

State of Colorado
Oil and Gas Conservation Commission



FOR OGCC USE ONLY

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303)894-2100 Fax:(303)894-2109

SITE INVESTIGATION AND REMEDIATION WORKPLAN

This form shall be submitted to the Director for approval prior to the initiation of site investigation and remediation activities. Form 27 is intended to be used whenever possible. Additional documentation will be required when large volumes of soil and groundwater have been impacted or involve large facilities with multiple source areas. See Rule 910. Attach as many pages as needed to fully describe the proposed work.

OGCC Employee:

Spill Complaint
 Inspection NOAV

Tracking No:

CAUSE OF CONDITION BEING INVESTIGATED AND REMEDIATED

Spill or Release Plug & Abandon Central Facility Closure Site/Facility Closure Other (describe): Flare Pit

OGCC Operator Number: <u>96850</u>	Contact Name and Telephone: <u>Karolina Blaney</u>
Name of Operator: <u>Williams Production RMT Company</u>	No: <u>970 683 2295</u>
Address: <u>1058 CR 215</u>	Fax: <u>970 285 9573</u>
City: <u>Parachute</u> State: <u>CO</u> Zip: <u>81635</u>	

API Number: 05-045-19447 facility # 335529 County: Garfield

Facility Name: KP 34-18 Facility Number: KP 34-18 → Well Name

Well Name: _____ Well Number: KP 344-18 → LOCATION NAME

Location: (QtrQtr, Sec, Twp, Rng, Meridian): SWSE S18 T6S R91W -6 M Latitude: 39.522160 Longitude: -107.594632

TECHNICAL CONDITIONS

Type of Waste Causing Impact (crude oil, condensate, produced water, etc): flared gas

Site Conditions: Is location within a sensitive area (according to Rule 901e)? Y N If yes, attach evaluation.

Adjacent land use (cultivated, irrigated, dry land farming, industrial, residential, etc.): Rangeland

Soil type, if not previously identified on Form 2A or Federal Surface Use Plan: 58 Potts Ildefonso

Potential receptors (water wells within 1/4 mi, surface waters, etc.): 249' from surface water, 3595' from water well, 126' to groundwater

Description of Impact (if previously provided, refer to that form or document):

Impacted Media (check):	Extent of Impact:	How Determined:
<input type="checkbox"/> Soils	<u>none</u>	_____
<input type="checkbox"/> Vegetation	<u>none</u>	_____
<input type="checkbox"/> Groundwater	<u>none</u>	_____
<input type="checkbox"/> Surface Water	<u>none</u>	_____

REMEDIATION WORKPLAN

Describe initial action taken (if previously provided, refer to that form or document):
No action was taken because the pit was never used. ✓

Describe how source is to be removed:
There is no contamination source due to the fact that the pit was never used.

Describe how remediation of existing impacts is to be accomplished, including removal and disposal at an injection well or licensed facility, land treatment on site, removal of impacted groundwater, insitu bioremediation, burning of oily vegetation, etc.:
No remediation is necessary. The analytical results indicate hydrocarbon content below COGCC Table 910-1 requirements.



Tracking Number: _____ Name of Operator: _____ OGCC Operator No: _____ Received Date: _____ Well Name & No: _____ Facility Name & No: _____

REMEDIATION WORKPLAN (Cont.)

OGCC Employee: _____

If groundwater has been impacted, describe proposed monitoring plan (# of wells or sample points, sampling schedule, analytical methods, etc.):

Ground water has not been impacted.

Describe reclamation plan. Discuss existing and new grade recontouring; method and testing of compaction alleviation; and reseeding program, including location of new seed, seed mix and noxious weed prevention. Attach diagram or drawing. Use additional sheet for description if required.

The pit will be reclaimed in accordance with the 1000 series rules.

Attach samples and analytical results taken to verify remediation of impacts. Show locations of samples on an onsite schematic or drawing.

Is further site investigation required? Y N If yes, describe:

One grab sample was collected from the middle of the pit. See attached plat for the grab sample and pit location. See attached analytical report for the analytical results.

Final disposition of E&P waste (landtreated and disposed onsite, name of licensed disposal facility, recycling, reuse, etc.):

No E&P waste was generated.

IMPLEMENTATION SCHEDULE

Table with 3 columns: Date Site Investigation Began, Date Site Investigation Completed, Date Remediation Plan Submitted, Remediation Start Date, Anticipated Completion Date, Actual Completion Date.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Karolina Blaney Signed: Karolina Blaney Title: Environmental Specialist Date: 3/24/11

OGCC Approved: [Signature] Title: FOR Chris Canfield Date: 3/24/2011 EPS NW Region

Report of Analysis

Client Sample ID: KP 34-18		
Lab Sample ID: T70834-1		Date Sampled: 03/03/11
Matrix: SO - Soil		Date Received: 03/10/11
Method: SW846 8015		Percent Solids: 91.2
Project: KP 34-18 Flare Pit		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	BB0006170.D	1	03/14/11	AT	n/a	n/a	GBB305
Run #2							

Run #	Initial Weight	Final Volume	Methanol Aliquot
Run #1	5.53 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	ND	5.4	0.33	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
460-00-4	4-Bromofluorobenzene	97%		46-127%		
98-08-8	aaa-Trifluorotoluene	105%		44-120%		

ND = Not detected MDL - Method Detection Limit
 RL = Reporting Limit
 E = Indicates value exceeds calibration range

J = Indicates an estimated value
 B = Indicates analyte found in associated method blank
 N = Indicates presumptive evidence of a compound

Report of Analysis

Client Sample ID: KP 34-18		
Lab Sample ID: T70834-1		Date Sampled: 03/03/11
Matrix: SO - Soil		Date Received: 03/10/11
Method: SW846 8015 M SW846 3550B		Percent Solids: 91.2
Project: KP 34-18 Flare Pit		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	CC221440.D	1	03/17/11	HD	03/15/11	OP17768	GCC1168
Run #2							

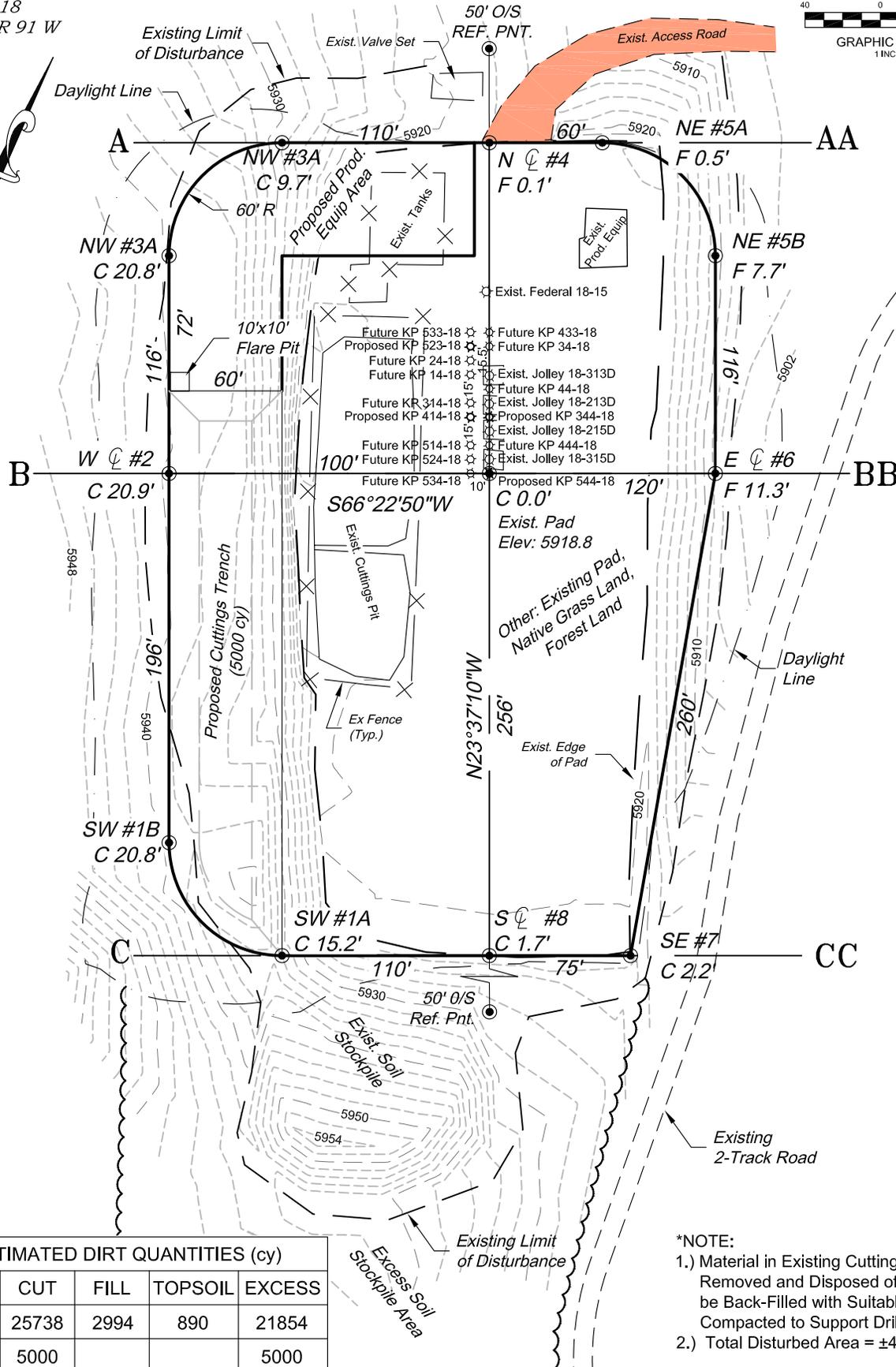
Run #	Initial Weight	Final Volume
Run #1	30.1 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	3.6	3.0	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	91%		33-115%		

ND = Not detected MDL - Method Detection Limit
 RL = Reporting Limit
 E = Indicates value exceeds calibration range

J = Indicates an estimated value
 B = Indicates analyte found in associated method blank
 N = Indicates presumptive evidence of a compound

Section 18
T. 6 S., R 91 W



ESTIMATED DIRT QUANTITIES (cy)				
ITEM	CUT	FILL	TOPSOIL	EXCESS
PAD	25738	2994	890	21854
PIT	5000			5000
TOTALS	30738	2994	890	26854

*NOTE:
1.) Material in Existing Cutting Trench to be Removed and Disposed of Properly. Trench to be Back-Filled with Suitable Fill Material and Compacted to Support Drilling Operations.
2.) Total Disturbed Area = ±4.56 ac.

Construction Plan Prepared for:
Williams Williams Production, RMT

KP 34 -18 Drill Pad - Plat 2
CONSTRUCTION LAYOUT

REVISED: 1/28/10
SCALE: 1" = 80'
DATE: 12/21/09
PLAT: 2 of 9
PROJECT: Williams
DFT: cws

136 East Third Street
Rifle, Colorado 81650
Ph. (970) 625-1330
Fax (970) 625-2773



K:\2010 Williams\kp34-18\CP 34-18 2.dwg, 1/28/2010 4:15:27 PM, 11