

State of Colorado Oil and Gas Conservation Commission

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Document Number:

401583023

Receive Date:

03/22/2018

Report taken by:

BOB CHESSON

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 INFORMATION

Name of Operator: <u>BAYSWATER EXPLORATION & PRODUCTION LLC</u>	Operator No: <u>10261</u>	Phone Numbers
Address: <u>730 17TH ST STE 500</u>		Phone: <u>(303) 8932503</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>		Mobile: <u>()</u>
Contact Person: <u>Meagan Miller</u>	Email: <u>mmiller@bayswater.us</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 11118Initial Form 27 Document #: 401583023

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 checked="" type="checkbox"/> 909.c.(1), Rule 905: Pit or PW vessel closure | <input checked="" 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>LOCATION</u>	Facility ID: <u>320702</u>	API #: _____	County Name: <u>ARAPAHOE</u>
Facility Name: <u>TAMI STATE-64S62W 24NESW</u>		Latitude: <u>39.686006</u>	Longitude: <u>-104.277520</u>
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>NESW</u>	Sec: <u>24</u>	Twp: <u>4S</u>	Range: <u>62W</u> Meridian: <u>6</u> Sensitive Area? <u>No</u>

SITE CONDITIONS

General soil type - USCS Classifications MLMost Sensitive Adjacent Land Use Unnamed Pond 1469 ft SouthIs domestic water well within 1/4 mile? NoIs surface water within 1/4 mile? NoIs groundwater less than 20 feet below ground surface? No

Other Potential Receptors within 1/4 mile

None

SITE INVESTIGATION PLAN

TYPE OF WASTE:

☐ E&P Waste

☐ Other E&P Waste

☒ Non-E&P Waste

☐ Produced Water

☐ Workover Fluids

Hydrocarbon Bearing Soil

☐ Oil

☐ Tank Bottoms

☐ Condensate

☐ Pigging Waste

☐ Drilling Fluids

☐ Rig Wash

☐ Drill Cuttings

☐ Spent Filters

☐ Pit Bottoms

☐ Other (as described by EPA)

DESCRIPTION OF IMPACT

Impacted?	Impacted Media	Extent of Impact	How Determined
No	SOILS	none	Excavation under PW tank

INITIAL ACTION SUMMARY

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

PW tank was removed and soil samples have been collected and came back clean. Area was backfilled and is in the process of being reseeded.

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):

Three soil samples were collected below and around the PW tank. Please see attached Report.

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 3

Number of soil samples exceeding 910-1 0

Was the areal and vertical extent of soil contamination delineated? Yes

Approximate areal extent (square feet) 0

NA / ND

ND Highest concentration of TPH (mg/kg)

NA Highest concentration of SAR

BTEX > 910-1 No

Vertical Extent > 910-1 (in feet) 0

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.

No Contamination. PW 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.

PW tank was removed and soil samples have been collected and came back clean. Area was backfilled and is in the process of being reseeded.

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.

REMEDATION 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.

PW tank was removed and soil samples have been collected and came back clean. Area was backfilled and is in the process of being reseeded.

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? Yes

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). 02/28/2018

Date of commencement of Site Investigation. 02/28/2018

Date of completion of Site Investigation. 02/28/2018

REMEDIAL ACTION DATES

Date of commencement of Remediation. 02/28/2018

Date of completion of Remediation. 02/28/2018

SITE RECLAMATION DATES

Date of commencement of Reclamation. 02/28/2018

Date of completion of Reclamation. 02/28/2018

OPERATOR COMMENT

Bayswater submits this Form 27 for a Tank Battery Removal and Request For Closure

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

Signed: Meagan M. Miller

Title: Environmental Specialist

Submit Date: 03/22/2018

Email: mmiller@bayswater.us

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: BOB CHESSON

Date: 03/22/2018

Remediation Project Number: 11118

COA Type**Description**

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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**

401583023	FORM 27-INITIAL-SUBMITTED
401583080	ANALYTICAL RESULTS
401583082	MAP

Total Attach: 3 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)