

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
401278927

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: GREAT WESTERN OPERATING COMPANY LLC	Operator No: 10110	Phone Numbers
Address: 1801 BROADWAY #500		
City: DENVER	State: CO Zip: 80202	
Contact Person: Scot Donato	Email: sdonato@gwogco.com	
		Phone: (303) 398-0537
		Mobile: (303) 398-0537

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 9067 Initial Form 27 Document #: 2143144

PURPOSE INFORMATION

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

SITE INFORMATION

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

Facility Type: WELL Facility ID: _____ API #: 123-13749 County Name: WELD

Facility Name: UPRR-RICKETSON 1 Latitude: 40.084555 Longitude: -104.618176

** correct Lat/Long if needed: Latitude: _____ Longitude: _____

QtrQtr: NWNW Sec: 1 Twp: 1N Range: 65W Meridian: 6 Sensitive Area? Yes

SITE CONDITIONS

General soil type - USCS Classifications SM Most Sensitive Adjacent Land Use CULTIVATED

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? Yes

Other Potential Receptors within 1/4 mile

see supplemental Form 19 submitted 6/16/2014

SITE INVESTIGATION PLAN

TYPE OF WASTE:

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> E&P Waste | <input type="checkbox"/> Other E&P Waste | <input type="checkbox"/> Non-E&P Waste |
| <input checked="" 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 type="checkbox"/> Drill Cuttings | <input type="checkbox"/> Spent Filters | |
| | <input type="checkbox"/> Pit Bottoms | |
| | <input type="checkbox"/> Other (as described by EPA) | _____ |

DESCRIPTION OF IMPACT

Impacted?	Impacted Media	Extent of Impact	How Determined
No	GROUNDWATER	N/A	monitoring well installed in 2016 did not contain elevated
Yes	SOILS	approx 40' x 50' x 8'	Collection of soil samples during exc

INITIAL ACTION SUMMARY

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

Previously provided: Please see Forms 19 and 27 submitted for site.

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):

Soil samples were collected during excavation activities to confirm removal of source soils

Proposed Groundwater Sampling

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

One monitoring well was installed in the backfilled excavation in 2016 and did not contain elevated concentrations of hydrocarbons above Table 910-1 concentrations

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 6
Number of soil samples exceeding 910-1 1
Was the areal and vertical extent of soil contamination delineated? Yes
Approximate areal extent (square feet) 1800

NA / ND

-- Highest concentration of TPH (mg/kg) 592.3
NA Highest concentration of SAR
BTEX > 910-1 No
Vertical Extent > 910-1 (in feet) 7

Groundwater

Number of groundwater samples collected 0
Was extent of groundwater contaminated delineated? Yes
Depth to groundwater (below ground surface, in feet) 13'
Number of groundwater monitoring wells installed 1
Number of groundwater samples exceeding 910-1 1

-- Highest concentration of Benzene (µg/l) 6.6
-- Highest concentration of Toluene (µg/l) 98.6
-- Highest concentration of Ethylbenzene (µg/l) 94
-- Highest concentration of Xylene (µg/l) 5200
NA Highest concentration of Methane (mg/l)

Surface Water

0 Number of surface water samples collected
0 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) 550 Volume of liquid waste (barrels) 0

Is further site investigation required?

See attached diagram and analytical reports for confirmation wall soil samples.

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.

Soil excavation based on staining, odors, and final laboratory analytical results conducted at location of former produced water vessel. Confirmation soil samples collected and analyzed for GRO/DRO. Removed soils disposed of properly at an approved offsite disposal facility. See attached diagram and analytical reports for confirmation wall and base soil samples. PLEASE NOTE: All soil samples included in analytical report, but not included on diagram as confirmation samples, were representative of soils that were excavated and disposed of offsite.

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.

Following source removal, and confirmation wall samples from the excavation which were below COGCC Table 910-1 concentrations, one monitoring well was installed within the backfilled excavation. Based on the groundwater analytical results, groundwater is no longer impacted with hydrocarbons at concentrations greater than Table 910-1 concentrations.

Soil Remediation Summary

In Situ

Ex Situ

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

Yes Excavate and offsite disposal
_____ If Yes: Estimated Volume (Cubic Yards) _____ 550
Name of Licensed Disposal Facility or COGCC Facility ID # _____
No Excavate and onsite remediation
_____ Land Treatment
_____ Bioremediation (or enhanced bioremediation)
_____ Chemical oxidation
_____ Other _____

Groundwater Remediation Summary

No _____ Bioremediation (or enhanced bioremediation)
No _____ Chemical oxidation
No _____ Air sparge / Soil vapor extraction
Yes _____ 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.

Granular activated carbon was introduced into groundwater prior to backfilling of the excavation. Although one groundwater sample was collected from the base of the excavation, because it was a "grab" sample in contact with impacted soils, it is not considered representative of shallow groundwater at the site. Based on the groundwater analytical results obtained from a recently installed monitoring well within the former excavation, groundwater is no longer impacted with hydrocarbons at concentrations greater than Table 910-1 concentrations.

REMEDIATION PROGRESS UPDATE

PERIODIC REPORTING

Frequency: Quarterly Semi-Annually Annually Other _____

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? Yes _____

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

N/A

Volume of E&P Waste (solid) in cubic yards _____ 550

E&P waste (solid) description hydrocarbon impacted soils _____

COGCC Disposal Facility ID #, if applicable: _____

Non-COGCC Disposal Facility: Buffalo Ridge Landfill _____

Volume of E&P Waste (liquid) in barrels _____ 0

E&P waste (liquid) description _____

COGCC Disposal Facility ID #, if applicable: _____

Non-COGCC Disposal Facility: _____

REMEDIATION COMPLETION REPORT

REMEDIATION 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? No _____

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? No _____

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.

The site will be reclaimed in accordance with the 1000 Series rules.

Is the described reclamation complete? No _____

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? No _____

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

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. 05/20/2014

Date of completion of Site Investigation. 07/08/2014

REMEDIAL ACTION DATES

Date of commencement of Remediation. 06/05/2014

Date of completion of Remediation. 08/15/2014

SITE RECLAMATION DATES

Date of commencement of Reclamation. _____

Date of completion of Reclamation. _____

OPERATOR COMMENT

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

Signed: Rachel A. Peterson

Title: Senior Project Manager

Submit Date: _____

Email: petersonr@agwco.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: 9067

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>
401279009	REMEDATION PROGRESS REPORT

Total Attach: 1 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)