

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
403049993

Receive Date:

Report taken by:

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: CAERUS PICEANCE LLC | Operator No: 10456 | Phone Numbers |
| Address: 1001 17TH STREET #1600 | | Phone: (970) 7782314 |
| City: DENVER State: CO Zip: 80202 | | Mobile: (970) 7782314 |
| Contact Person: Jake Janicek | Email: jjanicek@caerusoilandgas.com | |

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: _____ Initial Form 27 Document #: 403049993

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

No Multiple Facilities

| | | | |
|--|---------------------|------------------------|--|
| Facility Type: LOCATION | Facility ID: 334704 | API #: _____ | County Name: GARFIELD |
| Facility Name: PUCKETT-67S96W 18NWNW | Latitude: 39.442750 | Longitude: -108.157030 | |
| ** correct Lat/Long if needed: Latitude: _____ | | Longitude: _____ | |
| QtrQtr: NWNW | Sec: 18 | Twp: 7S | Range: 96W Meridian: 6 Sensitive Area? Yes |

SITE CONDITIONS

General soil type - USCS Classifications OL Most Sensitive Adjacent Land Use Rangeland

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

None

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) Soils

DESCRIPTION OF IMPACT

| Impacted? | Impacted Media | Extent of Impact | How Determined |
|--------------|----------------|------------------|---------------------------|
| UNDETERMINED | SOILS | UNDETERMINED | SAMPLING AND LAB 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.

Initial actions proposed include removal of partially buried tank and subsequent investigation to determine the presence or absence of E&P related impacts.

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):

Following removal of the tank, four sidewall soil samples and one base sample will be collected from the open excavation and submitted for laboratory analysis of all Table 915-1 constituents. For comparison to Background soil conditions, up to four soil samples will be collected from nearby, undisturbed native areas and submitted for analysis of Electrical Conductivity (EC), Sodium Adsorption Ratio (SAR), pH, Boron, and Arsenic.

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 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.

If historical impacts are found onsite, a Form 19 Initial Spill/Release Report will be submitted along with a proposed Remediation Plan via Supplemental Form 27.

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.

Proposed investigation will determine whether remediation is needed.

Soil Remediation Summary

In Situ

Ex Situ

 Bioremediation (or enhanced bioremediation)
 Chemical oxidation
 Air sparge / Soil vapor extraction

 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 _____

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 Partially buried tank removal investigation _____

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.

Excavation will be backfilled with suitable material to grade and returned to working pad surface.

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. _____

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

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 05/23/2022

Proposed site investigation commencement. 05/25/2022

Proposed completion of site investigation. 06/30/2022

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

Upon completion of the proposed activities, a Site Investigation Report will be included in a Supplemental Form 27 that includes laboratory analytical data, soil sample map with GPS data, field notes, and photo documentation.

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

Signed: Steve Sivigliano _____

Title: Environmental Project Mgr _____

Submit Date: _____

Email: steve.sivigliano@camposepc.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: _____

COA Type**Description**

| COA Type | Description |
|----------|-------------|
| | |

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**

| Att Doc Num | Name |
|-------------|------|
| | |

Total Attach: 0 Files

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

| User Group | Comment | Comment Date |
|------------|---------|---------------------|
| | | Stamp Upon Approval |

Total: 0 comment(s)