

State of Colorado
Oil and Gas Conservation Commission

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Receive Date:

Report taken by:

Site Investigation and Remediation Workplan (Supplemental 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: SCOUT ENERGY MANAGEMENT LLC | Operator No: 10779 | Phone Numbers |
| Address: 13800 MONTFORT DRIVE SUITE 100 | | Phone: (970) 620-3456 |
| City: DALLAS | State: TX | Zip: 75240 |
| Contact Person: Chris Patterson | Email: chris.patterson@scoutep.com | Mobile: (970) 501-5157 |

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 19156 Initial Form 27 Document #: 402649082

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: 315175 | API #: _____ | County Name: RIO BLANCO |
| Facility Name: FEE-62N102W 19SESE | Latitude: 40.121695 | Longitude: -108.876738 | |
| ** correct Lat/Long if needed: Latitude: _____ | | Longitude: _____ | |
| QtrQtr: SESE | Sec: 19 | Twp: 2N | Range: 102W Meridian: 6 Sensitive Area? No |

SITE CONDITIONS

General soil type - USCS Classifications CH Most Sensitive Adjacent Land Use Non Crop Land

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:

- | | | |
|----------------------------------------------------|------------------------------------------------------|----------------------------------------|
| <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 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 |
|-----------|----------------|------------------------------------|------------------------------------|
| Yes | SOILS | 2692ft. x 1.5ft. x 0.5 ft | Field determined with tape measure |
| Yes | VEGETATION | Minor distressed vegetation noted. | Visual |

INITIAL ACTION SUMMARY

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

A leak occurred on the 10 inch NW injection line at a ten inch to three inch spool that ties to a lateral injection line 530 feet North Northeast of Fee 113X. The leak was in a weld on the reducer that was internally coated. Approximately 164.4264 Bbls of brine water was released and 91.399 Bbls traveled into Stinking Wash Drainage. Vacuum trucks recovered approximately 159.6694 Bbls of brine water. Injection water line was isolated in approximately 50 minutes. The injection water was recovered, and dirt berm containment was utilized in Stinking Water drainage. The spill potentially contained a trace of crude oil, but there was no visible sheen at the time of the spill. (Note: Stinking Water Drainage was not flowing at the time of the spill.) The fluids were picked up by vacuum truck and recycled at the truck unloading facility at the Main Water Plant. A fresh water wash of the affected area was started at approximately noon on 2-27-11. The injection water traveled 2,692 feet into Stinking Water drainage where it was contained by dirt diking.

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):

Preliminary soil samples were collected late February and early March from the lower portion of the spill path. A total of five (5) grab samples analyzed for Table 910-1 parameters were collected at a depths from 0 to 6 inches below ground surface (ft-bgs). Results show elevated SAR, EC and PAH levels within the impacted area. Five (5) initial samples were collected from upper portion of the spill path on October 18, 2018 and results show one location, SS5, with elevated DRO, PAH and pH concentrations. Subsequent soil samples analyzed for SAR and EC at the SS1 and UGSS sample locations were collected in May of 2011 and on October 18, 2018 to monitor natural attenuation. While SAR and EC concentrations have come within background range, there are still PAH impacts at SS1, SS, SS5 and DGSS sample locations. DRO and pH will be resampled at SS5 location and EC will be resampled at the SS2 sample location. These locations will be sampled during 2021 to further monitor natural att

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 14

Number of soil samples exceeding 915-1 4

Was the areal and vertical extent of soil contamination delineated? Yes

Approximate areal extent (square feet) 4038

NA / ND

-- Highest concentration of TPH (mg/kg) 1700

-- Highest concentration of SAR 10

BTEX > 915-1 No

Vertical Extent > 915-1 (in feet) 0

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

4 Number of surface water samples collected

1 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?

Background samples were collected as part of this 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

Does this Supplemental Form 27A include changes to a previously approved Remedial Action Plan? No

SOURCE REMOVAL SUMMARY

Describe how source is to be removed.

No soil is intended for removal. If the DRO level at the SS5 location continue to remain above the Table 910-1 allowable concentration then a subsequent Form 27 outlining remediation approach will be submitted. EC impacted soils will be treated in-situ by Natural Attenuation. After initial water wash seasonal precipitation events will be utilized.
PAH, pH and EC impacted soils will be treated in-situ by Natural Attenuation. After initial water wash seasonal precipitation events will be utilized.

REMEDICATION 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 the DRO level at the SS5 location continue to remain above the Table 910-1 standard then a subsequent Form 27 outlining remediation approach will be submitted. PAH, EC and pH impacted soils will be treated in-situ by Natural Attenuation. After initial water wash seasonal precipitation events will be utilized.

Soil Remediation Summary

In Situ

Ex Situ

- _____ Bioremediation (or enhanced bioremediation)
- _____ Chemical oxidation
- _____ Air sparge / Soil vapor extraction
- Yes _____ 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 REM Progress Rpt. _____

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: _____

REMEDIATION COMPLETION REPORT

REMEDIATION COMPLETION SUMMARY

Is this a Final Closure Request for this Remediation Project? No _____

If YES:

Compliant with Rule 913.h.(1).

Compliant with Rule 913.h.(2).

Compliant with Rule 913.h.(3).

Do all soils meet Table 915-1 standards? _____

Does the previous reply indicate consideration of background concentrations? _____

Does Groundwater meet Table 915-1 standards? _____

Is additional groundwater monitoring to be conducted? _____

Operator shall comply with the COGCC 1000-Series Reclamation Requirements for all impacted and disturbed areas.

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.

Site was reclaimed and seeded once repairs were completed.

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. 02/27/2011

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 05/30/2017

Proposed site investigation commencement. 05/30/2017

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

Scout Energy Management LLC purchased this asset from Chevron USA Inc. and assumes all future liability for Remediation #19156.

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

Signed: Chris Patterson

Title: Senior HSE Coordinator

Submit Date: _____

Email: chris.patterson@scoutep.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: 19156

COA Type**Description**

| 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**

| 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)