

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

403180509

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: <u>PETROSHARE CORPORATION</u>	Operator No: <u>10454</u>	Phone Numbers
Address: <u>9635 MAROON CIRCLE #400</u>		Phone: <u>(303) 894-2100 x5181</u>
City: <u>ENGLEWOOD</u> State: <u>CO</u> Zip: <u>80112</u>		Mobile: <u>(303) 905-5341</u>
Contact Person: <u>James Hix - OWP EPS</u>	Email: <u>james.hix@state.co.us</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: _____ Initial Form 27 Document #: 403180509

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>WELL</u>	Facility ID: _____	API #: <u>001-08361</u>	County Name: <u>ADAMS</u>
Facility Name: <u>(UPRR) WAGNER (OWP) 12-19</u>	Latitude: <u>39.951662</u>	Longitude: <u>-104.599280</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SWNW</u>	Sec: <u>19</u>	Twp: <u>1S</u>	Range: <u>64W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>
Facility Type: <u>LOCATION</u>	Facility ID: <u>479190</u>	API #: _____	County Name: <u>ADAMS</u>
Facility Name: <u>(UPRR) WAGNER 12-19 Tank Battery</u>	Latitude: <u>39.951140</u>	Longitude: <u>-104.602510</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>Lot 1</u>	Sec: <u>19</u>	Twp: <u>1S</u>	Range: <u>64W</u> Meridian: <u>6</u> Sensitive Area? <u>No</u>

SITE CONDITIONS

General soil type - USCS Classifications ML

Most Sensitive Adjacent Land Use Rural Residential

Is domestic water well within 1/4 mile? Yes

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

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	SOILS	UNKNOWN	VISUALLY/FIELD SCREENING/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.

The Petroshare Corp. - (UPRR) Wagner (OWP) #12-19 well and Tank Battery are in the COGCC Orphaned Well Program. The well will be plugged and abandoned ("PA") and the associated On-location and Off-location flowlines and tank battery equipment will be decommissioned or removed. No initial actions or emergency response measures have been implemented at the location.

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 soil samples will be collected for laboratory analysis of Table 915-1 parameters from areas most likely to have been impacted. Visual inspection and field screening of soils will be conducted in areas surrounding the flowlines, tank battery equipment, and wellhead. Additional grab soil samples may be collected and submitted for laboratory analysis of Table 915-1 parameters based on site observations that indicate exploration and production (E&P) waste impacts.

Proposed Groundwater Sampling

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

Groundwater is not expected to be encountered at this site; therefore, groundwater samples are not expected to be collected as part of this investigation.

Proposed Surface Water Sampling

- ☐ Will surface water samples be collected as part of this investigation? (Number, analyses, and locations of samples):

Surface water samples are not expected to be collected as part of this investigation.

Additional Investigative Actions

- ☐ Additional alternative investigative actions described in attached Site Investigation Plan (summary):

Additional alternative investigative actions are not expected to be performed during this initial Site Investigation Plan.

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?

NA / ND

 Highest concentration of TPH (mg/kg)

 Highest concentration of SAR

 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?

☐ 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.

The (UPRR) Wagner (OWP) #12-19 and (UPRR) Wagner 12-19 Tank Battery are in the COGCC Orphaned Well Program. The (UPRR) Wagner (OWP) #12-19 well will be plugged and abandoned (PA). Production equipment and flowlines associated with this well and associated Location will be removed or decommissioned.

REMEDIAL 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.

If exploration and production (E&P) waste impacted soils are encountered, the impacted materials will be excavated, temporarily stockpiled on location pending disposal at an offsite commercial disposal facility. A third party consultant will field screen soils and collect soil samples for laboratory analysis of Table 915-1 parameters.

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

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

Adequacy of Operator's General Liability Insurance and Financial Assurance

Describe the adequacy of the Operator's general liability insurance and Financial Assurance to fully address the anticipated costs of Remediation, including the estimated remaining cost for this project (below).

If this information has been provided on a Form 27 within the last 12 months, provide the Document Number of that form.

Operator anticipates the remaining cost for this project to be: \$

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 performed in accordance with COGCC 1000 Series Rules and will be addressed during a separate phase of the OWP work.

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). _____

Proposed site investigation commencement. 10/17/2022

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

The Petroshare Corp. - (UPRR) Wagner (OWP) #12-19 well and (UPRR) Wagner 12-19 Tank Battery are in the COGCC Orphaned Well Program. The well will be plugged and abandoned (PA) and the tank battery equipment and flowlines will be decommissioned or removed.

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

Signed: James Hix

Title: East OWP EPS

Submit Date: _____

Email: james.hix@state.co.us

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: _____

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**

403180595	MAP
403180596	SITE MAP

Total Attach: 2 Files

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

		Stamp Upon Approval
--	--	---------------------

Total: 0 comment(s)