

State of Colorado
Oil and Gas Conservation Commission

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401557301
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Report taken by:
Jason Kosola

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 INFORMATON

Name of Operator: PIONEER NATURAL RESOURCES USA INC	Operator No: 10084	Phone Numbers
Address: 5205 N O'CONNOR BLVD STE 200		Phone: (719) 846-7898
City: IRVING State: TX Zip: 75039		Mobile: ()
Contact Person: Cheri Morgan	Email: cheri.morgan@pxd.com	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION
Remediation Project #: 9655 Initial Form 27 Document #: 200439540

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 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 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 Facilites (in accordance with Rule 909.c.)

Facility Type: PIT	Facility ID: 258353	API #: _____	County Name: LAS ANIMAS
Facility Name: CORA 21-19 PIT	Latitude: _____	Longitude: _____	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: _____	Sec: _____	Twp: _____	Range: _____ Meridian: _____ Sensitive Area? No

SITE CONDITIONS

General soil type - USCS Classifications CL Most Sensitive Adjacent Land Use RANGELAND

Is domestic water well within 1/4 mile? Yes Is surface water within 1/4 mile? Yes

Is groundwater less than 20 feet below ground surface? Yes

Other Potential Receptors within 1/4 mile

Nearest WW - 5150' (if DWR point is accurate). Nearest surface water - 720' (if live water present).

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	SOILS	0	Soil Sampling

INITIAL ACTION SUMMARY

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

Produced water from this well was being stored in this onsite pit. The well is no longer going to the pit. To investigate the soil quality in and around the production pit, we collected samples from top of pit and bottom of pit.

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):

To investigate the soil quality in and around the production pit, we collected grab samples from top of pit and bottom of pit. These samples were analyzed for Table 910-1 standards criteria.

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 2

Number of soil samples exceeding 910-1 1

Was the areal and vertical extent of soil contamination delineated? No

Approximate areal extent (square feet) 0

NA / ND

-- Highest concentration of TPH (mg/kg) 8

-- Highest concentration of SAR 14

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) 0

Number of groundwater monitoring wells installed 0

Number of groundwater samples exceeding 910-1 0

Highest concentration of Benzene (µg/l) 0

Highest concentration of Toluene (µg/l) 0

Highest concentration of Ethylbenzene (µg/l) 0

Highest concentration of Xylene (µg/l) 0

Highest concentration of Methane (mg/l) 0

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) 0

Volume of liquid waste (barrels) 0

Is further site investigation required?

REMEDIATION 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.

Produced water is not being sent to this pit and it is no longer needed.

REMEDICATION 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.

We will add two feet of clean soil to the bottom of the pit (see sourcing below). We will use the backhoe to blend the clean soil in with the bottom of the pit. Then the pit will be backfilled with remaining clean soil. Clean soil source: If backberm of pit exists, this material will be utilized to backfill pit. Native fill material may be collected from the recontouring of cut and fill slopes. Clean fill material will be brought onsite, if needed.

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.

It is not expected that produced water stored in this pit communicated with nor affected groundwater.

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: _____

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? No _____

Does the previous reply indicate consideration of background concentrations? _____

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

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 landowner has requested that the existing pond to the south of this well be left for rain water and snowmelt to collect for livestock and/or wildlife watering. Pioneer has also submitted a Form 4 variance request (Doc 401026402), along with a letter signed by the landowner. Pioneer would like to terminate the permit for this facility.

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). _____

Date of commencement of Site Investigation. 03/17/2016

Date of completion of Site Investigation. 03/17/2016

REMEDIAL ACTION DATES

Date of commencement of Remediation. _____

Date of completion of Remediation. _____

SITE RECLAMATION DATES

Date of commencement of Reclamation. 05/29/2016

Date of completion of Reclamation. 05/29/2016

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: Cheri Morgan

Title: Environmental Technician

Submit Date: 02/27/2018

Email: cheri.morgan@pxd.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: Jason Kosola

Date: 06/22/2018

Remediation Project Number: 9655

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>
401557301	FORM 27-SUPPLEMENTAL-SUBMITTED

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)