

State of Colorado  
Oil and Gas Conservation Commission

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Document Number:

402943356

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.

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

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 #: 20786 Initial Form 27 Document #: 402859681

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: WELL	Facility ID: _____	API #: 123-26814	County Name: WELD
Facility Name: WELLS RANCH AA 21-04	Latitude: 40.477227	Longitude: -104.448797	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: NWNW	Sec: 21	Twp: 6N	Range: 63W Meridian: 6 Sensitive Area? Yes

Facility Type: SPILL OR RELEASE	Facility ID: 480576	API #: _____	County Name: WELD
Facility Name: Wells Ranch AA 21-04	Latitude: 40.477227	Longitude: -104.448797	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: NWNW	Sec: 21	Twp: 6N	Range: 63W Meridian: 6 Sensitive Area? Yes

## **SITE CONDITIONS**

General soil type - USCS Classifications SC

Most Sensitive Adjacent Land Use Cropland

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**

Occupied building 645'

# 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
UNDETERMINED	GROUNDWATER	TBD	Laboratory Analytical if Encountered
Yes	SOILS	57' X 40' X 7' bgs	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.

A tractor struck the Wells Ranch AA21-04 wellhead causing an unintentional release. The oil and gas well was shut in by pumping 40 bbls of water with 2% kcl down the casing until the well was on a vacuum. A 2"x 6" heavy nipple and 5K balon valve was installed into the 2" opening and the valve was shut. Remediation of impacts will be scheduled. The permitted irrigation water well (Receipt#9058367) that is located approximately 110 feet N from the oil and gas well will be investigated to determine if it is present in that location. Pursuant to COGCC Rule 911 a site investigation will be conducted pertaining to the WELLS RANCH AA21-04 wellhead cut and cap and flowline removal.

Approximately 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 ):

Twenty-six soil samples were collected during excavation activities for analysis of TPH C6-36, organics, inorganics, and metals.

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 also be collected at the flowline directional change. 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.

### **Proposed Groundwater Sampling**

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

If groundwater is encountered during site assessment activities samples will be collected for analysis of BTEX, naphthalene, 1,2,4-trimethylbenzene, 1,3,5-trimethylbenzene, and inorganic parameters.

### **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 of the wellhead and flowline areas 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 Flowline Closure and Wellhead 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 26

Number of soil samples exceeding 915-1 26

Was the areal and vertical extent of soil contamination delineated? No

Approximate areal extent (square feet) 2280

### NA / ND

-- Highest concentration of TPH (mg/kg) 158.7  
47

-- Highest concentration of SAR 8.4

BTEX > 915-1 No

Vertical Extent > 915-1 (in feet) 7

### 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?

Background samples were collected for analysis of EC, SAR, pH, and Table 915-1 metals. Additional background samples will be collected for inorganics and metals.

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?

A site assessment will be scheduled to delineate Table 915-1 groundwater protection screening levels. Noble will collect samples for the full Table 915-1.

## 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.

The source was removed through excavation of impacted soil above COGCC Table 915-1 levels.

### 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.

Additional site assessment activities will be performed to delineate groundwater protection screening levels. Site assessment activities are scheduled for November 12, 2021.

### Soil Remediation Summary

In Situ

Ex Situ

- \_\_\_\_\_ Bioremediation ( or enhanced bioremediation )
- \_\_\_\_\_ Chemical oxidation
- \_\_\_\_\_ Air sparge / Soil vapor extraction
- \_\_\_\_\_ Natural Attenuation
- \_\_\_\_\_ Other \_\_\_\_\_

- Yes \_\_\_\_\_ Excavate and offsite disposal
- \_\_\_\_\_ If Yes: Estimated Volume (Cubic Yards) \_\_\_\_\_ 530
- \_\_\_\_\_ 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.



# 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.

A detailed reclamation plan will be submitted to account for concentrations of inorganics in soil. Vertical and lateral definition will be accomplished through an environmental site assessment.

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. 08/21/2021

Actual Spill or Release date, or date of discovery. \_\_\_\_\_

### SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 08/25/2021

Proposed site investigation commencement. \_\_\_\_\_

Proposed completion of site investigation. 02/01/2022

### REMEDIAL ACTION DATES

Proposed start date of Remediation. 08/25/2021

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**

Update for flowline and wellhead decommissioning.

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: 20786**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**

402943435	MAP
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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)