

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
402775547
Receive Date:
08/11/2021

Report taken by:
John Heil

Site Investigation and Remediation Workplan (Initial 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.

Closure request is not available for an Initial Site Investigation and Remediation Workplan.

OPERATOR INFORMATION

Name of Operator: UTAH GAS OP LTD DBA UTAH GAS CORP	Operator No: 10539	Phone Numbers Phone: (720) 4250303 Mobile: ()
Address: 760 HORIZON DRIVE STE 400		
City: GRAND JUNCTION	State: CO	Zip: 81506
Contact Person: Rob Bleil	Email: rbleil@utahgascorp.com	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 19570 Initial Form 27 Document #: 402775547

PURPOSE INFORMATION

- Rule 913.c.(1): Pit or Cuttings Trench closure.
- Rule 913.c.(2): Buried or partially buried vessel closure, which will be by removal.
- Rule 913.c.(3): Remediation of Spill and Releases pursuant to Rule 912.
- Rule 913.c.(4): Land treatment of Oily Waste pursuant to Rule 905.e.
- Rule 913.c.(5): Closure of Centralized E&P Waste Management Facilities pursuant to Rule 907.h.
- Rule 913.c.(6): Remediation of impacted Groundwater pursuant to Rule 915.e.(3).D, and the contaminant concentrations in Table 915-1.
- Rule 913.c.(7): Investigation and remediation of natural gas in soil or Groundwater.
- Rule 913.c.(8): When requested by the Director due to any potential risk to soil, Groundwater, or surface water.
- Rule 913.c.(9): Decommissioning of Oil and Gas Facilities.
- Rule 913.g: Changes of Operator.
- Rule 915.b: Request to leave elevated inorganics in situ.
- Other: _____

SITE INFORMATION

Yes Multiple Facilities

Facility Type: PIT	Facility ID: 112998	API #: _____	County Name: RIO BLANCO
Facility Name: FEDERAL K-26-3-101-S		Latitude: 39.756661	Longitude: -108.700307
		** correct Lat/Long if needed: Latitude: _____	Longitude: _____
QtrQtr: NESW	Sec: 26	Twp: 3S	Range: 101W Meridian: 6 Sensitive Area? No
Facility Type: WELL	Facility ID: _____	API #: 103-08345	County Name: RIO BLANCO
Facility Name: FEDERAL K-26-3-101-S		Latitude: 39.756734	Longitude: -108.701900
		** correct Lat/Long if needed: Latitude: _____	Longitude: _____
QtrQtr: NESW	Sec: 26	Twp: 3S	Range: 101W Meridian: 6 Sensitive Area? No

Facility Type: LOCATION Facility ID: 397910 API #: County Name: RIO BLANCO
Facility Name: FEDERAL-63S101W 26NESW Latitude: 39.756734 Longitude: -108.701900
** correct Lat/Long if needed: Latitude: Longitude:
QtrQtr: NESW Sec: 26 Twp: 3S Range: 101W Meridian: 6 Sensitive Area? No

SITE CONDITIONS

General soil type - USCS Classifications GC Most Sensitive Adjacent Land Use Non-crop Land

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

The nearest receptors from site are a dry drainage ~ 2,211' to the east and a monitoring well ~ 2.16 miles to the southeast. No receptors are within quarter mile of site.

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 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
UNDETERMINED	SOILS	TBD	Sampling and 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.

This form is being submitted to comply with COGCC Rule 911.a (4) and provide initial notification of the facility closure for the K-26-3-101 Site. Initial action will consist of site investigation actions as outlined within COGCC Rule 913.b, as well as within the proposed sampling section below.

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):

Utah Gas Corp will excavate the Federal K26 wellhead and visually inspect the base and side walls for signs of hydrocarbon impacts. Any flowlines encountered will be investigated to same degree of the wellhead. Field screening will consist of a PID and/or Petroflag Hydrocarbon Analyzer. If field screening indicates impacts to soil, the interval containing the highest degree of impacts based on field screening will be submitted for laboratory analysis of the full list of constituents listed in COGCC Table 915-1. If results confirm that soils exceed COGCC Table 915-1, information will be provided via Supplemental Form 27 with the proposed remediation.

If field screening indicates a negative hydrocarbon presence, UGC is requesting to submit one discrete (1) sample from the areas below the equipment for a reduced analyte list consisting of TPH (DRO/GRO/ORO), BTEX and inorganic (SAR/EC/pH).

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):

Aerial imagery and on-site inspection did not identify any other equipment on the working surface of site.

SITE INVESTIGATION REPORT

SAMPLE SUMMARY

Soil

NA / ND

Number of soil samples collected 0

Highest concentration of TPH (mg/kg)

Number of soil samples exceeding 915-1 _____

Highest concentration of SAR _____

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

BTEX > 915-1 _____

Approximate areal extent (square feet) _____

Vertical Extent > 915-1 (in feet) _____

Groundwater

Number of groundwater samples collected _____ 0

Highest concentration of Benzene (µg/l) _____

Was extent of groundwater contaminated delineated? No _____

Highest concentration of Toluene (µg/l) _____

Depth to groundwater (below ground surface, in feet) _____

Highest concentration of Ethylbenzene (µg/l) _____

Number of groundwater monitoring wells installed _____

Highest concentration of Xylene (µg/l) _____

Number of groundwater samples exceeding 915-1 _____

Highest concentration of Methane (mg/l) _____

Surface Water

_____ 0 Number of surface water samples collected

_____ Number of surface water samples exceeding 915-1

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?

Three (3) background samples will be collected from nearby undisturbed soil and analyzed for arsenic and inorganics (SAR/EC/pH)

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

SOURCE REMOVAL SUMMARY

Describe how source is to be removed.

TBD - At this time there is no identified source to be removed.

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.

TBD - remediation will be based on results from the initial sampling.

Soil Remediation Summary

In Situ

Ex Situ

_____ Bioremediation (or enhanced bioremediation)

_____ Excavate and offsite disposal

_____ Chemical oxidation

_____ If Yes: Estimated Volume (Cubic Yards) _____

_____ Air sparge / Soil vapor extraction

_____ Name of Licensed Disposal Facility or COGCC Facility ID # _____

_____ Natural Attenuation

_____ Excavate and onsite remediation

_____ Other _____

_____ 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.

Groundwater impacts are not anticipated at this time.

REMEDIATION PROGRESS UPDATE

PERIODIC REPORTING

Approved Reporting Schedule:

Quarterly Semi-Annually Annually Other _____

Request Alternative Reporting Schedule:

Semi-Annually Annually Other _____

Rule 913.e:

After initial approval of a Form 27, the Operator will provide quarterly update reports in a Supplemental Form 27 to document progress of site investigation and remediation, unless an alternative reporting schedule has been requested by the Operator and approved by the Director. The Director may request a more frequent reporting schedule based on site-specific conditions.

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: _____

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 conducted as outlined within the COGCC 1000 series rules and in accordance with the Bureau of Land Management (BLM) surface use plan of operations (SUPO).

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 provide the seed mix? _____

If YES, does the seed mix comply with local soil conservation district recommendations? _____

Did the local soil conservation district provide the seed mix? _____

SITE RECLAMATION DATES

Proposed date of commencement of Reclamation. _____

Proposed date of completion of Reclamation. _____

IMPLEMENTATION SCHEDULE

Per Rule 913.d.(2): Any change from the approved implementation schedule will be requested at least 14 days in advance, and the Operator may not make the change without the Director's approval.

PRIOR DATES

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

Actual Spill or Release date, or date of discovery. _____

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 08/23/2021

Proposed site investigation commencement. 08/23/2021

Proposed completion of site investigation. _____

REMEDIAL ACTION DATES

Proposed start date of Remediation. _____

Proposed date of completion of Remediation. _____

Per Rule 913.d.(2): Any change from the approved implementation schedule will be requested at least 14 days in advance, and the Operator may not make the change without the Director's approval.

Change from approved implementation schedule per Rule 913.d.(2).

Basis for change in implementation schedule:

OPERATOR COMMENT

This initial Form 27 is being submitted to provide notification of the facility closure at the Utah Gas Corp (UGC) Federal K-26 location and request a REM# be assigned. Once approved, initial site investigation actions will be conducted as outlined within this Form 27. If impacts are observed during investigation, information will be provided within a supplemental form 27 with the proposed remediation actions. UGC has supplied a pit inventory list regarding PIT ID 112998, that records state is was never used from previous operations. UGC is requesting closure of PIT ID 112998. It is believed the pit was constructed but never used.

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

Signed: Matt Kasten

Title: Env. Consultant

Submit Date: 08/11/2021

Email: mkasten@entradainc.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: John Heil

Date: 08/11/2021

Remediation Project Number: 19570

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

<u>COA Type</u>	<u>Description</u>
0 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**

402775547	FORM 27-INITIAL-SUBMITTED
402775600	MAP
402775601	SOIL SAMPLE LOCATION MAP
402775602	OTHER

Total Attach: 4 Files

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

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)