

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
401267656

Receive Date:

Report taken by:

Site Investigation and Remediation Workplan (Supplemental Form)

This form shall be submitted to the Director for approval prior to the initiation of site investigation and remediation activities. However, this shall not preclude the Operator from taking immediate action to protect public health or safety, the environment, wildlife, or livestock.

This Form 27 describes site conditions as currently understood by the Operator; approval of this Form 27 by COGCC is based on the site conditions accurately described herein; any changes in site conditions identified during or subsequent to the performance of the approved workplan may necessitate additional investigation or remediation which shall be described on a supplemental Form 27.

This Form 27 is intended to provide basic information regarding the proposed site investigation and remediation actions, but the workplan may be more fully described in attached documentation.

Refer to Rules 340, 905, 906, 907, 908, 909, and 910

OPERATOR INFORMATION

Name of Operator: <u>LINN OPERATING LLC</u>	Operator No: <u>10516</u>	Phone Numbers
Address: <u>600 TRAVIS STREET #1400</u>		Phone: <u>(970) 2855207</u>
City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77002</u>		Mobile: <u>(970) 9482785</u>
Contact Person: <u>Tom Hogelin</u>	Email: <u>thogelin@linnenergy.com</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 10076 Initial Form 27 Document #: 401216644

PURPOSE INFORMATION

<input type="checkbox"/> 901.e. Sensitive Area Determination	<input type="checkbox"/> 909.c.(5), Rule 910.b.(4): Remediation of impacted ground water
<input type="checkbox"/> 909.c.(1), Rule 905: Pit or PW vessel closure	<input type="checkbox"/> Rule 909.e.(2)A.: Notice completion of remediation in accordance with Rule 909.b.
<input type="checkbox"/> 909.c.(2), Rule 906: Spill/Release Remediation	<input checked="" type="checkbox"/> Rule 909.e.(2)B.: Closure of remediation project
<input type="checkbox"/> 909.c.(3), Rule 907.e.: Land treatment of oily waste	<input type="checkbox"/> Rule 906.c.: Director request
<input type="checkbox"/> 909.c.(4), Rule 908.g.: Centralized E&P Waste Management Facility closure	<input type="checkbox"/> Other _____

SITE INFORMATION N Multiple Facilities (in accordance with Rule 909.c.)

Facility Type: <u>LAND APPLICATION SITE</u>	Facility ID: <u>443363</u>	API #: _____	County Name: <u>GARFIELD</u>
Facility Name: <u>Chevron C20 596</u>	Latitude: <u>39.606065</u>	Longitude: <u>-108.194801</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>NENW</u>	Sec: <u>20</u>	Twp: <u>5S</u>	Range: <u>96W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

SITE CONDITIONS

General soil type - USCS Classifications ML Most Sensitive Adjacent Land Use Grazing

Is domestic water well within 1/4 mile? No Is surface water within 1/4 mile? No

Is groundwater less than 20 feet below ground surface? No

Other Potential Receptors within 1/4 mile

SITE INVESTIGATION PLAN

TYPE OF WASTE:

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> E&P Waste | <input checked="" type="checkbox"/> Other E&P Waste | <input type="checkbox"/> Non-E&P Waste |
| <input type="checkbox"/> Produced Water | <input type="checkbox"/> Workover Fluids | _____ |
| <input type="checkbox"/> Oil | <input type="checkbox"/> Tank Bottoms | |
| <input type="checkbox"/> Condensate | <input type="checkbox"/> Pigging Waste | |
| <input type="checkbox"/> Drilling Fluids | <input type="checkbox"/> Rig Wash | |
| <input checked="" type="checkbox"/> Drill Cuttings | <input type="checkbox"/> Spent Filters | |
| | <input checked="" type="checkbox"/> Pit Bottoms | |
| | <input type="checkbox"/> Other (as described by EPA) | _____ |

DESCRIPTION OF IMPACT

Impacted?	Impacted Media	Extent of Impact	How Determined
No	SOILS	Confined to bermed treatment area	Visual inspection

INITIAL ACTION SUMMARY

Description of initial action or emergency response measures take to abate, investigate, and/or remediate impacts associated with E&P Waste.

Composite sample of the material to be treated was analyzed to establish a baseline.

PROPOSED SAMPLING PLAN

Proposed Soil Sampling

Will soil samples be collected as part of this investigation? (Number, type (grab/composite), analyses, and locations of samples):

Landfarming and pit bottom soil sample lab results attached.

Proposed Groundwater Sampling

Will groundwater samples be collected as part of this investigation? (Number, analyses, and locations of samples):

Proposed Surface Water Sampling

Will surface water samples be collected as part of this investigation? (Number, analyses, and locations of samples):

Additional Investigative Actions

Additional alternative investigative actions described in attached Site Investigation Plan (summary):

SITE INVESTIGATION REPORT

SAMPLE SUMMARY

Soil

Number of soil samples collected 16
Number of soil samples exceeding 910-1 9
Was the areal and vertical extent of soil contamination delineated? Yes
Approximate areal extent (square feet) 11250

NA / ND

-- Highest concentration of TPH (mg/kg) 16051
-- Highest concentration of SAR 37
 BTEX > 910-1 No
 Vertical Extent > 910-1 (in feet) 2

Groundwater

Number of groundwater samples collected 0
Was extent of groundwater contaminated delineated? No
Depth to groundwater (below ground surface, in feet)
Number of groundwater monitoring wells installed
Number of groundwater samples exceeding 910-1

 Highest concentration of Benzene (µg/l)
 Highest concentration of Toluene (µg/l)
 Highest concentration of Ethylbenzene (µg/l)
 Highest concentration of Xylene (µg/l)
 Highest concentration of Methane (mg/l)

Surface Water

0 Number of surface water samples collected
 Number of surface water samples exceeding 910-1
If surface water is impacted, other agency notification may be required.

OTHER INVESTIGATION INFORMATION

Were impacts to adjacent property or offsite impacts identified?

Were background samples collected as part of this site investigation?

Was investigation derived waste (IDW) generated as part of this investigation?

Volume of solid waste (cubic yards) Volume of liquid waste (barrels)

Is further site investigation required?

REMEDIAL ACTION PLAN

Does this Supplemental Form 27A include changes to a previously approved Remedial Action Plan? No _____

SOURCE REMOVAL SUMMARY

Describe how source is to be removed.

Material was buried on site.

REMEDIATION SUMMARY

Describe how remediation of existing impacts to soil and groundwater is to be accomplished (i.e. summarize remedial action plan). Provide a brief narrative description including: technical justification, schedule for implementation, estimated time to attain NFA status, plus plans and specifications for the selected remedial action technology.

Treated soils were buried on site with minimum 3' cover

Soil Remediation Summary

In Situ

- _____ Bioremediation (or enhanced bioremediation)
- _____ Chemical oxidation
- _____ Air sparge / Soil vapor extraction
- _____ Natural Attenuation
- _____ Other _____

Ex Situ

- No _____ Excavate and offsite disposal
- If Yes: Estimated Volume (Cubic Yards) _____
- Name of Licensed Disposal Facility or COGCC Facility ID # _____
- Yes _____ Excavate and onsite remediation
- Yes _____ Land Treatment
- No _____ Bioremediation (or enhanced bioremediation)
- No _____ Chemical oxidation
- No _____ Other _____

Groundwater Remediation Summary

- _____ Bioremediation (or enhanced bioremediation)
- _____ Chemical oxidation
- _____ Air sparge / Soil vapor extraction
- _____ Natural Attenuation
- _____ Other _____

GROUNDWATER MONITORING

If groundwater has been impacted, describe proposed monitoring plan, including # of wells or sample points, monitoring schedule, analytical methods, points of compliance. Attach a groundwater monitoring location diagram.

REMEDATION PROGRESS UPDATE

PERIODIC REPORTING

Frequency: Quarterly Semi-Annually Annually Other Final reports attached _____

Report Type: Groundwater Monitoring Land Treatment Progress Report O&M Report

Other _____

WASTE DISPOSAL INFORMATION

Was E&P waste generated as part of this remediation? No

Describe beneficial use, if any, of E&P Waste derived from this remediation project:

Volume of E&P Waste (solid) in cubic yards _____

E&P waste (solid) description _____

COGCC Disposal Facility ID #, if applicable: _____

Non-COGCC Disposal Facility: _____

Volume of E&P Waste (liquid) in barrels _____

E&P waste (liquid) description _____

COGCC Disposal Facility ID #, if applicable: _____

Non-COGCC Disposal Facility: _____

REMEDATION COMPLETION REPORT

REMEDATION COMPLETION SUMMARY

Is this a Final Closure Request for this Remediation Project? Yes

Do all soils meet Table 910-1 standards? Yes

Does the previous reply indicate consideration of background concentrations? Yes

Are the only residual soil impacts pH, SAR, or EC at depths greater than 3 feet below ground surface? _____

Does Groundwater meet Table 910-1 standards? Yes

Is additional groundwater monitoring to be conducted? _____

RECLAMATION PLAN

RECLAMATION PLANNING

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.

Interim reclamation has previously taken place on this well pad. Treated drill cuttings were mixed with clean soil and buried in the pit with an excess of 3' of cover. Pad slopes were reclaimed not to exceed 3:1 slope. Horizontal ripping, stair-stepping, grooving, tracking, or pocketing on slopes were utilized to reduce erosion. Surface roughening was utilized on all areas receiving revegetation. Topsoil was spread over all areas to be revegetated. These areas are identified on the attached drawing. Seed applied by drill was covered by weed-free straw, mulched and crimped. A copy of the seed mix is attached. Monthly inspections for physical signs of compaction alleviation will be conducted by a qualified inspector while conducting stormwater inspections except when the location is in winter exclusion status. The location will be inspected during the growing season by a qualified contractor capable of identifying noxious weeds and selecting and applying the appropriate chemical to eradicate those noxious weeds.

Is the described reclamation complete? Yes

Does the reclamation described herein constitute interim or final reclamation of the Oil and Gas Location?

Interim? Final?

Did the Surface Owner approve the seed mix? Yes

If NO, does the seed mix comply with local soil conservation district recommendations? _____

IMPLEMENTATION SCHEDULE

PRIOR DATES

Date of Surface Owner notification/consultation, if required. _____

Actual Spill or Release date, if known. _____

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). _____

Date of commencement of Site Investigation. _____

Date of completion of Site Investigation. _____

REMEDIAL ACTION DATES

Date of commencement of Remediation. 07/08/2013

Date of completion of Remediation. 08/03/2014

SITE RECLAMATION DATES

Date of commencement of Reclamation. 09/02/2014

Date of completion of Reclamation. 09/16/2014

OPERATOR COMMENT

Reference Document # 401216644 for lab analysis

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

Signed: Tom Hogelin _____

Title: Construction Foreman _____

Submit Date: _____

Email: thogelin@linnenergy.com _____

Based on the information provided herein, this Application for Site Investigation and Remediation Workplan complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____

Date: _____

Remediation Project Number: 10076

COA Type

Description

<u>COA Type</u>	<u>Description</u>

Attachment Check List

Upon approval, the approved Form 27 and all listed attachments will be indexed to the Remediation Project file. Only the approved Form 27 will also be indexed to the related Facilities.

Att Doc Num

Name

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)