

State of Colorado
Oil and Gas Conservation Commission

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



#7173

FOR OGCC USE ONLY

RECEIVED
6/29/2012

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.

CAUSE OF CONDITION BEING INVESTIGATED AND REMEDIATED

☐ Spill or Release ☐ Plug & Abandon ☐ Central Facility Closure ☒ Site/Facility Closure ☐ Other (describe): _____

OGCC Employee:

☐ Spill ☐ Complaint
☐ Inspection ☐ NOAV

Tracking No:

OGCC Operator Number: 23320

Name of Operator: DeClar Oil & Gas, Inc.

Address: 13500 Rd W

City: Weldona State: Co Zip: 80653

Contact Name and Telephone:

Lewis Camp

No: 970-590-3332

Fax: 970-645-9834

API Number: 087-07772

County: Morgan

Facility Name: _____

Facility Number: _____

Well Name: Forsburg

Well Number: 13-5

Location: (QtrQtr, Sec, Twp, Rng, Meridian): NWSW Sec 5 T6N, 60W

Latitude: _____ Longitude: _____

TECHNICAL CONDITIONS

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

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.): _____

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

Potential receptors (water wells within 1/4 mi, surface waters, etc.): _____

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

Impacted Media (check):

Extent of Impact:

How Determined:

☐

Soils

☐

Vegetation

☐

Groundwater

☐

Surface Water

REMEDIAL WORKPLAN

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

Have samples from the water pit attached. Close in water pit on site

Describe how source is to be removed:

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.:



REMEDIAL WORKPLAN (Cont.)

Tracking Number: _____
Name of Operator: DECLAR OIL & GAS Inc
OGCC Operator No: _____
Received Date: _____
Well Name & No: FORSBURG API 087 07772
Facility Name & No: Location ID 313902

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.

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:

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

IMPLEMENTATION SCHEDULE

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: Lewis Camp

Signed: Lewis Camp

Title: Geologist

Date: 6-29-2012

OGCC Approved: [Signature]

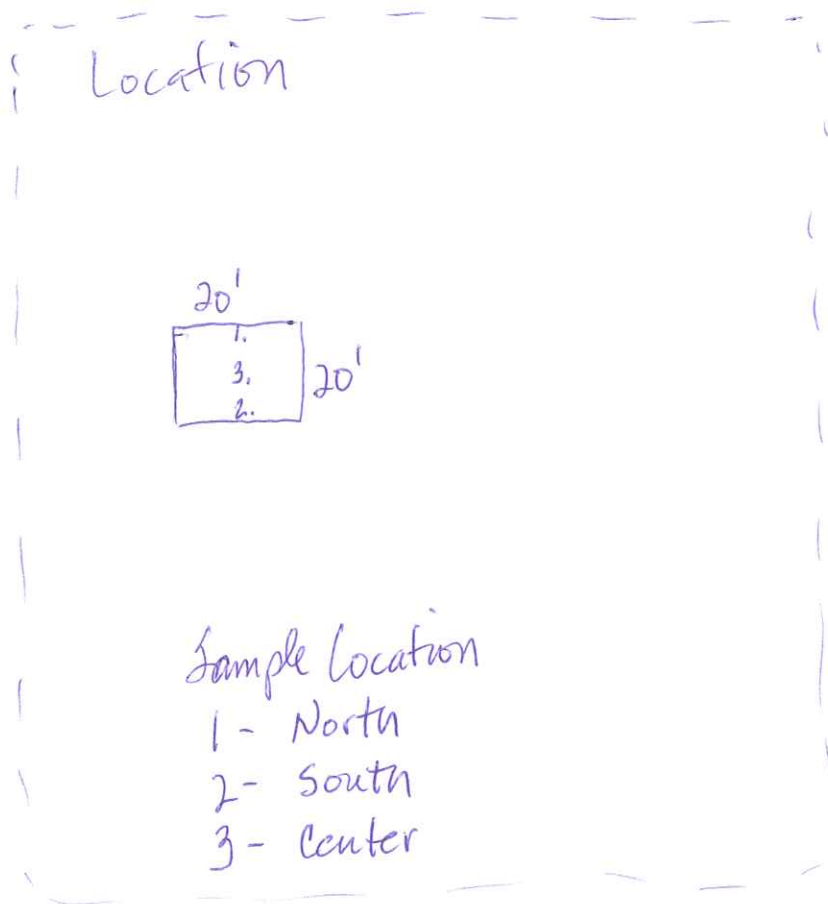
Title: FOR John Axelsson

Date: 08/08/2012

EPS NW Region

Forsberg 13-5

Sample location in pit.



June 15, 2012

DeClar Oil
13500 Rd W
Weldona, CO 80653

Project: Foresburg

Laboratory No.: E12152-1 (page 2 of 2)

Method EPA 602/SW8020 A, EPA 624/SW8015 and SW8260

Sample ID	Date Sampled	Date Analyzed	Benzene	Toluene	Ethyl-benzene	o,p-Xylene	m-Xylene	Surrogate Recovery
			ug/kg	ug/kg	ug/kg	ug/kg	ug/kg	%
North	05/30/12	06/04/12	U	U	U	U	U	80.6
South	05/30/12	06/04/12	U	U	U	U	U	81.4
Center	05/30/12	06/04/12	U	U	U	U	U	99.6

Reporting Limit:

4

4

4

4

4

QC Limits: 74-147

U=Compound analyzed for but not detected

J=Compound detected at a level below reporting limit.

Project Manager

Date

WELD LABORATORIES, INC.
1527 First Avenue • Greeley, Colorado 80631
Phone: (970) 353-8118 • Fax: (970) 353-1671
www.weldlabs.com

June 15, 2012

DeClar Oil
13500 Rd W
Weldona, CO 80653

Laboratory No. E12152-1 (page 1 of 2)

Date Sampled: 5/30/2012

Date Received: 5/31/2012

Project: Foresburg

Sample ID	TRPH (mg/kg)	Calcium (mg/kg)	Magnesium (mg/kg)	Sodium (mg/kg)	SAR	pH (SI)	Ec (mmhos/cm)
North	less than 5	109	51.6	207	4.1	6.92	3.47
South	29.5	149	40.8	219	4.1	7.11	5.46
Center	6.19	79.6	30	11.6	2.8	7.04	0.52



Project Manager

6/15/12
Date

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