

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:

403485284

Receive Date:

08/07/2023

Report taken by:

CHRIS CANFIELD

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>HELENA RESOURCES INC</u>	Operator No: <u>10547</u>	Phone Numbers Phone: <u>(970) 590-3944</u> Mobile: <u>()</u>
Address: <u>2960 SIMMS DR</u>		
City: <u>LAKEWOOD</u>	State: <u>CO</u> Zip: <u>80215</u>	
Contact Person: <u>Theodore Pagano</u>	Email: <u>tapagano@helena-resources.com</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 31570 Initial Form 27 Document #: 403485284

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>LOCATION</u>	Facility ID: <u>415301</u>	API #: _____	County Name: <u>ADAMS</u>
Facility Name: <u>RUBY 1-2/DARLOW TANK LOCATION</u>		Latitude: <u>39.974250</u>	Longitude: <u>-104.942960</u>
		** correct Lat/Long if needed: Latitude: _____	Longitude: _____
QtrQtr: <u>SESE</u>	Sec: <u>12</u>	Twp: <u>1S</u>	Range: <u>68W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>
Facility Type: <u>OFF-LOCATION FLOWLINE</u>	Facility ID: <u>466274</u>	API #: _____	County Name: <u>ADAMS</u>
Facility Name: <u>Wellhead Line</u>		Latitude: <u>39.974301</u>	Longitude: <u>-104.942803</u>
		** correct Lat/Long if needed: Latitude: _____	Longitude: _____
QtrQtr: <u>SESE</u>	Sec: <u>12</u>	Twp: <u>1S</u>	Range: <u>68W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

Facility Type:	TANK BATTERY	Facility ID:	481999	API #:		County Name:	ADAMS
Facility Name:	Ruby Tank Battery	Latitude:	39.974213	Longitude:	-104.943079		
		** correct Lat/Long if needed: Latitude:		Longitude:			
QtrQtr:	SESE	Sec:	12	Twp:	1s	Range:	68w
				Meridian:	6	Sensitive Area?	Yes

SITE CONDITIONS

General soil type - USCS Classifications	CL	Most Sensitive Adjacent Land Use	Non-irrigated agricultural usage
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?	Yes		

Other Potential Receptors within 1/4 mile

None

SITE INVESTIGATION PLAN

TYPE OF WASTE:

☐ E&P Waste ☐ Other E&P Waste ☒ Non-E&P Waste

☐ Produced Water ☐ Workover Fluids ☐ No waste anticipated

☐ 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	TBD	inspection/soil samples/laboratory analytical results

INITIAL ACTION SUMMARY

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

Pursuant to ECOM Rule 911 a site investigation will be conducted pertaining to the Ruby 2 tank battery, off-location flowline, and location. See attachment for soil sample and field screening locations.

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):

A grab soil sample will be collected at the base of the excavation or the area showing the highest degree of impact during field screening activities beneath the ASTs, and beneath the separator. Soil samples will be analyzed by a certified laboratory for TPH (total volatile [C6-C10] and extractable [C10-C36] hydrocarbons), organic compounds in soil per ECOM Table 915-1, and EC, SAR, pH, and boron. All samples collected will be analyzed by a certified laboratory using approved ECOM laboratory methods.

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):

Visual inspection of the tank battery area and flowlines will occur during abandonment activities. Field personnel will field screen all disturbed areas using a photoionization detector to determine if laboratory confirmation soil sampling is required. Flowlines will be abandoned in place; if impacts are identified then samples will be taken along the flowline in the impacted areas. The ECOM Tank Battery and Flowline Closure Checklists will be utilized and filled out during the abandonment process. A photolog will be submitted in the subsequent Form 27.

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? _____

NA / ND

_____ Highest concentration of TPH (mg/kg) _____

_____ Highest concentration of SAR _____

BTEX > 915-1 _____

Approximate areal extent (square feet) _____

Vertical Extent > 915-1 (in feet) _____

Groundwater

Number of groundwater samples collected _____ 0

_____ Highest concentration of Benzene (µg/l) _____

Was extent of groundwater contaminated delineated? No _____

_____ Highest concentration of Toluene (µg/l) _____

Depth to groundwater (below ground surface, in feet) _____

_____ Highest concentration of Ethylbenzene (µg/l) _____

Number of groundwater monitoring wells installed _____

_____ Highest concentration of Xylene (µg/l) _____

Number of groundwater samples exceeding 915-1 _____

_____ 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.

No source has been generated.

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.

N/A

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

_____ Name of Licensed Disposal Facility or COGCC Facility ID # _____

_____ Natural Attenuation

_____ Excavate and onsite remediation

_____ Other _____

_____ Land Treatment

_____ Bioremediation (or enhanced bioremediation)

_____ Chemical oxidation

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 is in compliance with Rule 705 insurance requirements as well as Rule 702 Financial Assurance.

Operator anticipates the remaining cost for this project to be: \$ 8995

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.

Reclamation will be completed in accordance with ECMC 1000 Series Rules or as agreed upon with the Surface Owner.

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. 08/21/2023

Proposed date of completion of Reclamation. 09/15/2023

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). 08/14/2023

Proposed site investigation commencement. _____

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

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

Signed: Jessica Donahue

Title: Compliance Specialist

Submit Date: 08/07/2023

Email: jdonahue@ardorenvironmental.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: CHRIS CANFIELD

Date: 09/14/2023

Remediation Project Number: 31570

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**

403485284	INVESTIGATION/REMEDATION WORKPLAN (INITIAL)
403487903	SOIL SAMPLE LOCATION MAP
403488153	MAP
403530416	FORM 27-INITIAL-SUBMITTED

Total Attach: 4 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)