effective control point? Yes No
 Recommendations: _____

RECOMMENDATIONS - CO-OP EQUIPMENT:

Equipment Used: N/A

Comments:

Equipment Deficiencies	Follow-Up (Identify Responsibilities)
No Turner Valley Gate system	N/A
No ratchet tightening system	N/A
No wing anchors	N/A
Control manifold	N/A

RECOMMENDATIONS - WCSS EQUIPMENT:

Equipment Used: N/A

Comments:

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Western Canadian Spill Services Ltd.

AREA W - COMPANIES IN ATTENDANCE – JUNE 14, 2011

Company Name	Student Name in Attendance
Advantage Oil & Gas Ltd.	Ben Pike
Advantage Well Servicing Ltd.	Darren Loughra,
Angle Energy Inc.	Jeff Murdout
Anterra Energy Inc.	David Hendrickson, Chad Lystang, Jeremiah Berntsen
Apache Canada Ltd.	Todd Hander, Jason Hander
Arc Resources Ltd	Chris Graham
Arsenal Energy	Trent Schwndt
Bellatrix Exploration Ltd	Trevor Whiting
Bonavista Petroleum Ltd	Frankie Smith, Ben Pike, Robin Neilson
Caltex Energy Inc (Talisman)	Jason Carmichael, Rob Ouellet, Mike Ransom, Ken Duncan
Canadian Forest Oil Ltd.	Neil Scott
Canadian Natural Resources Limited	Darren Wilhelm, Lee Mattson
Capex Exploration Ltd. (Sword Energy)	Dan Bryant
CCS Corporation	Brent Douglas, Nik Snyder, Brian Conlin
Chinook Energy Inc	Russel Kaus
Chinook Energy Ltd.	Mike Haltcher
Compton Petroleum Corporation	Frank Marchewka
Conocophillips Canada Operations Ltd	Paul Cokes, Kiellby Martel
Conocophillips Canada Resources Corp.	Paul Cokes, Kiellby Martel
Crew Energy Inc	Donna Gerber
Daylight Energy Ltd.	Corey Johnston, Luke Crozier, Michael Carter-Wright, Ben Pike
Devon Canada Corporation	Ryan Simard
Direct Energy Marketing Limited	Ron Chayka
Exoro Energy Inc	Dennis deGroot
Husky Oil Operations Limited	David Paulson
Iberdrola Canada Energy Services Ltd	Bruce Bremner, Jeff Winward

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Western Canadian Spill Services Ltd.

Ish Energy Ltd	Neil Scott
Keyera Energy Ltd.	Rod Lyster
Kinmerc Oil & Gas Inc	Eric Davidson, Casey Davidson
Mec Operating Company ULC	Mike Yuhar
Mosaic Energy Ltd.	Neil Scott
Mutiny Oil & Gas Ltd	Carolyn Thomas
Nal Resources Limited	Eugene Hausaner, Gary Schmaltz
Newalta Corporation	Lyall Johnston
Nexen Inc	Marty Yarrow, Trevor Skogstad
Palko Environmental Ltd	Doug Wells, Dean Steel
Panterra Resource Corp	Darren Loughra
Pengrowth Corporation	Brandon Anderson, Kevin Prodaniuk, Norm Bachand, Carolyn Thomas, Sheldon Hagen, Randy Ward, Rooy Gertz, Glen Patton
Penn West Petroleum Ltd.	Ramona Furger, Ed Sommer
Petrobakken Energy Ltd	Eugene Hausaner, Gary Schmaltz, Larry Mager
Second Wave Petroleum Inc	Eugene Hausaner, Greg Shrode
Sonde Resources Corp	Mike Yuhar
Talisman Energy Inc	Jason Carmichael, Rob Ouellet, Mike Ransom, Ken Duncan
Taq North Ltd	Kelli Olsen, Jeremiah Berntsen, Trent Schwndt, Neil Scott
Trilogy Resources Ltd	Barry Linguist
Trioil Resources Ltd. (Online Energy)	Tammy Fitzel, Larry Mager
Twin Butte Energy Ltd.	Dennis deGroot
Vero Energy Inc	Ben Pike, Neil Scott

ATTENDANCE:

No. of Participants	48
Member Companies	93
% of Membership	52%



Western Canadian Spill Services Ltd.

The extra companies that attended were:

KBM

KMC Oilfield

Semcams

Trident Exploration Ltd.

Westfire Energy

Jolifou Pet

Surge Energy

Great Northern Oilfield Services

Cultex Energy

Gibson Energy WFP (rev) Edson

Pembina

EOG Resources

Vulture En

Timber Rock Energy

Gibson Energy