

# State of Colorado Oil and Gas Conservation Commission

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05/21/2019

Report taken by:

RICK ALLISON

## 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 INFORMATION

Name of Operator: <u>SRC ENERGY INC</u>		Operator No: <u>10311</u>	<b>Phone Numbers</b>
Address: <u>1675 BROADWAY SUITE 2600</u>			Phone: <u>(970) 4755220</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>	Mobile: <u>( )</u>
Contact Person: <u>Dave Castro</u>		Email: <u>dcastro@srcenergy.com</u>	

### PROJECT, PURPOSE & SITE INFORMATION

#### PROJECT INFORMATION

Remediation Project #: 12297Initial Form 27 Document #: 401897317

#### PURPOSE INFORMATION

- |  |  |
|--|--|
| <input type="checkbox"/> 901.e. Sensitive Area Determination                                       | <input checked="" 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 checked="" 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 Facilities ( in accordance with Rule 909.c. )

Facility Type: <u>SPILL OR RELEASE</u>	Facility ID: <u>323373</u>	API #: _____	County Name: <u>WELD</u>
Facility Name: <u>SULLIVAN-66N66W 3SENW</u>		Latitude: <u>40.519183</u>	Longitude: <u>-104.767809</u>
		** correct Lat/Long if needed: Latitude: <u>40.519461</u>	Longitude: <u>-104.767825</u>
QtrQtr: <u>SENW</u>	Sec: <u>3</u>	Twp: <u>6N</u>	Range: <u>66W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

#### SITE CONDITIONS

General soil type - USCS Classifications SMMost Sensitive Adjacent Land Use croplandIs domestic water well within 1/4 mile? NoIs surface water within 1/4 mile? YesIs groundwater less than 20 feet below ground surface? Yes

Other Potential Receptors within 1/4 mile

## 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
Yes	GROUNDWATER	< 25' x 30'	sampling
Yes	SOILS	< 25' x 30'	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.

See documents for Spill ID 451307, as well as the site assessment report completed for the spill under the location's previous operator attached to document number 401897317.

### 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 ):

No further soil investigation is needed.

#### Proposed Groundwater Sampling

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

Quarterly groundwater monitoring for BTEX the first month of each quarter until 4 consecutive quarters of Table 910-1 compliance has been achieved. This is the 2nd consecutive quarter of Table 910-1 compliance.

#### 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? Yes

Approximate areal extent (square feet)

### NA / ND

NA Highest concentration of TPH (mg/kg)

NA Highest concentration of SAR

BTEX > 910-1 No

Vertical Extent > 910-1 (in feet)

### Groundwater

Number of groundwater samples collected 6

Was extent of groundwater contaminated delineated? Yes

Depth to groundwater (below ground surface, in feet) 7'

Number of groundwater monitoring wells installed 6

Number of groundwater samples exceeding 910-1 0

-- Highest concentration of Benzene (µg/l) 1.57

ND Highest concentration of Toluene (µg/l)

ND Highest concentration of Ethylbenzene (µg/l)

ND Highest concentration of Xylene (µg/l)

NA 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) 20

Volume of liquid waste (barrels) 0

☐ Is further site investigation required?

## REMEDIAL 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.

See the site assessment report completed for the spill under the location's previous operator attached to document 401897317.

### **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.

Site is stable and currently in compliance with Table 910-1 limits

### **Soil Remediation Summary**

#### ☐ In Situ

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

#### ☒ Ex Situ

Yes \_\_\_\_\_ Excavate and offsite disposal  
If Yes: Estimated Volume (Cubic Yards) \_\_\_\_\_ 20  
Name of Licensed Disposal Facility or COGCC Facility ID # \_\_\_\_\_  
No \_\_\_\_\_ 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.

Quarterly groundwater monitoring for BTEX the first month of each quarter until 4 consecutive quarters of Table 910-1 compliance has been achieved. This is the 2nd consecutive quarter of Table 910-1 compliance.

## 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? No \_\_\_\_\_

Do all soils meet Table 910-1 standards? \_\_\_\_\_

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? \_\_\_\_\_

Does Groundwater meet Table 910-1 standards? \_\_\_\_\_

Is additional groundwater monitoring to be conducted? \_\_\_\_\_

## 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.

Site is still active.

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). 01/23/2017

Date of commencement of Site Investigation. 01/10/2019

Date of completion of Site Investigation. 01/15/2019

### 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 SF27 is to report 2019Q2 quarterly groundwater monitoring. All MW results are within Table 910-1 compliance. This is the 2nd consecutive quarter of Table 910-1 compliance. The next quarterly groundwater monitoring sample event will take place in July 2019. All 2019Q2 figures, tables, and lab analytical report pages are attached in Tasman's 2019Q2 report.

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

Signed: Dave Castro

Title: Sr. Env. Specialist

Submit Date: 05/21/2019

Email: dcastro@srcenergy.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: 05/21/2019

Remediation Project Number: 12297

### 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

402051132	FORM 27-SUPPLEMENTAL-SUBMITTED
402051148	MONITORING REPORT

Total Attach: 2 Files

## General Comments

### User Group

### Comment

### Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)