

State of Colorado Oil and Gas Conservation Commission

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Document Number:

401942362

Receive Date:

02/15/2019

Report taken by:

ROB YOUNG

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>PETRON DEVELOPMENT COMPANY</u>	Operator No: <u>69760</u>	Phone Numbers Phone: <u>(303) 794-5300</u> Mobile: <u>(303) 888-9473</u>
Address: <u>1899 W LITTLETON BLVD</u>		
City: <u>LITTLETON</u>	State: <u>CO</u> Zip: <u>80120</u>	
Contact Person: <u>Jimmy Walker</u>	Email: <u>jim@petron.net</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 12985Initial Form 27 Document #: 401942362

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 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>Close out facility number. Well was plugged. No pit at location.</u> |

SITE INFORMATION

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

Facility Type: <u>PIT</u>	Facility ID: <u>112735</u>	API #: _____	County Name: <u>YUMA</u>
Facility Name: <u>STANSFIELD 1-35</u>		Latitude: <u>40.091628</u>	Longitude: <u>-102.589470</u>
		** correct Lat/Long if needed: Latitude: _____	Longitude: _____
QtrQtr: <u>SESE</u>	Sec: <u>35</u>	Twp: <u>2N</u>	Range: <u>47W</u> Meridian: <u>6</u> Sensitive Area? <u>No</u>

SITE CONDITIONS

General soil type - USCS Classifications SCMost Sensitive Adjacent Land Use Irrigated Farm LandIs 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

Old ball valve and wellhead.

☐ 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	Visual and usage (none)

INITIAL ACTION SUMMARY

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

Petron assumed operaton in 1998.
We are not aware of a pit at this location.

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):

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.

N/A

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.

N/A

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

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

N/A

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? No

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.

There is no reclamation work planned.
Please see attached letter.

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? 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. 02/15/2019

Date of completion of Site Investigation. 02/15/2019

REMEDIAL ACTION DATES

Date of commencement of Remediation. 02/15/2019

Date of completion of Remediation. 02/15/2019

SITE RECLAMATION DATES

Date of commencement of Reclamation. 02/15/2019

Date of completion of Reclamation. 02/15/2019

OPERATOR COMMENT

Please see attached latter and forward to Rob Young.
Thank you.

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

Signed: Jimmy Walker

Title: Sec./Treas.

Submit Date: 02/15/2019

Email: jim@petron.net

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: ROB YOUNG

Date: 04/01/2019

Remediation Project Number: 12985

COA Type**Description**

	FI #688000288 found no indication of a pit, well or production facilities. Submit an eForm 27 requesting "no further action" for closure of this project and pit facility ID 112735.
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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**

401942362	FORM 27-INITIAL-SUBMITTED
401942394	CORRESPONDENCE

Total Attach: 2 Files

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

Environmental	Field Inspection #679901972 (10/25/2016) indicates "no surface indication of a pit".	02/20/2019
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Total: 1 comment(s)