

State of Colorado
Energy & Carbon Management Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:

403659783

Receive Date:

01/18/2024

Report taken by:

Krystal Heibel

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 ECMC 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 #: 22082 Initial Form 27 Document #: 402872765

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>303065</u>	API #: _____	County Name: <u>YUMA</u>
Facility Name: <u>BROPHY J-64N46W 27NENE</u>	Latitude: <u>40.291780</u>	Longitude: <u>-102.492350</u>	
	** correct Lat/Long if needed: Latitude: <u>40.291806</u>	Longitude: <u>-102.492424</u>	
QtrQtr: <u>NENE</u>	Sec: <u>27</u>	Twp: <u>4N</u>	Range: <u>46W</u> Meridian: <u>6</u> Sensitive Area? <u>No</u>

SITE CONDITIONS

General soil type - USCS Classifications SM Most Sensitive Adjacent Land Use non irrigated pasture grass

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

designated groundwater management area, designated basin, greater prairie chicken lek site

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
No	SOILS	non	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.

n/a

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):

Two soil samples under tank, one background

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

NA / ND

Number of soil samples collected 3

Number of soil samples exceeding 915-1 0

Was the areal and vertical extent of soil contamination delineated? _____

Approximate areal extent (square feet) 0

Highest concentration of TPH (mg/kg) _____

Highest concentration of SAR _____

BTEX > 915-1 _____

Vertical Extent > 915-1 (in feet) 0

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

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.

n/a

REMEDIAL 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.

Buried tank will be removed, soil samples taken, backfill tank location and erosion on west side of well location with clean fill dirt

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
_____ Other _____

_____ 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

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

ECMC Disposal Facility ID #, if applicable:

Non-ECMC Disposal Facility:

Volume of E&P Waste (liquid) in barrels

E&P waste (liquid) description

ECMC Disposal Facility ID #, if applicable:

Non-ECMC 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? No ☐

Does the previous reply indicate consideration of background concentrations?

Does Groundwater meet Table 915-1 standards? Yes ☐

Is additional groundwater monitoring to be conducted? _____

Operator shall comply with the ECMC 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.

After backfill, site will be seeded

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). 03/01/2022

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

This submission to satisfy quarterly reporting results for Q1 2023.

No photos were taken during excavation and fill work.

Operator is requesting closure of this remediation project. Both samples taken from under the tank were under Table 915-1 Soil Suitability for Reclamation levels and operator believes that full Table 915-1 analysis will show the same.

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: 01/18/2024

Email: pat.dolezal@ownresources.com

Based on the information provided herein, this Application for Site Investigation and Remediation Workplan complies with ECMC Rules and applicable orders and is hereby approved.

ECMC Approved: Krystal Heibel

Date: 03/13/2024

Remediation Project Number: 22082

COA Type**Description**

	As stated in Doc #403544870, Operator shall submit reports of site investigation including all laboratory analytical results for all samples collected, per Rule 913.h.(4).A.. Operator shall submit all analytical data within a analytics summary table.
	Operator shall provide the Form 27 document number where the COGCC/ECMC approved a reduced analyte suite. Otherwise, Operator shall collect confirmation soil samples as described in the Rule 915.e.(2) Guidance Document. Operator will analyze soil samples for TPH (C6-C36), Table 915-1 Organic Compounds in Soil, Table 915-1 metals, and Table 915-1 Soil Suitability for Reclamation (Electrical conductivity, Sodium adsorption ratio, and pH by saturated paste method, boron (hot water soluble)).
	Closure request removed.Operator shall fully populate the implementation schedule in accordance with Rule 913.d on the next Form 27. The "Date of Surface Owner notification/consultation" information is missing.
3 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**

403659783	INVESTIGATION/REMEDATION WORKPLAN (SUPPLEMENTAL)
403659792	ANALYTICAL RESULTS
403659794	SOIL SAMPLE LOCATION MAP
403659804	ANALYTICAL RESULTS
403717471	FORM 27-SUPPLEMENTAL-SUBMITTED

Total Attach: 5 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)