

State of Colorado  
Energy & Carbon Management Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:

403929582

Receive Date:

09/24/2024

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: IMPETRO RESOURCES LLC	Operator No: 10690	Phone Numbers
Address: 558 CASTLE PINES PKWY UNIT B-4		Phone: (361) 935-5633
City: CASTLE PINES	State: CO	Zip: 80108
Contact Person: Brent Bongers	Email: bbongers@impetroresources.com	Mobile: ( )

## PROJECT, PURPOSE &amp; SITE INFORMATION

## PROJECT INFORMATION

Remediation Project #: 13462 Initial Form 27 Document #: 402018929

## 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: SPILL OR RELEASE	Facility ID: 460342	API #: _____	County Name: WASHINGTON
Facility Name: Walters Pit	Latitude: 40.133580	Longitude: -102.863580	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: NENW	Sec: 21	Twp: 2N	Range: 49W
Meridian: 6	Sensitive Area? Yes		

## SITE CONDITIONS

General soil type - USCS Classifications SM Most Sensitive Adjacent Land Use Crop Land

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? Yes

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

A receptors map was submitted with Form 27 Doc #403835103

**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
Yes	SOILS	SAR above Table 915-1	Analytical

**INITIAL ACTION SUMMARY**

Description of initial action or emergency response measures take to abate, investigate, and/or remediate impacts associated with E&P Waste.

This Form 27 is being submitted to comply with quarterly reporting requirements. Samples will be collected at the same time as the site investigation for Remediation Project #7096.

**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 ):

Samples will be collected from the locations on the proposed soil sample location map attached to Form 27 Doc #403731506.

**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 5

Number of soil samples exceeding 915-1 1

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

Approximate areal extent (square feet) 12500

NA Highest concentration of TPH (mg/kg)

-- Highest concentration of SAR 21.28

BTEX > 915-1 No

Vertical Extent > 915-1 (in feet) 0

#### Groundwater

Number of groundwater samples collected 0

Was extent of groundwater contaminated delineated? Yes

Depth to groundwater (below ground surface, in feet) 229

Number of groundwater monitoring wells installed 0

Number of groundwater samples exceeding 915-1 0

NA Highest concentration of Benzene (µg/l)

NA Highest concentration of Toluene (µg/l)

NA Highest concentration of Ethylbenzene (µg/l)

NA Highest concentration of Xylene (µg/l)

NA Highest concentration of Methane (mg/l)

#### Surface Water

0 Number of surface water samples collected

0 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?

Soil samples across the spill area which extended across the county road into adjacent crop land.

☒ Were background samples collected as part of this site investigation?

Soil samples were collected as background samples in the cropland as shown on the map attached to Form 27 Doc #403731506.

☐ 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.

Monitor the spill area as a remediation project going forward. Once the crops in the spill area have demonstrated viability, the remediation project can be closed.

#### 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.

Monitor the spill area as a remediation project going forward. Once the crops in the spill area have demonstrated viability, the remediation project can be closed. This will occur over the next 12 months.

#### 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  
☐ Other \_\_\_\_\_

☐ Excavate and onsite remediation  
☐ Land Treatment  
☐ Bioremediation (or enhanced bioremediation)  
☐ Chemical oxidation  
☐ Other \_\_\_\_\_

**Groundwater Remediation Summary**

☐ No      Bioremediation ( or enhanced bioremediation )  
☐ No      Chemical oxidation  
☐ No      Air sparge / Soil vapor extraction  
☐ Yes     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.

N/A

## 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.

Operator carries general liability insurance of \$1,000,000.00 per occurrence and \$4,000,000.00 in excess. Operator carries \$25,000.00 blanket surface surety bond.

Operator anticipates the remaining cost for this project to be: \$ 1000

### WASTE DISPOSAL INFORMATION

Was E&P waste generated as part of this remediation? Yes

Describe beneficial use, if any, of E&P Waste derived from this remediation project:

Produced water picked up out of the bar ditch using a vac truck.

Volume of E&P Waste (solid) in cubic yards 0

E&P waste (solid) description

ECMC Disposal Facility ID #, if applicable:

Non-ECMC Disposal Facility:

Volume of E&P Waste (liquid) in barrels 180

E&P waste (liquid) description Produced Water

ECMC Disposal Facility ID #, if applicable:

Non-ECMC Disposal Facility: Placed back in produced water pit

## 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?

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.

Monitor the spill area as a remediation project going forward. Once the crops in the spill area have demonstrated viability, the remediation project can be closed.

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. 12/20/2018

Actual Spill or Release date, or date of discovery. 12/19/2018

### SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 12/20/2018

Proposed site investigation commencement. 12/20/2018

Proposed completion of site investigation. 11/30/2024

### REMEDIAL ACTION DATES

Proposed start date of Remediation. 12/20/2018

Proposed date of completion of Remediation. 12/31/2024

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**

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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: Drezden Kinnaird

Title: Consultant

Submit Date: 09/24/2024

Email: dkinnaird@cgrs.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: 12/20/2024

Remediation Project Number: 13462

**COA Type****Description**

	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)).
1 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**

403929582	INVESTIGATION/REMEDATION WORKPLAN (SUPPLEMENTAL)
404036369	FORM 27-SUPPLEMENTAL-SUBMITTED

Total Attach: 2 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)