

State of Colorado  
**Oil and Gas Conservation Commission**



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FOR OGCC USE ONLY  
REM 7787  
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**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):

OGCC Operator Number: 10430	Contact Name and Telephone: Kerry W Smith
Name of Operator: Monument Global Resources Inc	No: 575 937 8001
Address: 12610 N Abrams Rd, Suite 610.	Fax: 214 691 6822
City: Dallas State: TX Zip: 75243	

API Number: 08-083-05152	County: Montezuma
Facility Name:	Facility Number: 223748
Well Name: Cache Unit	Well Number: #6
Location: (QtrQtr, Sec, Twp, Rng, Meridian): SWSW, S35, T35N, 20W, N	Latitude: 37.2418256 Longitude: -109.025948

**TECHNICAL CONDITIONS**

Type of Waste Causing Impact (crude oil, condensate, produced water, etc): Produced Water & Crude Oil

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.): Dry Land

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

Potential receptors (water wells within 1/4 mi, surface waters, etc.): Abandoned Water Well greater than 2500ft SW of end of release. release occurred on upper level

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

Impacted Media (check):	Extent of Impact:	How Determined:
<input checked="" type="checkbox"/> Soils	~1500ft x <2ft down dry run off	Site Measured.
<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):  
initial action undertaken document number 2315151 8/10/2015

Describe how source is to be removed:  
Source removed and residuals treated with mixture of simple green and IFA Quick Green fertilizer.

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.:  
Recent investigation indicates further localized remediation is required. Area on upper level of butte surrounding sample point S2#2 ~10ft radius and along the flow path to Butte drop off point. Also remediation from S2#3 to S2#5, approx 600ft long and 1.5ft to 2ft wide using the same method as previous with a mix of Simple Green and Hgh Nitrogen Fertilizer.



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.): Historic release #7787, no evidence of ground water impacts.

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.

Following anaysis carried out by GAL and BE@ST LLC report Sept 16th 2015 further remediation in localized areas along the flow path is required. Area on upper level of butte surrounding sample point S2#2 ~10ft radius and along the flow path to Butte drop off point. Also remediation from S2#3 to S2#5, approx 600ft long and 1.5ft to 2ft wide using the same method as previous with a mix of Simple Green and High Nitrogen Fertilizer.

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:

Samples to be taken following remediation works, to be tested for Speciated TPH.

Final disposition of E&P waste (landtreated and disposed onsite, name of licensed disposal facility, recycling, reuse, etc.): None.

IMPLEMENTATION SCHEDULE

Date Site Investigation Began: 09/07/212 Date Site Investigation Completed: 9/16/2015 Date Remediation Plan Submitted: 9/16/2015 Remediation Start Date: 9/28/2015 Anticipated Completion Date: 10/5/2015 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: David Bower for Kerry Smith Signed: [Signature] Title: Principle, BE@ST LLC Date: 9/16/2015

OGCC Approved: [Signature] Title: Environmental Protection Specialist Date: 9/21/15