

State of Colorado Oil and Gas Conservation Commission

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Document Number:

402352773

Receive Date:

03/27/2020

Report taken by:

ROB YOUNG

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>WESCO OPERATING INC</u>		Operator No: <u>95520</u>	Phone Numbers	
Address: <u>120 S DURBIN STREET</u>		Phone: <u>(307) 5775329</u>		
City: <u>CASPER</u>	State: <u>WY</u>	Zip: <u>82602</u>		Mobile: <u>()</u>
Contact Person: <u>Dave Weinert</u>		Email: <u>davew@kirkwoodcompanies.com</u>		

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 7987 Initial Form 27 Document #: 2146138

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 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 checked="" type="checkbox"/> Other <u>SPILL REMEDIATION</u> |

SITE INFORMATION

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

Facility Type: <u>TANK BATTERY</u>	Facility ID: <u>-99999</u>	API #: _____	County Name: <u>Washington</u>
Facility Name: <u>Rudnik 33-27 tank battery</u>		Latitude: <u>39.762882</u>	Longitude: <u>-103.067465</u>
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: _____	Sec: _____	Twp: _____	Range: _____
Meridian: _____		Sensitive Area? <u>Yes</u>	

SITE CONDITIONS

General soil type - USCS Classifications GP Most Sensitive Adjacent Land Use DRY LAND

Is domestic water well within 1/4 mile? No Is surface water within 1/4 mile? Yes

Is 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

☐ Oil

☐ Tank Bottoms

☐ Condensate

☐ Pigging Waste

☐ Drilling Fluids

☐ Rig Wash

☐ Drill Cuttings

☐ Spent Filters

☐ Pit Bottoms

☒ Other (as described by EPA) contaminated soils from within tank berm

DESCRIPTION OF IMPACT

Impacted?	Impacted Media	Extent of Impact	How Determined
Yes	SOILS	SURFACE SOILS WITHIN TANK BATTERY	SAMPLING - SEE LAB REPORT

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 FORM 19 SUBMITTED ON 6/7/2013. SPILL TRACKING NUMBER #2145279. See also Form 27 (document #2146138) submitted on 7/31/2013.

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):

See soil sample analysis previously completed and attached to this document. See attached email dated 1/2/2015 from Scott Kerr to Annie Eckman submiting the soil sample results. See also attached email from Scott Kerr to Rob Young dated 12/28/2015.

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 4

Number of soil samples exceeding 910-1 4

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

Approximate areal extent (square feet) 2500

NA / ND

ND Highest concentration of TPH (mg/kg)

-- Highest concentration of SAR 1.4

BTEX > 910-1 No

Vertical Extent > 910-1 (in feet) 2

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

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.

FREE LIQUIDS WERE RECOVERED BY A PUMP TRUCK AND PLACED INTO A TANK FOR REPROCESSING.

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.

This work has been completed. See attached email dated 1/2/2015 from Scott Kerr to Annie Eckman and email from Scott Kerr to Rob Young dated 12/28/2015.

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) _____ 129
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.

N/A

REMEDIATION PROGRESS UPDATE

PERIODIC REPORTING

Frequency: ☐ Quarterly ☐ Semi-Annually ☐ Annually ☒ Other spill closure request

Report Type: ☐ Groundwater Monitoring ☐ Land Treatment Progress Report ☐ O&M Report

☒ Other spill closure request

WASTE DISPOSAL INFORMATION

Was E&P waste generated as part of this remediation? Yes

Describe beneficial use, if any, of E&P Waste derived from this remediation project:

none

Volume of E&P Waste (solid) in cubic yards 129

E&P waste (solid) description contaminated soil from within tank battery

COGCC Disposal Facility ID #, if applicable:

Non-COGCC Disposal Facility: Buffalo Ridge

Volume of E&P Waste (liquid) in barrels 0

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? No

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.

Site is an operating tank battery.

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). _____

Date of commencement of Site Investigation. 07/01/2013 _____

Date of completion of Site Investigation. 07/01/2013 _____

REMEDIAL ACTION DATES

Date of commencement of Remediation. 09/01/2013 _____

Date of completion of Remediation. 12/10/2014 _____

SITE RECLAMATION DATES

Date of commencement of Reclamation. _____

Date of completion of Reclamation. _____

OPERATOR COMMENT

The soil analysis and soil sample location map attached to this document were previously submitted in 2015 to the COGCC as documented by the attached emails to Annie Eckman (dated 1/2/2015) and Rob Young (dated 12/28/2015). No groundwater samples were collected and soil impacted depth was shallow so groundwater is assumed to meet COGCC standards.

The only table 910 exceedences are arsenic (soil sample #1, #2, #3, 4). Given the narrow range of concentrations (1.6 ppm - 2.7 ppm), no other table 910 exceedences and the nd concentrations for BTEX, DRO and GRO in all the soil samples, Wesco believes that the arsenic values likely represent background conditions.

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

Signed: Dave Weinert

Title: HSE Coordinator

Submit Date: 03/27/2020

Email: davew@kirkwoodcompanies.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: ROB YOUNG

Date: 04/02/2020

Remediation Project Number: 7987

COA Type**Description**

	Based on the information presented, it appears that no further action is necessary at this time and the COGCC approves the closure request. However, should future conditions at the site indicate contaminant concentrations in soils exceeding COGCC standards or if ground water is found to be impacted, then further investigation and/or remediation activities may be required. In addition, the surface area disturbed by the remediation activity shall be reclaimed in accordance with the 1000 Series Reclamation Rules.
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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**

402352773	FORM 27-SUPPLEMENTAL-SUBMITTED
402352918	ANALYTICAL RESULTS
402352923	MAP
402352979	OTHER
402353848	OTHER
402353851	DISPOSAL MANIFESTS

Total Attach: 6 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)