

State of Colorado Oil and Gas Conservation Commission

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04/14/2021

Report taken by:

KRIS NEIDEL

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>KP KAUFFMAN COMPANY INC</u>	Operator No: <u>46290</u>	Phone Numbers
Address: <u>1675 BROADWAY, STE 2800</u>		Phone: <u>(303) 8254822</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Jeff Rickard</u>	Email: <u>jrickard@kpk.com</u>	Mobile: <u>()</u>

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 11881Initial Form 27 Document #: 401766907

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 <u>Quarterly update required by rule</u> |

SITE INFORMATION

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

Facility Type: <u>SPILL OR RELEASE</u>	Facility ID: <u>452051</u>	API #: <u></u>	County Name: <u>JACKSON</u>
Facility Name: <u>DAKLAK Flowline</u>		Latitude: <u>40.778298</u>	Longitude: <u>-106.263055</u>
** correct Lat/Long if needed: Latitude: <u></u>		Longitude: <u></u>	
QtrQtr: <u>NESE</u>	Sec: <u>4</u>	Twp: <u>9N</u>	Range: <u>79W</u>
Meridian: <u>6</u>		Sensitive Area? <u>Yes</u>	

SITE CONDITIONS

General soil type - USCS Classifications CLMost Sensitive Adjacent Land Use RangelandIs domestic water well within 1/4 mile? NoIs surface water within 1/4 mile? NoIs groundwater less than 20 feet below ground surface? No

Other Potential Receptors within 1/4 mile

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	300'x75'	Soil Samples

INITIAL ACTION SUMMARY

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

The spill occurred during prior operator. Most of the impact remained at surface and it was removed immediately.

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):

Since taking over from prior operator, KPK has tilled the surface and will collect samples

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 10

Number of soil samples exceeding 910-1 9

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

Approximate areal extent (square feet) 22500

NA / ND

-- Highest concentration of TPH (mg/kg) 1200

-- Highest concentration of SAR 48.9

BTEX > 910-1 Yes

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) 30'

Number of groundwater monitoring wells installed 0

Number of groundwater samples exceeding 910-1 0

NA Highest concentration of Benzene (µg/l)

NA Highest concentration of Toluene (µg/l)

NA Highest concentration of Ethylbenzene (µg/l)

NA Highest concentration of Xylene (µg/l)

NA Highest concentration of Methane (mg/l)

Surface Water

0 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?

☐ 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?

Tilling activities have resulted in increased alkali occurring at ground surface. Background samples need to be collected to determine if high SAR and EC are a result of the release or is a result of the native soil within the release area.

REMEDIAL ACTION PLAN

Does this Supplemental Form 27A include changes to a previously approved Remedial Action Plan? Yes _____

SOURCE REMOVAL SUMMARY

Describe how source is to be removed.

Soil will be periodically tilled. Field screening will be performed to determine current condition of the soil. If contamination is still present, soil will be removed and disposed of it at the Central Waste Site for the lease.

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.

Based on analytical results of soil samples collected 9/26/2018, additional remediation work is necessary at the release point and associated release area. Additional tilling activities will occur in 2020 and 2021 to continue remediation of impacted area. Soil samples will be collected August 2021 to review remediation progress. Per BLM COAs, not dirt is allowed between March 1st - June 30th.

Soil Remediation Summary

☒ In Situ

No Bioremediation (or enhanced bioremediation) _____

No Chemical oxidation _____

No Air sparge / Soil vapor extraction _____

Yes Natural Attenuation _____

No 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 _____

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? 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? 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 vertical extend of the contamination was minimal. No recontouring will be necessary.

Is the described reclamation complete? No

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? Yes

If NO, does the seed mix comply with local soil conservation district recommendations? Yes

IMPLEMENTATION SCHEDULE

PRIOR DATES

Date of Surface Owner notification/consultation, if required. _____

Actual Spill or Release date, if known. 09/02/2017

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 09/02/2017

Date of commencement of Site Investigation. 09/05/2017

Date of completion of Site Investigation. 09/08/2017

REMEDIAL ACTION DATES

Date of commencement of Remediation. 09/05/2017

Date of completion of Remediation. _____

SITE RECLAMATION DATES

Date of commencement of Reclamation. _____

Date of completion of Reclamation. _____

OPERATOR COMMENT

This form is being submitted as the quarterly update required by rule. Currently KPK has seven open remediation projects in the field. As of April 15th, the ground will still be frozen, and no excavation work is possible. KPK is currently planning on removing all impacted soil and will attempt to close out as many open remediation projects as possible this season. It is anticipated that the ground will be thawed on or by June 1st, KPK currently has crews scheduled to start work on that date. KPK will be submitting updated quarterly updates by July 15th, which will include updates on the progress of all seven open remediation projects.

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

Signed: Jeff Rickard

Title: Regulatory

Submit Date: 04/14/2021

Email: jrickard@kpk.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: KRIS NEIDEL

Date: 08/03/2021

Remediation Project Number: 11881

Condition of Approval

COA Type

Description

	The next quarterly report shall use the Implementation Schedule portion of this form.
1 COA	

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

402657858	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)