

State of Colorado  
Energy & Carbon Management Commission

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Document Number:  
403697350  
Receive Date:  
02/23/2024

Report taken by:  
Krystal Heibel

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>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>	Phone Numbers Phone: <u>(970) 332-3585</u> Mobile: <u>( )</u>
Address: <u>305 S RIDGE STREET #6279</u>		
City: <u>BRECKENRIDGE</u>	State: <u>CO</u>	Zip: <u>80424</u>
Contact Person: <u>Pat Dolezal</u>	Email: <u>pat.dolezal@ownresources.com</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 34273 Initial Form 27 Document #: 403697350

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>LOCATION</u>	Facility ID: <u>468486</u>	API #: _____	County Name: <u>YUMA</u>
Facility Name: <u>Brophy J 04-05</u>	Latitude: <u>40.262951</u>	Longitude: <u>-102.547378</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>NWNW</u>	Sec: <u>5</u>	Twp: <u>3N</u>	Range: <u>46W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

SITE CONDITIONS

General soil type - USCS Classifications SM Most Sensitive Adjacent Land Use Irrigated farm ground  
 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**

designated groundwater management area, designated basin, no high priority habitats

**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	soil 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.

Buried produced water tank will be excavated and completely removed from location. Produced water line will be plumbed to existing half buried produced water tank on location.

**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 ):

After tank removed, four sidewalls and four floor quadrants will be screened. One sample will be taken at highest soil screening location, or highest visible staining location, or at inlet to tank. One background sample will be taken. Both samples will be sent for full Table 915-1 analysis.

**Proposed Groundwater Sampling**

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

Groundwater samples will only be taken if groundwater encountered during excavation

**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 0

Highest concentration of TPH (mg/kg) \_\_\_\_\_

Number of soil samples exceeding 915-1 \_\_\_\_\_

Highest concentration of SAR \_\_\_\_\_

Was the areal and vertical extent of soil contamination delineated? \_\_\_\_\_

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 known source to be removed

**REMEDATION 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.

no remediation summary to submit at this time

**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

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 remediation \_\_\_\_\_

## 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.

Own Resources Operating is following the minimum insurance requirements of Rule 705.b and these insurances are registered with the ECMC as per Rules 705.d and 705.e. The ECMC requires a minimum of \$5M of liability coverage, which exceeds Remediation Costs.

Operator anticipates the remaining cost for this project to be: \$ 0 \_\_\_\_\_

## 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.

All disturbed areas affected will be reclaimed as early and as close to their original condition or their final land use as designated by the surface owner and shall be maintained to minimize erosion. In crop lands, where necessary, added topsoil will be added to the depression and the surface will be left as close to its original contour as possible. The area shall be treated if necessary and practical to prevent invasion of undesirable species and noxious weeds, and to control erosion.

Non crop land will be contoured as close to original as possible to control erosion. The disturbed area will be reseeded in the first favorable season, if necessary. Reclamation of all disturbed areas no longer in use shall be considered complete when all surface is stabilized to minimize erosion and a uniform vegetative cover of at least eighty percent (80%).

Excavation area will mainly be inside of fenced location with multiple meter sheds. Reclamation will be completed on day of filling excavated area

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. 04/01/2024

Proposed date of completion of Reclamation. 04/01/2024

## 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. 02/01/2024

Actual Spill or Release date, or date of discovery. \_\_\_\_\_

### SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 04/01/2024

Proposed site investigation commencement. 04/01/2024

Proposed completion of site investigation. 04/01/2024

### REMEDIAL ACTION DATES

Proposed start date of Remediation. 04/01/2024

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: Pat Dolezal

Title: Regulatory Specialist

Submit Date: 02/23/2024

Email: pat.dolezal@ownresources.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: Krystal Heibel

Date: 03/04/2024

Remediation Project Number: 34273

**COA Type****Description**

	Operator shall submit reports of site investigation including all laboratory analytical results for all samples collected, per Rule 913.h.(4).A..
	If groundwater is encountered, Operator will analyze groundwater samples for Table 915-1 Groundwater Inorganic Parameters (total dissolved solids, sulfate, chloride) and organic compounds in groundwater.
2 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**

403697350	FORM 27-INITIAL-SUBMITTED
403697394	AERIAL IMAGE

Total Attach: 2 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)