

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
402855852
Receive Date:
11/01/2021

Report taken by:
Candice (Nikki) Graber

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

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 20638 Initial Form 27 Document #: 402855852

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: <u>LOCATION</u>	Facility ID: <u>328833</u>	API #: _____	County Name: <u>WELD</u>
Facility Name: <u>THISTLE DOWN PC F36-69HC</u>	Latitude: <u>40.365440</u>	Longitude: <u>-104.604880</u>	
	** correct Lat/Long if needed: Latitude: <u>40.367084</u>	Longitude: <u>-104.605413</u>	
QtrQtr: <u>SESE</u> Sec: <u>25</u> Twp: <u>5N</u> Range: <u>65W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>			

Facility Type: <u>WELL</u>	Facility ID: _____	API #: <u>123-36391</u>	County Name: <u>WELD</u>
Facility Name: <u>THISTLE DOWN STATE PC F36-69HN</u>	Latitude: <u>40.366000</u>	Longitude: <u>-104.605121</u>	
	** correct Lat/Long if needed: Latitude: _____	Longitude: _____	
QtrQtr: <u>SESE</u> Sec: <u>25</u> Twp: <u>5N</u> Range: <u>65W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>			

SITE CONDITIONS

General soil type - USCS Classifications SW _____

Most Sensitive Adjacent Land Use 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? No _____

Other Potential Receptors within 1/4 mile

FACILITY: Riverine 0.15mi S
Structures 0.18/0.22mi S, 0.17mi E, 0.08mi NE, 0.21mi W
WELL: Riverine 0.07mi S
Structures 0.11/0.15mi S, 0.13mi NE, 0.19mi E, 0.21mi W, 0.21mi SW

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 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	GROUNDWATER	NA	Lab analysis if encountered
UNDETERMINED	SOILS	NA	Lab analysis if encountered

INITIAL ACTION SUMMARY

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

FACILITY: A site investigation will be conducted pursuant to COGCC Rule 911 at the THISTLE DOWN ST T5N-R65W-S25 L01 Tank Battery location.
 WELL: Pursuant to COGCC Rule 911 a site investigation will be conducted pertaining to the THISTLE DOWN STATE PC F36-69HN wellhead cut and cap and flowline removal. Approximately 400' of flowline will be removed at a later date. The COGCC will be updated in a supplemental Form 27 if a portion of the flowline is abandoned-in-place due to field constraints. The wellhead will be cut and capped per COGCC rules. The Flowline Pre-Abandonment Notice Document number is included under Related Forms.

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):

Grab confirmation soil samples will be collected from the produced water vessel(s) excavation, beneath the ground oil tank(s), and at the separator(s). Additionally, soil samples will be collected at any points of material change and/or hammer unions, directional changes, as well as at the bell holes on either side of a waterway, where applicable. A grab soil sample will be collected at the base of the excavation or the area showing the highest degree of impact during field screening activities at the wellhead excavation. A grab confirmation soil sample will be collected at the wellhead excavation. Soil samples will be analyzed by a certified laboratory for TPH (total volatile [C6-C10] and extractable [C10-C36] hydrocarbons), organic compounds in soil per COGCC Table 915-1, and EC, SAR, pH, and boron. All samples collected will be analyzed by a certified laboratory using approved COGCC laboratory analysis methods.

Proposed Groundwater Sampling

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

If groundwater is encountered during the site investigation a grab groundwater will be collected and analyzed for all organic compounds per COGCC Table 915-1.

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):

Visual inspection at the tank battery area will occur during abandonment activities. Field personnel will field screen all disturbed areas using visual and olfactory senses to determine if laboratory confirmation sampling is required. The COGCC Tank Battery and Produced Water Vessel Closure Checklists will be utilized and filled out during the abandonment process. A photolog will be submitted on the Subsequent Form 27.

SITE INVESTIGATION REPORT

SAMPLE SUMMARY

Soil

Number of soil samples collected 0
Number of soil samples exceeding 915-1 _____
Was the areal and vertical extent of soil contamination delineated? _____
Approximate areal extent (square feet) _____

NA / ND

_____ Highest concentration of TPH (mg/kg) _____
_____ Highest concentration of SAR _____
_____ BTEX > 915-1 _____
_____ Vertical Extent > 915-1 (in feet) _____

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 915-1 _____

_____ 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 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?
- 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.

No source was generated

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.

NA

Soil Remediation Summary

- In Situ**
 - _____ Bioremediation (or enhanced bioremediation)
 - _____ Chemical oxidation
 - _____ Air sparge / Soil vapor extraction
- Ex Situ**
 - _____ Excavate and offsite disposal
 - _____ If Yes: Estimated Volume (Cubic Yards) _____
 - _____ Name of Licensed Disposal Facility or COGCC Facility ID # _____

____ Natural Attenuation
____ Other _____

____ 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

Approved Reporting Schedule:

Quarterly Semi-Annually Annually Other One time within 90 days of laboratory analytical receipt

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 Subsequent Report _____

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: _____

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 1000 Series Rules.

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 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. 08/02/2021

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

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). _____

Proposed site investigation commencement. 11/15/2021

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

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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: ` Lauren Hoff _____

Title: HSE Reg Affairs Coord _____

Submit Date: ` 11/01/2021 _____

Email: DenverRegulatory@chevron.onmicrosoft.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: Candice (Nikki) Graber _____

Date: 11/05/2021 _____

Remediation Project Number: 20638 _____

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

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**

402855852	FORM 27-INITIAL-SUBMITTED
402855861	SITE MAP
402855862	SITE MAP

Total Attach: 3 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)