

State of Colorado Energy & Carbon Management Commission

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Document Number:

403493056

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: <u>DYER* J G</u>	Operator No: <u>25900</u>	Phone Numbers
Address: _____		Phone: <u>(303) 894-2100</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80203</u>
Contact Person: <u>James Hix - East OWP EPS</u>	Email: <u>james.hix@state.co.us</u>	Mobile: <u>(303) 905-5341</u>

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 19590 Initial Form 27 Document #: 402776441

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: <u>WELL</u>	Facility ID: _____	API #: <u>087-06647</u>	County Name: <u>MORGAN</u>
Facility Name: <u>REINHOLDT SCHMIDT (OWP) 1</u>		Latitude: <u>40.519076</u>	Longitude: <u>-104.116322</u>
		** correct Lat/Long if needed: Latitude: _____	Longitude: _____
QtrQtr: <u>SWNE</u>	Sec: <u>5</u>	Twp: <u>6N</u>	Range: <u>60W</u>
		Meridian: <u>6</u>	Sensitive Area? <u>Yes</u>

SITE CONDITIONS

General soil type - USCS Classifications SP Most Sensitive Adjacent Land Use Rangeland

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

Intermittent tributary to Coal Bank Draw ~100 ft east. DWR Permitted Water Well (Permit #141438) ~700 ft S-SE of Location, Original Replacement Well - House, Lawn, Livestock (Reinhold Schmidt) Windmill: DTW = 101 ft; TD = 300 ft; clay-shale above. Location is within CPW mapped HPH for Mule Deer Severe Winter Range and Pronghorn Winter Concentration.

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)

DESCRIPTION OF IMPACT

Impacted?	Impacted Media	Extent of Impact	How Determined
UNDETERMINED	SOILS	Unknown	Field observations and laboratory analytical data

INITIAL ACTION SUMMARY

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

COGCC Orphaned Well Program will be plugging and decommissioning (cut & cap) the well.

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 samples will be collected for laboratory analysis of Table 915-1 constituents from areas most likely to have been impacted. Visual inspection and field screening of soils will be conducted in the areas surrounding the well head during excavation for the cut & cap procedure. Based on these observations, discrete soil samples will be collected and submitted for laboratory analysis of Table 915-1 constituents.

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

NA / ND

Number of soil samples collected 2

Number of soil samples exceeding 915-1 0

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

Approximate areal extent (square feet) 528

-- Highest concentration of TPH (mg/kg) 286

-- Highest concentration of SAR 3.43

BTEX > 915-1 No

Vertical Extent > 915-1 (in feet) 7

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?

A background soil sample will be collected from adjacent undisturbed ground for Soil Suitability for Reclamation parameters.

☐ 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.

Impacted soil will be excavated using a backhoe during the cut and cap procedure.

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.

Impacted soil identified and removed during the cut and cap procedure will be disposed at an approved landfill. Laboratory analytical results will confirm adequate removal of impacted soil.

Soil Remediation Summary

☐ In Situ

☒ Ex Situ

Bioremediation (or enhanced bioremediation)

Yes Excavate and offsite disposal

Chemical oxidation

If Yes: Estimated Volume (Cubic Yards) 10

Air sparge / Soil vapor extraction

Name of Licensed Disposal Facility or COGCC Facility ID #

_____ Natural Attenuation
_____ Other _____

_____ 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

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? Yes

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? Yes

Does the previous reply indicate consideration of background concentrations? Yes

Does Groundwater meet Table 915-1 standards? Yes

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.

Reclamation will be performed per the 1000 Series Rules

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). 09/13/2021

Proposed site investigation commencement. 09/13/2021

Proposed completion of site investigation. 09/17/2021

REMEDIAL ACTION DATES

Proposed start date of Remediation. 09/20/2021

Proposed date of completion of Remediation. 10/29/2021

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 DYER* J G - 25900 REINHOLDT SCHMIDT (OWP) #1 and REINHOLDT SCHMIDT-66N60W/5 SWNE (Location ID #394744) are in the CECMC Orphaned Well Program (OWP). This supplemental Form 27 presents the Wellhead Closure Data Submittal for the Reinholdt Schmidt #1 wellhead following well plugging and abandonment in August 2021. Arsenic, selenium, 1-methylnaphthalene, 2-methylnaphthalene were reported at concentrations above the Table 915-1 Protection of Groundwater SSL, but below the Table 915-1 Residential SSL. The nearest DWR permitted water well (DWR Permit #141438), approximately 700 ft S-SE of the Location, indicates a static groundwater level of 101 ft and total depth of 300 ft. Based on the low organic parameter concentrations, depth to groundwater, and clay-shale lithologies, the Table 915-1 Residential SSL apply. A site-specific background soil sample, "Background 1 Ft", was collected and submitted for laboratory analysis of metals and soil suitability for reclamation parameters. Arsenic and selenium were at higher concentrations in the background soil sample than excavation floor sample (Sample ID "Floor 7 Ft").

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: 19590

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**

403493087	SITE INVESTIGATION REPORT
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Total Attach: 1 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)