

State of Colorado  
Oil and Gas Conservation Commission

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Report taken by:  
BOB CHESSON

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>RENEGADE OIL &amp; GAS COMPANY LLC</u>	Operator No: <u>74165</u>	<b>Phone Numbers</b>
Address: <u>6155 S MAIN STREET #225</u>		
City: <u>AURORA</u>	State: <u>CO</u>	Zip: <u>80016</u>
Contact Person: <u>Edward Ingve</u>	Email: <u>ed@renegadeoilandgas.com</u>	
	Phone: <u>(303) 680-4725</u>	
	Mobile: <u>(303) 829-2354</u>	

PROJECT, PURPOSE & SITE INFORMATION

**PROJECT INFORMATION**  
Remediation Project #: 13240 Initial Form 27 Document #: 402004565

**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 Facilities ( in accordance with Rule 909.c. )

Facility Type: <u>PIT</u>	Facility ID: <u>114590</u>	API #: _____	County Name: <u>ARAPAHOE</u>
Facility Name: <u>COX 1-8</u>	Latitude: <u>39.626105</u>	Longitude: <u>-104.360381</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>NWSW</u>	Sec: <u>8</u>	Twp: <u>5S</u>	Range: <u>62W</u>
Meridian: <u>6</u>	Sensitive Area? <u>No</u>		

**SITE CONDITIONS**

General soil type - USCS Classifications SC      Most Sensitive Adjacent Land Use Cropland

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

Is groundwater less than 20 feet below ground surface? No

**Other Potential Receptors within 1/4 mile**

# 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
Yes	SOILS	TBD	Soil Samples/Laboratory Analytical Results

## 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 provide notice of a follow-up investigation of two historical closed produced water pits affiliated with the production facility at the Cox 1-8 (API 05-005-06928). Both pits were initially closed at least 8 years ago. The COGCC has requested the investigation after reviewing aerial imagery and discovering COGCC record discrepancies. In accordance with COGCC Rule 905.b., soil samples and a groundwater sample (if present) will be collected following excavation of a pilot test over each pit to determine if soil and groundwater (if present) meet the concentrations of COGCC Table 910-1. Field screening of soils will be conducted during the digging of the pilot holes.

## 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 ):

Two samples were obtained and submitted for analysis. A soil sample was taken from just below the contaminated soil found while excavating each historical pit. Soil samples were analyzed for BTEX, TPH, GRO and DRO. Samples were also be tested for pH, EC and SAR.

### Proposed Groundwater Sampling

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

No groundwater was encountered during excavation. No sampling required.

### 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 2  
Was the areal and vertical extent of soil contamination delineated? Yes  
Approximate areal extent (square feet) 1200

### NA / ND

ND Highest concentration of TPH (mg/kg) \_\_\_\_\_  
-- Highest concentration of SAR 87  
BTEX > 910-1 No  
Vertical Extent > 910-1 (in feet) 10

### Groundwater

Number of groundwater samples collected 0  
Was extent of groundwater contaminated delineated? Yes  
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) 100      Volume of liquid waste (barrels) 0

Is further site investigation required?

Pit is being treated with gypsum and fresh water. New sample evaluating SAR will be collected in the future.

# 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.

If historical contamination is identified and confirmed through soil screening and/or laboratory analysis, soils will be removed and transported to a licensed disposal facility. Disposal records will be kept on file and available upon request.

## 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.

Potential impacts that meet the criteria in Rule 906.b. will be reported to the Director in accordance with that Rule and a site specific soil and/or groundwater remediation plan will be developed and submitted to the COGCC via a supplemental Form 27 in accordance with Rule 906.c. If reportable impacts are not encountered, a supplemental Form 27 requesting closure will be submitted within 90 days. Field screening and applicable laboratory analytical results will be reported in all submittals. E & P waste records of material transported off-site are kept on file and available upon request.

## 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.

# REMEDIATION PROGRESS UPDATE

## PERIODIC REPORTING

Frequency:  Quarterly  Semi-Annually  Annually  Other As necessary.

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? Yes \_\_\_\_\_

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

No beneficial use

Volume of E&P Waste (solid) in cubic yards \_\_\_\_\_ 54

E&P waste (solid) description \_\_\_\_\_ Unspecified Contaminated Soil

COGCC Disposal Facility ID #, if applicable: \_\_\_\_\_

Non-COGCC Disposal Facility: Waste Managements DADS landfill facility

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? 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.

The site will be reclaimed in accordance with COGCC 1000 Series Reclamation Rules.

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). 04/16/2019

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 27 is being filed to document soil samples that were recovered and analyzed from two historical pits from the Cox #1-8 production facility. The samples were taken after excavating contaminated soil from the former pits. Contaminated soil was hauled off to Waste Management's DADS facility. The samples found no hydrocarbon saturations remaining. SAR was elevated and is being addressed with gypsum and fresh water.

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

Signed: Edward Ingve

Title: Manager/Owner

Submit Date: 06/04/2020

Email: ed@renegadeoilandgas.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: BOB CHESSON

Date: 06/04/2020

Remediation Project Number: 13240

### 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>
402107609	FORM 27-SUPPLEMENTAL-SUBMITTED
402412663	ANALYTICAL RESULTS
402412666	ANALYTICAL RESULTS
402412903	DISPOSAL MANIFESTS

Total Attach: 4 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)