

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

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): Surface Soil Contamination

OGCC Operator Number: <u>46290</u>	Contact Name and Telephone: <u>Susana Lara-Mesa</u>
Name of Operator: <u>K.P. Kauffman Company, Inc.</u>	No: <u>303-825-4822</u>
Address: <u>1675 Broadway, Suite 2800</u>	Fax: <u>303-825-4825</u>
City: <u>Denver</u> State: <u>CO</u> Zip: <u>80202</u>	

API Number: _____	County: <u>Weld</u>
Facility Name: <u>AMOCO-CHARTER-SCHNEIDER</u>	Facility Number: <u>444630</u>
Well Name: _____	Well Number: _____
Location: (QtrQtr, Sec, Twp, Rng, Meridian): <u>NWSE, Sec 33, Twp 1N, Rng 67W, Sixth</u> Latitude: <u>40.00759</u> Longitude: <u>-104.89162</u>	

TECHNICAL CONDITIONS

Type of Waste Causing Impact (crude oil, condensate, produced water, etc): Comingled Fluid (Condensate & 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.): Dry Land Farming

Soil type, if not previously identified on Form 2A or Federal Surface Use Plan: Weld Loam, 1 to 3 percent slopes.

Potential receptors (water wells within 1/4 mi, surface waters, etc.): five (5) water wells within 1/4 mi.

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	<u>TBD</u>	_____
<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):

KPK has removed the existing shed housing the equipment responsible for the accumulation of oily waste on the ground. With the shed removed, out of service equipment was removed. Abandoned flowlines will be taken out of service in compliance with Rule 1103. During removal of out of service equipment, an unknown active flowline was disconnected releasing between 5 and 10 bbl of comingled fluids on the surface.

Describe how source is to be removed:

Soil contaminated with the fluids release on the surface will be removed with excavation equipment and disposed of at a certified facility. Soil samples will be collected from where fluids were released on the ground to confirm soil is below concentration thresholds in Table 910-1. The number and location of sampling sites will be dependent on the extent of the final excavation area.

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.:

The areas where soil is removed will be screended using a photoionization detector to determine the extent of soil contamination. Once clean soil is confirmed, soil samples will be collected and sent to an independent laboratory for full analysis in accordance with Rule 910.b.(3).



Tracking Number: Name of Operator: K.P. KAUFFMAN CO OGCC Operator No: 46290 Received Date: Well Name & No: ACS 14 Facility Name & No: 441030

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.):

If groundwater is encountered, water samples will be collected from the area and tested per Rule 910.b.(4).

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 subject site is active and will undergo final reclamation at the time.

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:

Removal of soil containing released fluids needs to be completed and soil samples will be collected and analyzed to verify contaminated soil has been removed. To be provided with the notice of completion.

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

Contaminated soil will be disposed of at a certified disposal facility. Soil manifests will be provided with the Notice of Completion.

IMPLEMENTATION SCHEDULE

Date Site Investigation Began: 02/04/2016 Date Site Investigation Completed: TBD Date Remediation Plan Submitted: 02/18/2016 Remediation Start Date: 02/04/2016 Anticipated Completion Date: 03/31/2016 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: Susana Lara-Mesa Signed: [Signature] Title: Vice President of Engineering Date: 02/18/2016

OGCC Approved: Title: Date: