

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
401419970
Receive Date:
10/05/2017

Report taken by:
RICK ALLISON

Site Investigation and Remediation Workplan (Initial 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 INFORMATON

Name of Operator: BLUE CHIP OIL INC	Operator No: 8840	Phone Numbers
Address: 155 E BOARDWALK DR STE 400		Phone: (970) 493-6456
City: FORT COLLINS State: CO Zip: 80525		Mobile: ()
Contact Person: Tim Hager	Email: BLUECHIPOIL@MSN.COM	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 10567 Initial Form 27 Document #: 401419970

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 INFORMATION

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

Facility Type: LOCATION	Facility ID: 323515	API #:	County Name: WELD
Facility Name: NORTH POUFRE 2-30	Latitude: 40.464160	Longitude: -104.813910	
	** correct Lat/Long if needed: Latitude: 40.464364	Longitude: -104.813709	
QtrQtr: NENE	Sec: 30	Twp: 6N	Range: 66W Meridian: 6 Sensitive Area? Yes

SITE CONDITIONS

General soil type - USCS Classifications SP Most Sensitive Adjacent Land Use Agricultural
 Is domestic water well within 1/4 mile? Yes 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 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
Yes	SOILS	AROUND 4' BELOW GROUND SURFACE	PID SCREENING AT 5 LOCATIONS

INITIAL ACTION SUMMARY

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

We screened 5 soil sample locations from around the base of the produced water tank excavation, generally from the four cardinal directions and one from the middle of where the tank sat. These screening locations consisted of soil from the surface to up to 6" below the ground surface (bgs) of the excavation. The samples were screened onsite using a photo-ionization detector (PID). We then used a hand auger at the most impacted of the 5 locations to drill down even further, screening a soil at 1' intervals in order to ascertain a more precise picture of the contamination and to identify an increasing or decreasing trend in the contamination. The most impacted soil sample from the site was retained and provided to a laboratory for further analysis. The laboratory analyzed the samples for petroleum hydrocarbon content, BTEX (benzene, toluene, ethylbenzene, and xylenes) content, pH, conductivity, and sodium adsorption ratio (SAR). The most impacted soil was found on the surface or within 6" of the surface of the excavation, directly between the edge of the produced water tank and the oil tanks. The impacts decreased slightly at 1' bgs, but drastically by 2' bgs. Trace hydrocarbon concentrations were still found at 4' bgs. Laboratory analytical results are attached to Form 19.

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):

We will collect soil confirmation soil samples from the base and sidewalls of the excavation to document compliance of remaining soil with the Table 910-1 Concentration Levels. Soil samples will be analyzed for BTEX, TPH-GRO and TPH-DRO.

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 0
Number of soil samples exceeding 910-1 _____
Was the areal and vertical extent of soil contamination delineated? _____
Approximate areal extent (square feet) _____

NA / ND

_____ Highest concentration of TPH (mg/kg) _____
_____ Highest concentration of SAR _____
_____ BTEX > 910-1 _____
_____ Vertical Extent > 910-1 (in feet) _____

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

SOURCE REMOVAL SUMMARY

Describe how source is to be removed.

Partially buried produced water storage tank was removed

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.

Further excavation, in tandem with soil screening with the PID until acceptable levels are found; confirmation samples will be sent to the lab for analysis. Soils will be loaded directly into trucks and disposed of at North Weld Landfill, waste stream #12600900. If groundwater is encountered, a sample will be taken for analysis.

Soil Remediation Summary

In Situ

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

Ex Situ

- Excavate and offsite disposal
- If Yes: Estimated Volume (Cubic Yards) _____
- Name of Licensed Disposal Facility or COGCC Facility ID # _____
- Excavate and onsite remediation
- Land Treatment
- Bioremediation (or enhanced bioremediation)
- Chemical oxidation
- 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.

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? _____

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: _____

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 excavation area will be backfilled with fill dirt and compacted using the excavator/backhoe. The top 12 inches will be filled with soil matching the existing surrounding soil and compacted. The location will be leveled to match the current contour of the land to the surface owner's specification.

Is the described reclamation complete? _____

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? _____

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). 09/14/2017

Date of commencement of Site Investigation. 10/05/2017

Date of completion of Site Investigation. _____

REMEDIAL ACTION DATES

Date of commencement of Remediation. _____

Date of completion of Remediation. _____

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: ` Drezden Kinnaird _____

Title: Environmental Scientist _____

Submit Date: ` 10/05/2017 _____

Email: dkinnaird@cgrs.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: RICK ALLISON _____

Date: 10/10/2017 _____

Remediation Project Number: 10567 _____

COA Type**Description**

	Operator is directed to submit a Form 19 Supplemental Spill/Release Report for Spill ID#452464 and include the Spill/Release Detail Report, Corrective Actions Report, and Request for Closure - Work Proceeding under approved Form 27. A topographic map or aerial image is also required with the Form 19 Supplemental Spill/Release Report per Rule 906.b.
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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**

401419970	INVESTIGATION/REMEDATION WORKPLAN (INITIAL)
401424453	FORM 27-INITIAL-SUBMITTED

Total Attach: 2 Files

General Comments**User Group****Comment****Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)