

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:

402673322

Receive Date:

04/28/2021

Report taken by:

RICK ALLISON

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: WHITING OIL & GAS CORPORATION	Operator No: 96155	Phone Numbers Phone: (970) 4374113 Mobile: (432) 6616647
Address: 1700 LINCOLN STREET SUITE 4700		
City: DENVER	State: CO Zip: 80290	
Contact Person: Kyle Waggoner	Email: kyle.waggoner@whiting.com	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 17242

Initial Form 27 Document #: 402607966

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 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 Rule 911.a Facility Closure |

SITE INFORMATION

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

Facility Type: LOCATION	Facility ID: 420168	API #:	County Name: WELD
Facility Name: Chalk Bluffs 36-13H		Latitude: 40.791140	Longitude: -104.046580
		** correct Lat/Long if needed: Latitude:	Longitude:
QtrQtr: NWSW	Sec: 36	Twp: 10N	Range: 60W Meridian: 6 Sensitive Area? Yes

SITE CONDITIONS

General soil type - USCS Classifications ML

Most Sensitive Adjacent Land Use Livestock Grazing

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 type="checkbox"/> E&P Waste	<input type="checkbox"/> Other E&P Waste	<input checked="" type="checkbox"/> Non-E&P Waste
<input type="checkbox"/> Produced Water	<input type="checkbox"/> Workover Fluids	None anticipated
<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
No	SOILS	No known impacts are present	Field screening via PID and EC meter

INITIAL ACTION SUMMARY

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

After removing the onsite equipment and prior to backfilling any open excavations each area (below tanks, separator, well head, gas sales meter, flowlines, combustor, flare, and any other areas discovered during site inspection) will be field screened via visual inspection, PID, and an EC meter. At a minimum one grab sample will be collected (regardless of field screening results) from the following locations (see site map): below all of the AST's (one produced water tank and three crude oil tanks), well head, flowline trench, and the separator) and submitted for laboratory analysis. Soil samples in areas that demonstrate evidence of a release will be analyzed for Table 915-1 to confirm that any potential impacts are < Table 915-1 Concentrations Levels. In the absence of evidence of a release, soil samples will be analyzed for TPH (C6-C36), BTEX, 1,2,4-trimethylbenzene, and 1,3,5-trimethylbenzene. In areas where produced water was stored, transported, or processed soil samples will be analyzed for the soil suitability parameters pH, EC, SAR and boron in addition to the above parameters.

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):

A minimum of 7 grab samples will be collected during the site assessment as described in the initial action summary section. In the event no elevated field screening are observed from these 7 areas the area most likely to be impacted based upon facility layout will be collected and submitted for lab analysis. In addition, while field screening the remaining site if evidence of a release has occurred more samples will be collected as described above.

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 8

Number of soil samples exceeding 910-1 2

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

Approximate areal extent (square feet) 0

NA / ND

ND Highest concentration of TPH (mg/kg)

-- Highest concentration of SAR 2.36

BTEX > 910-1 No

Vertical Extent > 910-1 (in feet) 0

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?

A discrete background sample was collected and analyzed for EC, SAR, pH, and Boron.

☐ 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.

No source removal has occurred and is not anticipated to occur, however if impacts are discovered we will proceed via Form 19 cleanup and reporting protocols.

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.

No remediation activities have occurred at this location.

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 _____

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? _____

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? 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? 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.

The location will be reclaimed to the present grade of the location or to the approximate original contour of the landscape and consistent with the 1000-series Rule. Seeding of the disturbed area will be performed in accordance with its intended use. The seed mix will be prescribed by the landowner. There are no known noxious weeds in the immediate area of the disturbance.

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. 01/05/2021

Actual Spill or Release date, if known. _____

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 03/11/2021

Date of commencement of Site Investigation. 03/15/2021

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. 05/03/2021

Date of completion of Reclamation. 05/28/2021

OPERATOR COMMENT

During the site assessment visual and field screening data indicated that a release had not occurred at this location. In addition, the resulting laboratory data indicates all organics were below detection level. All inorganics were below table 915-1 except for the background and SS-1 samples were above table 915-1 for pH. The pH levels in the native soils in our area of operations north of New Raymer are typically 9 and higher as indicated by the background sample from this site. In addition, after final reclamation the area of SS-1 will be > 8' below ground level.

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

Signed: ` Kyle Waggoner

Title: Reclamation Coordinator

Submit Date: ` 04/28/2021

Email: kyle.waggoner@whiting.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: RICK ALLISON

Date: 05/10/2021

Remediation Project Number: 17242

Condition of Approval**COA Type****Description**

	Closure request removed.
	The pH of soil samples collected at the site exceeds the allowable level for Table 915-1 soil suitability for reclamation for pH and exceeds the background sample presented. Therefore, if Operator proposes to leave soil with elevated pH in place, Operator will submit a Reclamation plan pursuant to Rule 915.b.
2 COAs	

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**

402673322	FORM 27-SUPPLEMENTAL-SUBMITTED
402673431	ANALYTICAL RESULTS
402673432	ANALYTICAL RESULTS
402673439	ANALYTICAL RESULTS
402673441	AERIAL IMAGE
402673447	SOIL SAMPLE LOCATION MAP
402673450	MAP

Total Attach: 7 Files

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

		Stamp Upon Approval
--	--	---------------------

Total: 0 comment(s)