

State of Colorado Oil and Gas Conservation Commission

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06/16/2020

Report taken by:

Kari Oakman

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>PDC ENERGY INC</u>	Operator No: <u>69175</u>	Phone Numbers
Address: <u>1775 SHERMAN STREET - STE 3000</u>		Phone: <u>(303) 860-5800</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80203</u>
Contact Person: <u>Karen Olson</u>	Email: <u>COGCCSpillRemediation@pdce.com</u>	Mobile: <u>()</u>

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 12453 Initial Form 27 Document #: 401900186

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

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

Facility Type: <u>LOCATION</u>	Facility ID: <u>320229</u>	API #: _____	County Name: <u>ADAMS</u>
Facility Name: <u>MCELWAIN-61S67W 17SWNE</u>		Latitude: <u>39.968179</u>	Longitude: <u>-104.908042</u>
		** correct Lat/Long if needed: Latitude: <u>39.967867</u>	Longitude: <u>-104.908124</u>
QtrQtr: <u>SWNE</u>	Sec: <u>17</u>	Twp: <u>1S</u>	Range: <u>67W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>
Facility Type: <u>LOCATION</u>	Facility ID: <u>327357</u>	API #: _____	County Name: <u>WELD</u>
Facility Name: <u>BRIGGS AGGREGATE-61N67W 25SESW</u>		Latitude: <u>40.016979</u>	Longitude: <u>-104.841401</u>
		** correct Lat/Long if needed: Latitude: <u>40.016751</u>	Longitude: <u>-104.841353</u>
QtrQtr: <u>SESW</u>	Sec: <u>25</u>	Twp: <u>1N</u>	Range: <u>67W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>
Facility Type: <u>LOCATION</u>	Facility ID: <u>327807</u>	API #: _____	County Name: <u>WELD</u>
Facility Name: <u>SCHMIDT-61N67W 25SENE</u>		Latitude: <u>40.023959</u>	Longitude: <u>-104.832640</u>
		** correct Lat/Long if needed: Latitude: <u>40.023903</u>	Longitude: <u>-104.834689</u>
QtrQtr: <u>SENE</u>	Sec: <u>25</u>	Twp: <u>1N</u>	Range: <u>67W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

Facility Type:	LOCATION	Facility ID:	375942	API #:		County Name:	ADAMS
Facility Name:		MCELWAIN-61S67W 17NWSW		Latitude:	39.962870	Longitude:	-104.919720
				** correct Lat/Long if needed: Latitude:	39.960639	Longitude:	-104.918604
QtrQtr:	NWSW	Sec:	17	Twp:	1S	Range:	67W
				Meridian:	6	Sensitive Area?	Yes

SITE CONDITIONS

General soil type - USCS Classifications	SM	Most Sensitive Adjacent Land Use	Various
Is domestic water well within 1/4 mile?	Yes	Is surface water within 1/4 mile?	Yes
Is groundwater less than 20 feet below ground surface?	Yes		

Other Potential Receptors within 1/4 mile

Various

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

☐ Piggings 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	No Remaining Impacts	Site Investigation, Excavation, and 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.

As required by COGCC Rule 905.b., confirmation soil sampling was conducted when a buried or partially buried produced water vessel was removed from service. During the removal of the vessel, historic hydrocarbon impacts were discovered and reported via eForm 19. Excavation and sampling activities are summarized in the attached site-specific eForm 19s.

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):

Soil encountered in the excavation was field screened for volatile organic compound (VOC) concentrations using a photoionization detector (PID). Soil samples were collected from the excavation extent and submitted to Summit Scientific Laboratories (Summit) for analysis of benzene, toluene, ethylbenzene, total xylenes (BTEX), naphthalene, total petroleum hydrocarbons (TPH) – gasoline range organics (GRO) by EPA Method 8260B, and TPH – diesel range organics (DRO) by EPA Method 8015.

Proposed Groundwater Sampling

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

If groundwater was encountered below the vessel, a groundwater sample was collected and submitted to Summit for laboratory analysis of BTEX by EPA Method 8260B.

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 0

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

Approximate areal extent (square feet) 100

NA / ND

-- Highest concentration of TPH (mg/kg)

-- Highest concentration of SAR

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) 10'

Number of groundwater monitoring wells installed 0

Number of groundwater samples exceeding 910-1 0

-- 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.

Confirmation samples collected from the final excavation extent indicated that hydrocarbon impacts were successfully removed during excavation activities. Reference the attached site-specific approved No Further Action (NFA) requests.

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.

Reference the attached site-specific approved NFA requests.

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 Produced Water Vessel Closures

Report Type: ☐ Groundwater Monitoring ☐ Land Treatment Progress Report ☐ O&M Report ☒ Other Produced Water Vessel Closures

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? Yes _____

Do all soils meet Table 910-1 standards? Yes _____

Does the previous reply indicate consideration of background concentrations? No _____

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? Yes _____

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.

When the facility is decommissioned, the location will be reclaimed in accordance with COGCC 1000 Series rules.

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? _____

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. 01/01/2014

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

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

Signed: Karen Olson

Title: Snr. Program Manager

Submit Date: 06/16/2020

Email: COGCCSpillRemediation@pdce.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: Kari Oakman

Date: 06/16/2020

Remediation Project Number: 12453

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 groundwater is found to be impacted, then further investigation and/or remediation activities may be required.
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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

402423888	FORM 27-SUPPLEMENTAL-SUBMITTED
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)