

# State of Colorado Energy & Carbon Management Commission

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Document Number:

403574715

Receive Date:

10/27/2023

Report taken by:

Kyle Waggoner

## 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>GILBERT-STEWART OPERATING LLC</u>	Operator No: <u>34105</u>	<b>Phone Numbers</b>
Address: <u>1801 BROADWAY STE 200</u>		
City: <u>DENVER</u>	State: <u>CO</u> Zip: <u>80202</u>	
Contact Person: <u>Kent Gilbert</u>	Email: <u>kgoil@msn.com</u>	
		Phone: <u>(303) 478-8393</u>
		Mobile: <u>( )</u>

### PROJECT, PURPOSE & SITE INFORMATION

#### PROJECT INFORMATION

Remediation Project #: 29170 Initial Form 27 Document #: 403377990

#### 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>017-07193</u>	County Name: <u>CHEYENNE</u>
Facility Name: <u>MILLER 1</u>	Latitude: <u>38.767210</u>	Longitude: <u>-102.390283</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>NENE</u>	Sec: <u>12</u>	Twp: <u>15S</u>	Range: <u>45W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>
Facility Type: <u>LOCATION</u>	Facility ID: <u>321860</u>	API #: _____	County Name: <u>CHEYENNE</u>
Facility Name: <u>MILLER-615S45W 12NENE</u>	Latitude: <u>38.767167</u>	Longitude: <u>-102.390565</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>NENE</u>	Sec: <u>12</u>	Twp: <u>15S</u>	Range: <u>45W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

Facility Type:	OFF-LOCATION FLOWLINE	Facility ID:	475572	API #:		County Name:	CHEYENNE
Facility Name:		Wellhead Line 12NENE		Latitude:	38.768848	Longitude:	-102.389814
				** correct Lat/Long if needed: Latitude:		Longitude:	
QtrQtr:	NENE	Sec:	12	Twp:	15S	Range:	45W
				Meridian:	6	Sensitive Area?	No

## **SITE CONDITIONS**

General soil type - USCS Classifications ML 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

### **Other Potential Receptors within 1/4 mile**

none

## 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 type="checkbox"/> Produced Water       | <input type="checkbox"/> Workover Fluids             |  |
| <input checked="" 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	TBD	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.

Surface equipment was removed over a year ago. On 10-05-2023, environmental consultant has retroactively screened soil, collected soil samples, taken photographs, and recorded GPS points in accordance with Rule 911 and the associated Operator Training and Operator Guidance.

### 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 ):

Analytical results from the 10-05-2023 soil sampling event confirm that there is impacted soil in the vicinity of SS-5 (former AST). Operator will excavate once this Form 27 is approved. If the excavated soil is less than 10 yards, it will be set aside and remediated on site. If excavated soil is more than 10 yards, it will be hauled off site for disposal. Confirmation soil samples will be collected once impacted soil has been removed.

#### 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 9

Number of soil samples exceeding 915-1 9

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)           

           Highest concentration of SAR           

BTEX > 915-1 No

Vertical Extent > 915-1 (in feet) 1

## 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?

On 10-05-2023, four background samples were collected. Lab results from the background samples confirm that the soil in the area is naturally high in pH, as well as naturally high concentrations of arsenic and barium.

☐ 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?

Operator will excavate once this Form 27 is approved. If the excavated soil is less than 10 yards, it will be set aside and remediated on site. If excavated soil is more than 10 yards, it will be hauled off site for disposal. Confirmation soil samples will be collected once impacted soil has been removed.

## 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.

Impacts were encountered in the vicinity of SS-5. Operator will excavate once this Form 27 is approved. If the excavated soil is less than 10 yards, it will be set aside and remediated on site. If excavated soil is more than 10 yards, it will be hauled off site for disposal. Confirmation soil samples will be collected once impacted soil has been removed.

## 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.

Impacts were encountered in the vicinity of SS-5. Operator will excavate once this Form 27 is approved. If the excavated soil is less than 10 yards, it will be set aside and remediated on site. If excavated soil is more than 10 yards, it will be hauled off site for disposal. Confirmation soil samples will be collected once impacted soil has been removed.

## Soil Remediation Summary

☐ In Situ

\_\_\_\_\_ Bioremediation ( or enhanced bioremediation )

\_\_\_\_\_ Chemical oxidation

\_\_\_\_\_ Air sparge / Soil vapor extraction

\_\_\_\_\_ Natural Attenuation

\_\_\_\_\_ Other \_\_\_\_\_

☐ Ex Situ

\_\_\_\_\_ 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

**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.

## REMEDATION 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.

Pursuant to Rule 703.b, Operator's Financial Assurance is more than enough needed for PA and remediation. As previously stated on Form3, Operator has the financial means to pay for plugging/abandoning and cleaning up the location as necessary.

Pursuant to Rule 705.b, Operator maintains general liability insurance coverage for property damage, bodily injury to third parties, and sudden or accidental pollution that requires Remediation, with no exclusion for claims arising from operator-caused seismicity from oil or gas Wells, in the minimum amount of \$5,000,000 per occurrence.

Operator anticipates the remaining cost for this project to be: \$ 20000

### 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:

## REMEDATION COMPLETION REPORT

### REMEDATION 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.

Facility will be reclaimed per 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). 05/17/2023

Proposed site investigation commencement. 10/05/2023

Proposed completion of site investigation. 12/27/2023

### 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 needs to excavate impacted soil. Implementation schedule gives ECMC 30 days to approve this Form 27, and another 30 days for excavation and subsequent soil sampling.

**OPERATOR COMMENT**

Operator has addressed all previous COA's in the Correspondence attachment.

Per Rule 915.a and associated Operator Training and based on the Pathway to GW Evaluation in the Attachments, Operator respectfully requests that the soil data for this project be subject to the Residential Soil Screening Levels of Table 915-1.

Per Rule 915.e.(2).C., Operator respectfully requests that soil suitability for reclamation and metals be removed from the analytical suite for any ensuing soil samples for this project. This request is based on the fact that EC, SAR, and boron were not detected above applicable criteria. pH was detected above applicable criteria in 2 of the soil samples but was also above applicable criteria in 2 of the background samples. The metals request is based on the fact that the Operator has demonstrated that there is no pathway to GW and, as such, arsenic is the only metal that exceeds residential criteria. Using Table 915-1 footnote 11, the background sample BG-2 has a high enough arsenic concentration to disregard arsenic.

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

Signed: Kent Gilbert

Title: Managing Partner

Submit Date: 10/27/2023

Email: kgoil@msn.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: Kyle Waggoner

Date: 11/16/2023

Remediation Project Number: 29170

**COA Type****Description**

	The pH of soil samples collected at the site exceeds the allowable level for Table 915-1 soil suitability for reclamation for pH and exceeds the background sample presented. Therefore, Operator will define the extent of soil with elevated pH, and if Operator proposes to leave soil with elevated pH in place, Operator will submit a Reclamation plan pursuant to Rule 915.b.
	Approval of this Form 27 does not imply approval of pre-abandonment in place notice required by Rule 1105.d.(2).
	Operator will continue quarterly reporting until the site investigation is complete and Table 915-1 standards are met within the remediation area
	Operators request to use Table 915-1 RSSL is granted.
4 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**

403574715	FORM 27-SUPPLEMENTAL-SUBMITTED
403574721	ANALYTICAL RESULTS
403574722	OTHER
403574724	LOGS
403574727	PHOTO DOCUMENTATION
403574729	ANALYTICAL RESULTS
403574730	OTHER
403574787	MAP
403574847	CORRESPONDENCE

Total Attach: 9 Files

**General Comments**



<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)