

State of Colorado
Oil and Gas Conservation Commission



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

FOR OGCC USE ONLY

OGCC Employee:

Spill Complaint
 Inspection NOAV

Tracking No:

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): requirement to re-permit facility

OGCC Operator Number: 10119	Contact Name and Telephone: Naomi Azulai
Name of Operator: Maralex Disposal, LLC	No: 970-563-4000
Address: 775 Goddard Ave., P.O. Box 338	Fax: 970-563-4116
City: Ignacio State: CO Zip: 81137	

API Number: n/a County: Mesa

Facility Name: Roan Creek Evaporation Pond Facility Number: 116525

Well Name: n/a Well Number: n/a

Location: (QtrQtr, Sec, Twp, Rng, Meridian): NESE Sec 36 T8S R98W Latitude: 39.31 Longitude: -108.27

TECHNICAL CONDITIONS

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

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.): non-cropland

Soil type, if not previously identified on Form 2A or Federal Surface Use Plan: Uffens loam, 1-8% slopes

Potential receptors (water wells within 1/4 mi, surface waters, etc.): Coon Hollow dry wash. No water wells within 1/4 mile.

Description of Impact (if previously provided, refer to that form or document): none known

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	_____	_____

REMEDIALTION WORKPLAN

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

Conformed to all BLM requirements to recommission ~~the pond~~ remove any contaminated soil, redesign load out area to contain spills, secure facility from unauthorized disposal, revegetate pond berm, install required signs, and label storage vessel.

Describe how source is to be removed:

The entire panel that has been repaired with patches on the NE side of the pond will be removed and disposed of in preparation to have a new panel installed in its place once remediation is approved.

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.:

Soil samples will be taken from under the removed panel. Since the concern about the integrity of the liner is due in most part to the patches along the NE side of the pond, it follows that if the soils under the liner have been impacted, then the soils directly under the patched panel would have the greatest concentration of any possible contaminants.



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

Page 2 REMEDIATION WORKPLAN (Cont.)

OGCC Employee: _____

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

No known impact to ground water.

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 site will maintain all existing grade contours in order to re-permit the site for use.

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:

Samples will be taken once the plan outlined in this Form 27 is approved by the COGCC.

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

This facility is only used to evaporate produced water so there is no E&P waste to dispose of.

IMPLEMENTATION SCHEDULE

Date Site Investigation Began: 06/2013 Date Site Investigation Completed: 7/18/2013 Date Remediation Plan Submitted: 8/5/2013 Remediation Start Date: tbd Anticipated Completion Date: tbd Actual Completion Date: tbd

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

Print Name: Naomi Azulai Signed: _____ Title: Production Technician Date: 8/5/2013

OGCC Approved: NOT APPROVED Title: _____ Date: _____