

State of Colorado
Energy & Carbon Management Commission

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Document Number:
403673639

Receive Date:

Report taken by:

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: NOBLE ENERGY INC	Operator No: 100322	Phone Numbers Phone: (303) 228-4000 Mobile: ()
Address: 2001 16TH STREET SUITE 900		
City: DENVER	State: CO	Zip: 80202
Contact Person: Lauren Hoff	Email: DenverRegulatory@chevron.onmicrosoft.com	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: _____ Initial Form 27 Document #: 403673639

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: WELL	Facility ID: _____	API #: 123-31936	County Name: WELD
Facility Name: LYSTER E26-22DX	Latitude: 40.455280	Longitude: -104.623130	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: NESE	Sec: 26	Twps: 6N	Range: 65W Meridian: 6 Sensitive Area? Yes

SITE CONDITIONS

General soil type - USCS Classifications SW Most Sensitive Adjacent Land Use Cropland

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

Residential 0.17mi SE
Farm Structure 0.19mi SE
Apparent Irrigation Ditch 0.13mi NE

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	GROUNDWATER	NA	Lab analysis if encountered
UNDETERMINED	SOILS	NA	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 ECMC Rule 911 a site investigation will be conducted pertaining to the LYSTER E26-22D wellhead cut and cap and flowline abandonment. The wellhead will be cut and capped per ECMC rules. Approximately 2055' of flowline will be abandoned-in-place. This flowline lies in a common trench with at least one other line. So as to not disturb the other line(s) sharing the common trench, soil samples will only be taken at the wellhead and at the endpoint of the flowline. The ECMC will be updated in a supplemental Form 27 if a portion of the flowline is able to be removed. The Flowline Pre-Abandonment Notice Document number is 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):

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 at the wellhead excavation. A grab confirmation soil sample will be collected at the wellhead excavation and start/end points of the flowline. Additionally, soil samples will be field screened at the N-E-S-W sides of the wellhead. Soil samples will be analyzed by a certified laboratory for the full extent of Table 915-1, including but not limited to: TPH (total volatile [C6-C10] and extractable [C10-C36] hydrocarbons) organic compounds in soil per ECMC Table 915-1, and EC, SAR, pH, metals, and boron. All samples collected will be analyzed by a certified laboratory using approved ECMC 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 and inorganic compounds per ECMC Table 915-1; this sample analysis includes, but is not limited to BTEX, naphthalene, 1,2,4-trimethylbenzene (TMB), and 1,3,5-TMB by EPA Method 8260, chloride and sulfate anions by EPA Method 300.0, and total dissolved solids (TDS) by Method SM 2540C.

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 area will occur during abandonment activities. Field personnel will field screen all disturbed areas using visual and olfactory senses to determine if laboratory confirmation sampling is required. The ECMC Wellhead Closure Checklist will be utilized and filled out during the abandonment process. A photolog will be submitted on 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? _____
Approximate areal extent (square feet) _____

NA / ND

Highest concentration of TPH (mg/kg) _____
Highest concentration of SAR _____
BTEX > 915-1 _____
Vertical Extent > 915-1 (in feet) _____

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?

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 at this time.

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)
_____ Chemical oxidation
_____ Air sparge / Soil vapor extraction
_____ 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.

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 ECMC 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. 01/25/2024

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. 03/15/2024

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

This Form 27 is the notification of the planned Cut & Cap and ABIP of flowline activity associated with the LYSTER E26-22D well.

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

Signed: Julie Webb

Title: Senior Regulatory Analyst

Submit Date: _____

Email: RBUEUF27@chevron.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: _____

COA Type**Description**

<u>COA Type</u>	<u>Description</u>
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**

403673670	SITE MAP
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Total Attach: 1 Files

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

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

Total: 0 comment(s)