

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:  
402673174

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: NOBLE ENERGY INC	Operator No: 100322	<b>Phone Numbers</b>
Address: 1001 NOBLE ENERGY WAY		Phone: (970) 3045329
City: HOUSTON State: TX Zip: 77070		Mobile: ( )
Contact Person: Jacob Evans	Email: jacob.evans@chevron.com	

PROJECT, PURPOSE & SITE INFORMATION

**PROJECT INFORMATION**  
Remediation Project #: 13785 Initial Form 27 Document #: 402093901

**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 type="checkbox"/> Other _____

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

Facility Type: SPILL OR RELEASE	Facility ID: 464229	API #: _____	County Name: WELD
Facility Name: UPRC 33-4F,5F	Latitude: 40.269523	Longitude: -104.791329	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SWNW	Sec: 33	Twp: 4N	Range: 66W Meridian: 6 Sensitive Area? Yes

SITE CONDITIONS

General soil type - USCS Classifications SW      Most Sensitive Adjacent Land Use Non-Crop Land

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

Wetlands 330', Occupied Building 370'

# 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 checked="" type="checkbox"/> Oil            | <input type="checkbox"/> Tank Bottoms                |  |
| <input checked="" 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	GROUNDWATER	TBD	Groundwater Site Assessment
No	SOILS	NA	Laboratory Analytical

## **INITIAL ACTION SUMMARY**

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

During decommissioning operations near the separator crew was removing flow line risers and discovered impacted media. Confirmation sidewall excavation samples were collected above the phreatic zone and submitted under proper chain of custody procedures to Summit Scientific for analysis of TPH-DRO, TPH-GRO, BTEX, and Naphthalene by EPA Methods 8015 and 8260b. A base groundwater sample was also collected and analyzed for BTEX.

## **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 ):

Six grab soil samples were collected during site investigation activities and submitted to Summit Scientific for analysis of TPH-DRO by EPA Method 8015, TPH-GRO, BTEX, and Naphthalene by EPA Method 8260b.

### **Proposed Groundwater Sampling**

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

One grab groundwater sample was collected and submitted to Summit Scientific for 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 6  
Number of soil samples exceeding 910-1 0  
Was the areal and vertical extent of soil contamination delineated? Yes  
Approximate areal extent (square feet) 0

### NA / ND

-- Highest concentration of TPH (mg/kg) 72  
NA Highest concentration of SAR           
BTEX > 910-1 No  
Vertical Extent > 910-1 (in feet) 0

### Groundwater

Number of groundwater samples collected 1  
Was extent of groundwater contaminated delineated? Yes  
Depth to groundwater (below ground surface, in feet) 2'  
Number of groundwater monitoring wells installed 0  
Number of groundwater samples exceeding 910-1 1

-- Highest concentration of Benzene (µg/l) 410  
-- Highest concentration of Toluene (µg/l) 340  
-- Highest concentration of Ethylbenzene (µg/l) 68  
-- Highest concentration of Xylene (µg/l) 1500  
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)          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.

During site assessment activities absorbed impacts remain in the vadose zone around SS11@3'. A passive soil vapor extraction well will be installed in the vicinity of SS11@3' to aid in soil remediation.

## **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.

No further remediation is necessary.

## **Soil Remediation Summary**

**In Situ**

**Ex Situ**

No \_\_\_\_\_ Bioremediation ( or enhanced bioremediation )

\_\_\_\_\_ Excavate and offsite disposal

No \_\_\_\_\_ Chemical oxidation

\_\_\_\_\_ If Yes: Estimated Volume (Cubic Yards) \_\_\_\_\_

No \_\_\_\_\_ Air sparge / Soil vapor extraction

\_\_\_\_\_ Name of Licensed Disposal Facility or COGCC Facility ID # \_\_\_\_\_

Yes \_\_\_\_\_ Natural Attenuation

\_\_\_\_\_ Excavate and onsite remediation

No \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ 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

Yes \_\_\_\_\_ 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.

Eight groundwater monitoring wells (BH01-BH08) will be sampled by Tasman Geosciences on a quarterly basis. Groundwater samples will be transported to a certified laboratory under standard chain of custody procedures for analysis of BTEX by EPA Method 8260b. Four consecutive quarters of COGCC compliant groundwater has been achieved.

# REMEDATION PROGRESS UPDATE

## PERIODIC REPORTING

Frequency:  Quarterly  Semi-Annually  Annually  Other \_\_\_\_\_

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

Other NFAR \_\_\_\_\_

## WASTE DISPOSAL INFORMATION

Was E&P waste generated as part of this remediation? No

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? 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? 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.

Reclamation will be in accordance with COGCC 1004 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. 05/25/2020

Actual Spill or Release date, if known. \_\_\_\_\_

### **SITE INVESTIGATION DATES**

Date of Initial Actions described in Site Investigation Plan (start date). 04/18/2019

Date of commencement of Site Investigation. \_\_\_\_\_

Date of completion of Site Investigation. 04/18/2019

### **REMEDIAL ACTION DATES**

Date of commencement of Remediation. 07/22/2019

Date of completion of Remediation. 04/02/2021

### **SITE RECLAMATION DATES**

Date of commencement of Reclamation. 04/18/2019

Date of completion of Reclamation. 04/02/2021

### **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: Jacob Evans

Title: Environmental Specialist

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

Email: jacob.evans@chevron.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: 13785

### **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**

402673194	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)