

# 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:

403159305

Receive Date:

09/09/2022

Report taken by:

Steven Arauza

## 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>VISION ENERGY LLC</u>	Operator No: <u>10770</u>	<b>Phone Numbers</b>
Address: <u>P O BOX 370</u>		Phone: <u>(970) 5634000</u>
City: <u>IGNACIO</u>	State: <u>CO</u>	Zip: <u>81137</u>
Contact Person: <u>Trish Harrison</u>	Email: <u>trishharrison@eis-llc.com</u>	Mobile: <u>( )</u>

### PROJECT, PURPOSE & SITE INFORMATION

#### PROJECT INFORMATION

Remediation Project #: 25516 Initial Form 27 Document #: 403159305

#### 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>PIT</u>	Facility ID: <u>117211</u>	API #: _____	County Name: <u>MESA</u>
Facility Name: <u>LIPAN WASH. 3-15-2-2</u>	Latitude: <u>39.245578</u>	Longitude: <u>-108.689512</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SWNE</u>	Sec: <u>15</u>	Twp: <u>2N</u>	Range: <u>2W</u>
Meridian: <u>U</u>	Sensitive Area? <u>Yes</u>		
Facility Type: <u>WELL</u>	Facility ID: _____	API #: <u>077-08216</u>	County Name: <u>MESA</u>
Facility Name: <u>LIPAN WASH UNIT 3-15-2-2</u>	Latitude: <u>39.245956</u>	Longitude: <u>-108.690746</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SWNE</u>	Sec: <u>15</u>	Twp: <u>2N</u>	Range: <u>2W</u>
Meridian: <u>U</u>	Sensitive Area? <u>No</u>		

Facility Type:	LOCATION	Facility ID:	312442	API #:		County Name:	MESA
Facility Name:		LIPAN WASH UNIT-U2N2W 15SWNE		Latitude:	39.245898	Longitude:	-108.690792
				** correct Lat/Long if needed: Latitude:		Longitude:	
QtrQtr:	SWNE	Sec:	15	Twp:	2N	Range:	2W
				Meridian:	U	Sensitive Area?	Yes

## **SITE CONDITIONS**

General soil type - USCS Classifications SM Most Sensitive Adjacent Land Use Farmland

Is domestic water well within 1/4 mile? No 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**

## SITE INVESTIGATION PLAN

### TYPE OF WASTE:

<input type="checkbox"/> E&P Waste	<input type="checkbox"/> Other E&P Waste	<input checked="" type="checkbox"/> Non-E&P Waste
<input type="checkbox"/> Produced Water	<input type="checkbox"/> Workover Fluids	Production Equipment _____
<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	Soil Sample

### INITIAL ACTION SUMMARY

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

N/A

### 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 ):

Soil grab - 8 samples - Wellhead, Separator, Meter Run, Tank, Pit (2), start and end of flowline

#### 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) \_\_\_\_\_ 0

#### NA / ND

\_\_\_\_\_ Highest concentration of TPH (mg/kg) \_\_\_\_\_

\_\_\_\_\_ Highest concentration of SAR \_\_\_\_\_

\_\_\_\_\_ BTEX > 915-1 \_\_\_\_\_

\_\_\_\_\_ Vertical Extent > 915-1 (in feet) \_\_\_\_\_ 0

### 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 samples

☐ 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

### 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.

TBD

### 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.

## 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 has adequate general liability and financial assurance for this project. Costs TBD

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.

Contouring and seeding per reclamation plan approved by BLM

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). 09/30/2022

Proposed site investigation commencement. 09/30/2022

Proposed completion of site investigation. 10/31/2022

### 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**

The sample map does not show the start and end of flowline. When those locations are identified, the sample map will be updated to show the exact location the samples were taken.

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

Signed: Trish Harrison

Title: Permitting

Submit Date: 09/09/2022

Email: trishharrison@eis-llc.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: Steven Arauza

Date: 10/17/2022

Remediation Project Number: 25516

**COA Type****Description**

	Comply with COGCC Rule 1105 flowline abandonment requirements, including notification and verification requirements.
	Comply with Rule 912 for any historical impacts that are discovered.
	Operator shall collect soil samples from areas most likely to be impacted and shall collect an appropriate number of representative soil samples to delineate the horizontal and vertical extents of contamination, per Rule 915.e.(2).B.
	Operator shall collect sample(s) from comparable, nearby non-impacted native soil for purposes of establishing background soil conditions including pH, electrical conductivity (EC) and sodium adsorption ratio (SAR), per Rule 915.e.(2).D.
	Per Rule 913.b.(2), the Operator will conduct sampling and analysis of soil, and groundwater--if encountered, to determine the horizontal and vertical extent of any contamination in excess of the cleanup concentrations in Table 915-1 for soil and groundwater. The Operator shall analyze samples for the complete Table 915-1 list and shall compare analytical results for site investigation samples to both the Table 915-1 Residential Soil Screening Level Concentrations and the Protection of Groundwater Soil Screening Level Concentrations. Submit an assessment of potential pathways to groundwater via a Supplemental Form 27.
5 COAs	

**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**

403159305	FORM 27-INITIAL-SUBMITTED
403159399	SOIL SAMPLE LOCATION MAP

Total Attach: 2 Files

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

Environmental	COGCC database documents the presence of a pit (Pit Facility ID #117211) associated with this pad. Earthen Pit Permit, doc #706387, indicates that the pit dimensions are 10ft x 10ft x 4ft.  Operator's attached Soil Sample Location Diagram (doc #403159399) indicates that the pit location will be sampled. COGCC has updated this Form 27 to reference Pit Facility ID #117211 under Site Information.	10/17/2022
---------------	--	------------

Total: 1 comment(s)