

State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado
(303) 894-2100 Fax 894-2109

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REMEDIATION WORKPLAN (CONT.)

OGCC Employee: _____

Tracking Number: _____
Name of Operator: XTO Energy, Inc.
OGCC Operator No: 100264
Received Date: _____
Well Name & No: Lincoln Trust/Pruski # 3-22
Facility Name & No.: _____

If groundwater has been impacted, describe proposed monitoring plan (# of wells or sample points, sampling schedule, analytical methods, etc.):
Groundwater was not encountered in the pit, and the potential for impact to groundwater appears low.

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 backfilled to the existing grade. An active XTO production facility remains at the site.

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:

Reference Tables 1 and 2 from LT Environmental dated September 1, 2010. XTO is requesting a variance from the COGCC to allow existing concentrations of arsenic to remain in place at the site. XTO is requesting a determination of No Further Action for the closure of the partially buried produced water vessel.

Final disposition of E&P waste (landtreated and disposed onsite, name of licensed disposal facility, recycling, reuse, etc.):
Not applicable.

IMPLEMENTATION SCHEDULE

Date Site Investigation Began: <u>8/16/10</u>	Date Site Investigation Completed: <u>8/16/10</u>	Remediation Plan Submitte <u>9/2/10</u>
Remediation Start Date: <u>8/16/10</u>	Anticipated Completion Date: <u>8/16/10</u>	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 Sam MontoyaSam E. MontoyaDigitally signed by Sam E. Montoya
DN: cn=Sam E. Montoya, c=US, o=XTO Energy Inc.,
ou=EHS, email=sam_montoya@xtenergy.com
Reason: I am approving this document
Date: 2010.09.20 13:03:33 -0600Signed: _____ Title: EH&S Coordinator Date: 9/16/10OGCC Approved: Jennifer Hussey Title: _____ Date: 9-20-2010for Karen Spray - SW EPS