

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:  
403943524

Receive Date:  
\_\_\_\_\_

Report taken by:  
\_\_\_\_\_

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: NOBLE ENERGY INC	Operator No: 100322	<b>Phone Numbers</b>
Address: 1099 18TH STREET SUITE 1500		Phone: (970) 730-7281
City: DENVER State: CO Zip: 80202		Mobile: ( )
Contact Person: Dan Peterson	Email: rbueuf27@chevron.com	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 31034 Initial Form 27 Document #: 403470894

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: WELL	Facility ID: _____	API #: 123-25082	County Name: WELD
Facility Name: CDOT F 1-10	Latitude: 40.426156	Longitude: -104.609012	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: NWSE	Sec: 1	Twp: 5N	Range: 65W Meridian: 6 Sensitive Area? Yes
Facility Type: SPILL OR RELEASE	Facility ID: 486273	API #: _____	County Name: WELD
Facility Name: UWRWE-A3472-ABN	Latitude: 40.426254	Longitude: -104.608822	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: NWSE	Sec: 1	Twp: 5N	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**

Well Within Mule Deer Severe Winter Range HPH  
Well Within Aquatic Native Species Conservation Water HPH  
Residential 0.1mi NE  
Farm Structure 0.09mi SW, 0.13mi NE  
Commercial 0.11mi/ 0.14mi W, 0.13mi NE  
Riverine 0.22mi NE, 0.08mi S, 0.04mi/ 0.06mi/ 0.08mi/ 0.13mi/ 0.17mi/SE  
Freshwater Pond 0.17mi NE, 0.2mi N  
Freshwater Emergent Wetland 0.09mi/ 0.22mi SW, 0.19mi/ 0.2mi E  
Forested/Shrub Riparian 0.21mi SW, 0.07mi/ 0.09mi/ 0.22mi S, 0.08mi/ 0.09mi/ 0.1mi/ 0.13mi/ 0.23mi SE  
Herbaceous Riparian 0.16mi SW, 0.1mi/ 0.19mi SE

# 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 checked="" 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
UNDETERMINED	GROUNDWATER	NA	Lab analysis if encountered
Yes	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 CDOT F01-10 wellhead cut and cap and flowline removal. Approximately 126' of flowline was removed.

The wellhead will be cut and capped per ECMC rules. Additionally, soil samples will be field screened at the N-E-S-W sides of the wellhead. Soil samples will be taken along the flowline at any points of material change and/or hammer unions, directional changes, as well as at the bell holes on either side of a waterway. 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 ):

Grab confirmation soil samples were collected along the flowline at any points of material change and/or hammer unions, directional changes, as well as at the bell holes on either side of a waterway, AS APPLICABLE to abandonment type. Soil samples were analyzed by a certified laboratory for TPH (total volatile [C6-C10] and extractable [C10-C36] hydrocarbons) organic compounds in soil per ECMC Table 915-1, and EC, SAR, pH, and boron. All samples collected were analyzed by a certified laboratory using approved ECMC laboratory analysis methods.

A grab confirmation soil sample will be collected at the wellhead excavation in base of the excavation or the area showing the highest degree of impact during abandonment activities.

### Proposed Groundwater Sampling

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

Groundwater was not encountered during the site investigation.

### 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 along the flowline and at the wellhead and separator areas occurred during abandonment activities. Field personnel field screened all disturbed areas using visual and olfactory senses to determine if laboratory confirmation sampling was required. The applicable ECMC Closure Checklists were utilized and filled out during the abandonment process. A photolog is attached.

# SITE INVESTIGATION REPORT

## SAMPLE SUMMARY

### Soil

Number of soil samples collected 8  
Number of soil samples exceeding 915-1 8  
Was the areal and vertical extent of soil contamination delineated? No  
Approximate areal extent (square feet) 100

### NA / ND

ND Highest concentration of TPH (mg/kg) \_\_\_\_\_  
-- Highest concentration of SAR 0.884  
BTEX > 915-1 No  
Vertical Extent > 915-1 (in feet) 3

### 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?

Five background samples were collected from an area not impacted by oil and gas development at similar depths and lithologies as confirmation samples collected at the CDOT F 1-10 flowline location and analyzed for ECMC Table 915-1 metals and soil suitability for reclamation standards (pH, EC, SAR, and Boron). See Tables 3 and 4 of the attached for details.

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? Yes

### SOURCE REMOVAL SUMMARY

Describe how source is to be removed.

Impacted soil will be removed from the release area at the CDOT F 1-10 flowline location by excavation. The impacted soil will be disposed of at an approved landfill as non-hazardous waste in accordance with Rules 905 and 906. Copies of the waste manifests will be available upon request.

### REMEDICATION 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.

Excavation of impacted soil will be undertaken to remove impacts observed at approximately three feet below ground surface at the 'FL02 3Ft' location. The operator proposes to use the impacted 'FL02 3Ft' sample as a waste characterization sample and is requesting to analyze confirmation soil samples collected from the excavation for ECMC Table 915-1 Polycyclic Aromatic Hydrocarbons [PAHs] only based on the laboratory results provided in the attached data package. The operator will also analyze soil samples for BTEX and pH per ECMC COA provided on Doc. # 403686817.

Groundwater is estimated to be located at 30 feet below ground surface based on Colorado Division of Water Resources data from a commercial well located within a quarter mile of the release location (Permit No. 222813). Since there is a separation of >20 feet between impacted soil and groundwater the operator proposes to use the residential soil screening levels (RSSLs) for all future remedial activities related to this release.

Should no additional active remediation be required following source removal at the location, a no further action (NFA) determination will be requested within 90 days following laboratory confirmation of the removal of impacted soils with respect to the applicable Table 915-1 screening levels at the site. If groundwater impacts are observed, an NFA will be requested once four consecutive quarters of groundwater sampling have been completed and reported at the location with concentrations of Table 915 constituents below regulatory limits.

**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 ECMC 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.

NA

# 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.

Noble intends to directly address the costs of remediation at the locations as part of our asset retirement obligation process and operations. Noble has general liability insurance (policy MWZZ 316714) and financial assurance in compliance with ECMC rules. Records are available on the ECMC's website. The cost for remediation is an estimate only, costs may change upwards or downward based on site-specific information. Noble makes no representation or guarantees as to the accuracy of the estimate.

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

## 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?

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 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.

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. 06/29/2023

Actual Spill or Release date, or date of discovery. 02/13/2024

### SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 01/12/2024

Proposed site investigation commencement. 09/01/2023

Proposed completion of site investigation. \_\_\_\_\_

### REMEDIAL ACTION DATES

Proposed start date of Remediation. 02/14/2024

Proposed date of completion of Remediation. 08/14/2024

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 serves as a request to change to the reporting schedule from :Within 90 days receipt of excavation lab data" to quarterly.

The operator completed the excavation as outlined in this proposed Remedial Action workplan on 9/19/24 and is currently preparing a detailed excavation report. Supplemental Form 27s will be prepared and submitted on a quarterly schedule to provide updates and progress of the remediation until closure criteria has been achieved.

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

Signed: Ethan Black

Title: Consultant

Submit Date: \_\_\_\_\_

Email: ethanb@fremontenv.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: \_\_\_\_\_

Date: \_\_\_\_\_

Remediation Project Number: 31034

**COA Type**

**Description**

<u>COA Type</u>	<u>Description</u>
0 COA	

**ATTACHMENT 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**

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 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)