

State of Colorado
Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:
403417186

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>NOBLE ENERGY INC</u>	Operator No: <u>100322</u>	Phone Numbers
Address: <u>2001 16TH STREET SUITE 900</u>		Phone: <u>(715) 562-0251</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>		Mobile: <u>()</u>
Contact Person: <u>Dan Peterson</u>	Email: <u>rbueuf27@chevron.com</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 25588 Initial Form 27 Document #: 403196275

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>123-13356</u>	County Name: <u>WELD</u>
Facility Name: <u>OCOMA G 25-16</u>	Latitude: <u>40.277780</u>	Longitude: <u>-104.604080</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SESE</u>	Sec: <u>25</u>	Twp: <u>4N</u>	Range: <u>65W</u> Meridian: <u>6</u> Sensitive Area? <u>No</u>
Facility Type: <u>SPILL OR RELEASE</u>	Facility ID: <u>483780</u>	API #: _____	County Name: <u>WELD</u>
Facility Name: <u>Ocoma G 25-16</u>	Latitude: <u>40.277780</u>	Longitude: <u>-104.604080</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SESE</u>	Sec: <u>25</u>	Twp: <u>4N</u>	Range: <u>65W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

SITE CONDITIONS

General soil type - USCS Classifications SW _____

Most Sensitive Adjacent Land Use Grassland _____

Is domestic water well within 1/4 mile? Yes _____

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

NA

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 checked="" type="checkbox"/> Oil | <input type="checkbox"/> Tank Bottoms | |
| <input checked="" 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	GROUNDWATER	NA	Lab analysis if encountered
Yes	SOILS	10' X 10' X 6' BGS	Lab analysis

INITIAL ACTION SUMMARY

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

Pursuant to COGCC Rule 911 a site investigation was conducted pertaining to the OCOMA G25-16 wellhead cut and cap and flowline removal. Approximately 954' of flowline was abandoned-in-place due to field constraints. The wellhead was cut and capped per COGCC rules. Additionally, soil samples were collected at any points of material change and/or hammer unions, directional changes, as well as at the bell holes on either side of a waterway, AS APPLICABLE to abandonment type. The Flowline Pre-Abandonment Notice Document number was included under Related Forms.

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):

Five (5) grab soil sample was collected at the base of the excavation and the area showing the highest degree of impact during field screening activities at the wellhead excavation. Additionally, soil samples will be collected at the directional changes of the abandoned in place flowline per the COA on COGCC document number 403196275. Two (2) soil samples were collected at the A and B points of the flowline during abandonment. Soil samples were analyzed by a certified laboratory for TPH (total volatile [C6-C10] and extractable [C10-C36] hydrocarbons) organic compounds in soil per COGCC Table 915-1, and EC, SAR, pH, and boron. Additionally, three (3) soil samples collected from the wellhead excavation were analyzed for metals in soil per COGCC Table 915-1. All samples collected were analyzed by a certified laboratory using approved COGCC laboratory analysis methods.

Proposed Groundwater Sampling

Will groundwater samples be collected as part of this investigation? (Number, analyses, and locations of samples):

If groundwater is encountered during the site investigation a grab groundwater will be collected and analyzed for all organic compounds per COGCC Table 915-1.

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):

Visual inspection of the wellhead and flowline areas occurred during abandonment activities. Field personnel field screened all disturbed areas using visual and olfactory senses to determine if laboratory confirmation sampling was required. The COGCC Flowline Closure and Wellhead Closure Checklists were utilized and filled out during the abandonment process. A photolog was submitted on the Subsequent Form 27.

SITE INVESTIGATION REPORT

SAMPLE SUMMARY

Soil

Number of soil samples collected 7
Number of soil samples exceeding 915-1 3
Was the areal and vertical extent of soil contamination delineated? No
Approximate areal extent (square feet) 100

NA / ND

-- Highest concentration of TPH (mg/kg) 1446
-- Highest concentration of SAR 1.24
BTEX > 915-1 Yes
Vertical Extent > 915-1 (in feet) 6

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?

One background sample was collected adjacent to the wellhead and analyzed for metals in soil per COGCC Table 915-1 and pH.

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?

The source will be delineated through an environmental site assessment. The site assessment will be scheduled prior to December 31, 2023. Additionally, soil samples will be collected from the areas of flowline direction changes.

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.

The source will be delineated through an environmental site assessment. The site assessment will be scheduled prior to December 31, 2023. Additionally, soil samples will be collected from the areas of flowline direction changes.

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.

NA

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

_____ Natural Attenuation

_____ Other _____

_____ 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 Laboratory analytical, figures, photos, and checklists

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.

Noble intends to directly address the costs of remediation at the locations as part of our asset retirement obligation process and operations. Noble has general liability insurance (policy MWZZ 316714) and financial assurance in compliance with COGCC rules. Records are available on the COGCC's website.? The cost for remediation is an estimate only, costs may change upwards or downward based on site-specific information.? Noble makes no representation or guarantees as to the accuracy of the estimate.

Operator anticipates the remaining cost for this project to be: \$ 50000

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: _____

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.

Reclamation will be in accordance with COGCC 1000 Series Rules.

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. 10/06/2022

Actual Spill or Release date, or date of discovery. _____

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). _____

Proposed site investigation commencement. 12/31/2023

Proposed completion of site investigation. 03/31/2024

REMEDIAL ACTION DATES

Proposed start date of Remediation. 03/31/2024

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

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

Signed: Allan Engelhardt _____

Title: Environmental Consultant _____

Submit Date: _____

Email: chevroneform@tasman-geo.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: 25588

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**

403505695	OTHER
403505697	OTHER

Total Attach: 2 Files

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

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)