

# State of Colorado Oil and Gas Conservation Commission

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Document Number:

402503636

Receive Date:

Report taken by:

## 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: BP AMERICA PRODUCTION COMPANY	Operator No: 10000	<b>Phone Numbers</b>
Address: 1199 MAIN AVENUE SUITE 101		Phone: (505) 330-9179
City: DURANGO	State: CO	Zip: 81301
Contact Person: Steve Moskal	Email: steven.moskal@bpx.com	Mobile: (505) 330-9179

### PROJECT, PURPOSE & SITE INFORMATION

#### PROJECT INFORMATION

Remediation Project #: 15511

Initial Form 27 Document #: 402392608

#### 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 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: SPILL OR RELEASE	Facility ID: 474977	API #:	County Name: LA PLATA
Facility Name: Tiffany Gathering		Latitude: 37.063493	Longitude: -107.532312
		** correct Lat/Long if needed: Latitude:	Longitude:
QtrQtr: SWNW	Sec: 32	Twp: 33N	Range: 6W
		Meridian: N	Sensitive Area? Yes

#### SITE CONDITIONS

General soil type - USCS Classifications SC

Most Sensitive Adjacent Land Use Agricultural

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

Artificial wetland induced by irrigation water collection point.

# 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	SOILS	Release point and wetland	Lab analysis

## INITIAL ACTION SUMMARY

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

Soil sampling and water sampling to determine impacts and extents. Only the soil sample from the release point exceeded the COGCC standards for Sodium Absorption Ratio in the field. Soil samples collected from the wetland area are elevated on boron, electrical conductivity and SAR. I believe this to be a collection point of the property and these levels are not fully related to the produced water release and are influenced by agricultural activities.

## 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 ):

Continued monitoring of release point and wetland.

### 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 ):

Vegetation monitoring of release extents.

# SITE INVESTIGATION REPORT

## SAMPLE SUMMARY

### Soil

Number of soil samples collected 7

Number of soil samples exceeding 910-1 3

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

Approximate areal extent (square feet) 6500

### NA / ND

ND Highest concentration of TPH (mg/kg)         

-- Highest concentration of SAR 20.4

BTEX > 910-1 No

Vertical Extent > 910-1 (in feet) 6

### 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

3 Number of surface water samples collected

0 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?

Soil sample SS04

☐ 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.

Source has been removed. This was a temporary flow that was immediately isolated. Only residual impacts remain for EC, SAR, pH and boron.

## **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.

Propose vegetation monitoring; Removal of the topsoil as it will likely bring in weeds and other invasive species as well as damage the root system of the existing, established, vegetation.

## **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.

## REMEDATION PROGRESS UPDATE

### PERIODIC REPORTING

**Frequency:** ☐ Quarterly ☐ Semi-Annually ☐ Annually ☒ Other Monthly

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

☒ Other Vegetation Monitoring

### 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: \_\_\_\_\_

## REMEDATION COMPLETION REPORT

### REMEDATION 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.

No reclamation is necessary unless excavation is required at a later date.

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. 04/08/2020

Actual Spill or Release date, if known. 04/08/2020

### **SITE INVESTIGATION DATES**

Date of Initial Actions described in Site Investigation Plan (start date). 04/08/2020

Date of commencement of Site Investigation. 04/08/2020

Date of completion of Site Investigation. 04/24/2020

### **REMEDIAL ACTION DATES**

Date of commencement of Remediation. 04/24/2020

Date of completion of Remediation. \_\_\_\_\_

### **SITE RECLAMATION DATES**

Date of commencement of Reclamation. \_\_\_\_\_

Date of completion of Reclamation. \_\_\_\_\_

### **OPERATOR COMMENT**

Attached is the September vegetation monitoring report. A final vegetation monitoring is scheduled for October 2020. Closure request will likely follow.

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

Signed: Steve Moskal

Title: Enviro Coord

Submit Date: \_\_\_\_\_

Email: steven.moskal@bpx.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: \_\_\_\_\_

Date: \_\_\_\_\_

Remediation Project Number: 15511

### **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**

402503638	MONITORING REPORT
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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)