

# State of Colorado Oil and Gas Conservation Commission

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Document Number:

403135664

Receive Date:

11/03/2022

Report taken by:

John Heil

## 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>UTAH GAS OP LTD DBA UTAH GAS CORP</u>	Operator No: <u>10539</u>	<b>Phone Numbers</b>
Address: <u>760 HORIZON DRIVE STE 400</u>		Phone: <u>(970) 6290308</u>
City: <u>GRAND JUNCTION</u>	State: <u>CO</u>	Zip: <u>81506</u>
Contact Person: <u>Dana Pollack</u>	Email: <u>dpollack@utahgascorp.com</u>	Mobile: <u>( )</u>

### PROJECT, PURPOSE & SITE INFORMATION

#### PROJECT INFORMATION

Remediation Project #: 25972 Initial Form 27 Document #: 403135664

#### 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>103-09342</u>	County Name: <u>RIO BLANCO</u>
Facility Name: <u>DRAGON TRAIL UNIT 1083</u>		Latitude: <u>39.865717</u>	Longitude: <u>-108.817112</u>
		** correct Lat/Long if needed: Latitude: _____	Longitude: _____
QtrQtr: <u>NWNW</u>	Sec: <u>23</u>	Twp: <u>2S</u>	Range: <u>102W</u>
		Meridian: <u>6</u>	Sensitive Area? <u>Yes</u>
Facility Type: <u>LOCATION</u>	Facility ID: <u>315854</u>	API #: _____	County Name: <u>RIO BLANCO</u>
Facility Name: <u>DRAGON TRAIL UNIT-62S102W</u> <u>23NWNW</u>		Latitude: <u>39.865559</u>	Longitude: <u>-108.817152</u>
		** correct Lat/Long if needed: Latitude: _____	Longitude: _____
QtrQtr: <u>NWNW</u>	Sec: <u>23</u>	Twp: <u>2S</u>	Range: <u>102W</u>
		Meridian: <u>6</u>	Sensitive Area? <u>Yes</u>

## SITE CONDITIONS

General soil type - USCS Classifications SC

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

## SITE INVESTIGATION PLAN

### TYPE OF WASTE:

☐ E&P Waste

☐ Other E&P Waste

☒ Non-E&P Waste

☐ Produced Water

☐ Workover Fluids

TBD - facility decommission soil investigation

☐ Oil

☐ Tank Bottoms

☐ Condensate

☐ Pigging Waste

☐ Drilling Fluids

☐ Rig Wash

☐ Drill Cuttings

☐ Spent Filters

☐ Pit Bottoms

☐ Other (as described by EPA)

### DESCRIPTION OF IMPACT

Impacted?	Impacted Media	Extent of Impact	How Determined
UNDETERMINED	SOILS	Unknown	Sampling will take place prior to final reclamation.

### INITIAL ACTION SUMMARY

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

Per rule 911, facility decommissioning results in soil investigation after equipment is removed.

### 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 ):

The wellhead, drying tower, tank and meter will be sampled. Each will be a grab sample analyzed for components pursuant to 915 rules. There will also be three background samples analyzed for arsenic, pH, electrical conductivity and sodium adsorption ratio.

#### 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.

TBD - at this moment, no source removal is projected.

### 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.

If no impacts are identified; project will be closed within 1 month of soil sampling date. If impacts are discovered; timeline will be delayed and project will have updated timeframe to reach NFA adjusted to remediation scope.

### Soil Remediation Summary

☐ In Situ

☐ Ex Situ

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

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

## REMEDIATION PROGRESS UPDATE

### PERIODIC REPORTING

#### Approved Reporting Schedule:

☐ Quarterly☐ Semi-Annually☐ Annually☒ Other

TBD

#### ☐ 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.

A reclamation plan is being drafted for the landowner and will be presented when onsite and plan is completed.

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. \_\_\_\_\_

### 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**

Resubmitted initial Form 27 for facility decommission at the DTU 1083.

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

Signed: Dana Pollack

Title: Environmental Specialist

Submit Date: 11/03/2022

Email: dpollack@utahgascorp.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: John Heil

Date: 11/16/2022

Remediation Project Number: 25972

**COA Type****Description**

	Per Rule 911.b and Rule 913.f, if an Operator discovers a Spill or Release during closure operations, the Operator will report the Spill or Release on a Form 19, Spill/Release Report, pursuant to Rule 912.
	Operator shall comply with Rule 913.b.(2) and conduct sampling and analysis of soil and Groundwater (if encountered or a pathway to groundwater is determined) pursuant to Rule 915 to determine the horizontal and vertical extent of any contamination in excess of the cleanup concentrations in Table 915-1 or in WQCC Regulation 41 numeric and narrative Groundwater quality standards and classifications, as incorporated by reference in Rule 901.b.
2 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**

403135664	FORM 27-INITIAL-SUBMITTED
403135734	SITE MAP
403135737	SOIL SAMPLE LOCATION MAP

Total Attach: 3 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)