

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:

403337126

Receive Date:

03/05/2023

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: CAERUS PICEANCE LLC	Operator No: 10456	Phone Numbers Phone: (970) 778-2314 Mobile: (970) 778-2314
Address: 1001 17TH STREET #1600		
City: DENVER	State: CO Zip: 80202	
Contact Person: Jake Janicek	Email: jjanicek@caerusoilandgas.com	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 28628 Initial Form 27 Document #: 403337126

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: WELL	Facility ID: _____	API #: 045-07041	County Name: GARFIELD
Facility Name: DUNN 4-16	Latitude: 39.469700	Longitude: -107.663200	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SESE	Sec: 4	Twp: 7S	Range: 92W Meridian: 6 Sensitive Area? Yes

SITE CONDITIONS

General soil type - USCS Classifications OH 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

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) No impacts associated with this project have been identified.

DESCRIPTION OF IMPACT

Impacted?	Impacted Media	Extent of Impact	How Determined
UNDETERMINED	SOILS	To Be Determined	Field investigation and soil sampling

INITIAL ACTION SUMMARY

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

This form is being submitted to comply with COGCC Rules 911.a.(4), 913.a., 913.b.(1), 913.b.(2), and 913.c.(9). The form serves as the initial notification to abandon the Dunn 4-16 (API# 045-07041) well, production separator, well blowdown bypass line, and associated flowline (wellhead line).

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 samples will be collected from areas most likely to have been impacted in accordance with the following COGCC Rules:

1. COGCC Rule 913.b.(2)C
2. COGCC Rule 915.e.(1)
3. COGCC Rule 915.e.(2)B.
4. COGCC Rule 915.e.(2)C.

In general, the areas of interest tend to be where the lines transition from subsurface to above-ground at each end of the line and soil adjacent to the wellhead. Grab samples will be collected from soil vertically below these areas and submitted for laboratory analysis of all analytes listed in COGCC Table 915-1. Please see photos attached to this form for exact areas where samples are expected to be collected from.

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.

There is currently no source identified.

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.

There are currently no plans for remediation.

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

☐ **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 Oil and Gas Facility Decommissioning Notification per
COGCC Rule 911.a.(4) and 913.c.(9)

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.

Per Rule 705.b, and in line with guidance laid out in the SBAP, Caerus has general liability insurance in the amount of \$1M, and Caerus has umbrella insurance, which sits over the general liability insurance in the amount of \$75M. The umbrella and general liability insurance covers property damage, bodily injury to third parties, and sudden or accidental pollution under a combined \$76M.

Operator anticipates the remaining cost for this project to be: \$ 5000

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.

Any excavations will be backfilled to the existing grade of the pad surface.

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). 05/01/2023

Proposed site investigation commencement. 05/01/2023

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

If the soil sampling detailed in the "Proposed Soil Sampling" section of this form identifies impacts, a Form 19 will be submitted per COGCC Rule 912.

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

Signed: Jake Janicek

Title: EHS Specialist

Submit Date: 03/05/2023

Email: jjanicek@caerusoilandgas.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: 04/07/2023

Remediation Project Number: 28628

COA Type**Description**

	Comply with COGCC Rule 1105 flowline abandonment requirements, including notification and verification requirements.
	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.
	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.
3 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**

403337126	FORM 27-INITIAL-SUBMITTED
403337127	PHOTO DOCUMENTATION
403337128	PHOTO DOCUMENTATION

Total Attach: 3 Files

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

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

Total: 0 comment(s)