

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): Pit Closure

| | |
|--|--|
| OGCC Operator Number: <u>28700</u> | Contact Name and Telephone: <u>Adrienne N. Rosecrans</u> |
| Name of Operator: <u>ExxonMobil Corporation</u> | No: <u>281 654 2742</u> |
| Address: <u>P.O. Box 4358; CORP-MI-3011</u> | Fax: <u>281 654 1147</u> |
| City: <u>Houston</u> State: <u>TX</u> Zip: <u>77210-4358</u> | |

| | |
|--|---|
| API Number: <u>05-103-11329</u> | County: <u>Rio Blanco</u> |
| Facility Name: <u>Piceance Creek Unit</u> | Facility Number: <u>335826</u> |
| Well Name: <u>Piceance Creek Unit</u> | Well Number: <u>T25X-25G1</u> |
| Location: (QtrQtr, Sec, Twp, Rng, Meridian): <u>NWSW, 25, 1S, 97W, 6TH</u> | Latitude: <u>39.933621</u> Longitude: <u>108.235438</u> |

TECHNICAL CONDITIONS

Type of Waste Causing Impact (crude oil, condensate, produced water, etc): Drill Cuttings and Fluids

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: Piceance Fine Sandy Loam

Potential receptors (water wells within 1/4 mi, surface waters, etc.): Surface water within approximately 900 ft.

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

| | | |
|--|-------------------|-----------------|
| Impacted Media (check): | Extent of Impact: | How Determined: |
| <input type="checkbox"/> Soils | _____ | _____ |
| <input type="checkbox"/> Vegetation | _____ | _____ |
| <input type="checkbox"/> Groundwater | _____ | _____ |
| <input type="checkbox"/> Surface Water | _____ | _____ |

REMEDIATION WORKPLAN

Describe initial action taken (if previously provided, refer to that form or document):

Site is being prepared for pit closure. Samples were taken from the freshwater, cuttings, and reserve pits, and were analyzed for the full suite of Table 910-1 constituents. Background samples were also taken to establish background concentration levels.

Describe how source is to be removed:

Pit synthetic liners will be removed and sent to an offsite permitted disposal/recycling facility. Final pit content disposition is dependent on laboratory results. See section I of the attached application for the full Pit Closure Plan.

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.:

See section 1 of the attached document.

FORM 27 Rev 6/99

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Tracking Number: _____ Name of Operator: _____ OGCC Operator No: _____ Received Date: _____ Well Name & No: API 103-11329 Facility Name & No: PIT FACILITY # 412417 LOCATION ID# 335826

REMEDIATION WORKPLAN (Cont.)

OGCC Employee: _____

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

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.

As specified in the Surface Use Plan and BLM Conditions of Approval.

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? [X] Y [] N If yes, describe:

As applicable, a soil sample will be collected below each of the synthetic pit liners and sent for laboratory analysis of Table 910-1 constituents.

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

The synthetic liners will be removed from each pit and sent for offsite recycling/disposal. Pit contents will be processed by one of several methods to reduce TPH concentrations, including mix/blend methods and/or thermal desorption. Sediments below table 910-1 levels will be disposed onsite. Sediments containing higher constituent levels will be sent for offsite recycling/disposal.

IMPLEMENTATION SCHEDULE

Date Site Investigation Began: 1/5/11 Date Site Investigation Completed: _____ Date Remediation Plan Submitted: 3/16/11 Remediation Start Date: March 2011 Anticipated Completion Date: May 2011 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: Adrienne N. Rosecrans Signed: Rosecrans, Adrienne N. (anberry) Title: Senior Environmental Engineer Date: 3/15/11

OGCC Approved: [Signature] Title: For Chris Canfield Date: 04/11/2011 FPS NW Region