

State of Colorado Oil and Gas Conservation Commission

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401744808

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Report taken by:

CHRIS CANFIELD

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>EXTRACTION OIL & GAS INC</u>	Operator No: <u>10459</u>	Phone Numbers
Address: <u>370 17TH STREET SUITE 5300</u>		Phone: <u>(720) 481-2362</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Blake Ford</u>	Email: <u>bford@extractionog.com</u>	Mobile: <u>()</u>

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 11726Initial Form 27 Document #: 401744808

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 checked="" type="checkbox"/> Other <u>Facility decommissioning in support of final reclamation</u> |

SITE INFORMATION

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

Facility Type: <u>TANK BATTERY</u>	Facility ID: <u>-99999</u>	API #: <u></u>	County Name: <u></u>
Facility Name: <u></u>		Latitude: <u></u>	Longitude: <u></u>
		** correct Lat/Long if needed: Latitude: <u>40.276173</u>	Longitude: <u>-105.046272</u>
QtrQtr: <u></u>	Sec: <u></u>	Twp: <u></u>	Range: <u></u> Meridian: <u></u> Sensitive Area? <u>Yes</u>
Facility Type: <u>LOCATION</u>	Facility ID: <u>310550</u>	API #: <u></u>	County Name: <u>WELD</u>
Facility Name: <u>UHRICH S-64N68W 31SENW</u>		Latitude: <u>40.271050</u>	Longitude: <u>-105.047837</u>
		** correct Lat/Long if needed: Latitude: <u></u>	Longitude: <u></u>
QtrQtr: <u>SENW</u>	Sec: <u>31</u>	Twp: <u>4N</u>	Range: <u>68W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>
Facility Type: <u>LOCATION</u>	Facility ID: <u>310551</u>	API #: <u></u>	County Name: <u>WELD</u>
Facility Name: <u>UHRICH S-64N68W 31NWNW</u>		Latitude: <u>40.274592</u>	Longitude: <u>-105.052785</u>
		** correct Lat/Long if needed: Latitude: <u></u>	Longitude: <u></u>
QtrQtr: <u>NWNW</u>	Sec: <u>31</u>	Twp: <u>4N</u>	Range: <u>68W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

SITE CONDITIONS

General soil type - USCS Classifications SCMost Sensitive Adjacent Land Use CroplandIs domestic water well within 1/4 mile? NoIs surface water within 1/4 mile? No

Is groundwater less than 20 feet below ground surface? Yes

Other Potential Receptors within 1/4 mile

There is a residence located approximately 800 feet east of the tank battery.

SITE INVESTIGATION PLAN

TYPE OF WASTE:

☒ E&P Waste

☐ Other E&P Waste

☐ Non-E&P Waste

☒ Produced Water

☐ Workover Fluids

☐ 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
UNDETERMINED	SOILS	No known impacts	Investigation pending

INITIAL ACTION SUMMARY

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

This form has been prepared to support decommissioning and removal of the well site and production equipment associated with final reclamation of this location. In accordance with COGCC Rule 905.b, soil samples, and groundwater samples if present, will be collected during closure of the buried or partially buried produced water vessel to assure compliance with COGCC Table 910-1 allowable limits. The initial investigation will be conducted using excavation equipment. Field screening of disturbed soils will be conducted during equipment removal and plugging and abandonment (P&A) activities, and samples will be collected for laboratory analysis if any indications of impacts are identified. Identified impacts will be reported as required for each discovery, and a Form 19 will be submitted.

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):

If no suspected release is identified, one discrete grab soil sample will be collected from directly beneath the water vessel upon removal and submitted for laboratory analysis of organic constituents (TPH and BTEX) and inorganics (SAR, EC and pH). If a release is discovered and confirmed through soil screening and/or laboratory analysis, and/or groundwater is encountered during removal activities, additional excavations may be conducted to further delineate horizontally and vertically. If the extent of impacts is reached and/or remaining impact analytical results are needed for future remediation activities, discrete soil samples will be collected from the sidewalls and base (if groundwater is not present) and analyzed for organic (TPH and BTEX) and inorganic (SAR, EC and pH) constituents.

Proposed Groundwater Sampling

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

If groundwater is encountered during excavation activities, one sample will be collected and analyzed for BTEX.

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.

If a suspected release is identified, and confirmed through soil screening and/or laboratory analysis, during decommissioning of this facility, soils may be removed and transported to a licensed disposal facility. Transport and disposal records will be kept on file under usual and customary practice, and are available upon request. If all source material cannot be removed during excavation activities, additional methodologies will be proposed in subsequent proposals.

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.

As needed, site specific soil and/or groundwater remediation plans will be developed and submitted to COGCC via supplemental Form 27s.

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.

Reclamation activities will be completed in accordance with 1000 Series Rules, in collaboration with the landowner, and reported in a Form 4 (Sundry Notice) with proper documentation to demonstrate compliance with requirements for final reclamation.

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). 08/27/2018

Date of commencement of Site Investigation. _____

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

This form was prepared for the purpose of generating a remediation project number to support decommissioning of the well site and production equipment associated with final reclamation of this location. It is intended to meet the requirements of COGCC Rule 905.b for closure of a buried or partially buried produced water vessel. Should soil or groundwater impacts be identified during removal of the produced water vessel, or while decommissioning other related production equipment at this location, required notifications will be completed for each discovery, including preparation of a Form 19.

This form identifies multiple facilities since the partially buried produced water vessel is located on an unrecognized tank battery. Two wells are associated with this unrecognized tank battery, as indicated under Site Information. The referenced Location IDs on the attached site map corresponds to the associated wells. Please create a Facility ID and Location ID for the unrecognized tank battery with the lat/long referenced under Site Information.

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

Signed: ` Maggie Graham

Title: Senior Project Manager

Submit Date: ` 08/27/2018

Email: Maggie.Graham@apexcos.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: CHRIS CANFIELD

Date: 08/27/2018

Remediation Project Number: 11726

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**

401744808	FORM 27-INITIAL-SUBMITTED
401745040	SITE MAP
401745042	MAP

Total Attach: 3 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)