

State of Colorado
Energy & Carbon Management Commission

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404066172
Receive Date:
01/22/2025
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 ECOM 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: WESTERN OPERATING COMPANY	Operator No: 95620	Phone Numbers Phone: (303) 726-8650 Mobile: ()
Address: 1165 DELAWARE STREET #200		
City: DENVER	State: CO	Zip: 80204
Contact Person: Steve James	Email: steve@westernoperating.com	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 38529 Initial Form 27 Document #: 404066172

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 #: 087-05130	County Name: MORGAN
Facility Name: PETERSON, MAX 1	Latitude: 40.024030	Longitude: -103.623920	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SENE	Sec: 27	Twp: 1N	Range: 56W Meridian: 6 Sensitive Area? No

Facility Type: LOCATION	Facility ID: 313655	API #: _____	County Name: MORGAN
Facility Name: PETERSON, MAX-61N56W 27SENE	Latitude: 40.024030	Longitude: -103.623920	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SENE	Sec: 27	Twp: 1N	Range: 56W Meridian: 6 Sensitive Area? No

Facility Type: OFF-LOCATION FLOWLINE Facility ID: 479480 API #: _____ County Name: MORGAN
Facility Name: Wellhead Line 27SENW Latitude: 40.024039 Longitude: -103.633289
** correct Lat/Long if needed: Latitude: _____ Longitude: _____
QtrQtr: SENW Sec: 27 Twp: 1N Range: 56W Meridian: 6 Sensitive Area? No

SITE CONDITIONS

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

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

Closest Domestic Well within quarter mile – None
Additional Water Wells – Permit 96-WCB 0.56mi East
Nearest Surface Water – 0.89 mile northwest
Nearest Occupied Building – None
No other potential receptors or wildlife high priority habitats are located within ¼ mile of the Site
Above distances are approximations

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 checked="" 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	SOILS	No known impacts	Investigation pending

INITIAL ACTION SUMMARY

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

In accordance with COGCC Rule 911, this form serves as notification for the decommissioning and abandonment of the Peterson, Max #1 wellhead. See Figure 1 for a General Location Map of the wellhead area. Final plugging operations are scheduled for 1st quarter 2025. The ground and sub-surfaces will be visually inspected for hydrocarbon impacts during equipment decommissioning

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):

Soil samples will be collected from the floor and sidewalls in cardinal directions of the wellhead for field screening purposes. Discrete grab confirmation soil samples will be collected for laboratory analysis either in any area of suspected hydrocarbon impacts, or, absent any suspected soil impacts, adjacent to the cut and capped wellhead and from below the wellhead flowline riser. Soil samples will be submitted to an accredited laboratory for analysis of TPH (C6-C36), Table 915-1 Organic Compounds in Soil, Table 915-1 metals, and Table 915-1 Soil Suitability for Reclamation. See the attached Figure 2 for an illustration of the wellhead and proposed soil sample locations.

Proposed Groundwater Sampling

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

If groundwater is encountered during decommissioning and/or abandonment activities, a grab sample will be collected as soon as practical. If contaminated soil is in contact with groundwater or if free product/hydrocarbon sheen are observed, the release will be reported in accordance with Rule 912.b. Groundwater samples will be submitted for laboratory analysis of Table 915-1 Groundwater Inorganic Parameters and Organic Compounds in Groundwater.

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.

If a suspected release is identified through soil screening and/or laboratory analysis, soils may be removed and transported to a licensed disposal facility. If all source material cannot be removed during excavation activities, alternative plans will be proposed in subsequent Form 27 supplemental.

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.

If reportable soil impacts, as defined in Rule 912.b., are discovered, a Form 19 Spill/Release report will be submitted and a site-specific remediation plan will be developed and submitted via a Supplemental Form 27.

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.

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.

Western Operating has \$5,000,000 in liability insurance and is currently adequately bonded.

Operator anticipates the remaining cost for this project to be: \$ 5000 _____

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: _____

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.

Final reclamation will be conducted in accordance with COGCC 1004 Series Rules.

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. 12/18/2024

Actual Spill or Release date, or date of discovery. _____

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 01/22/2025

Proposed site investigation commencement. 02/14/2025

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 serves as notification for the decommissioning of the Peterson Max wellhead and related wellhead flowline. Wellhead cut and cap activities are planned to begin 1st quarter, 2025. The related wellhead line will be abandoned in place per landowner agreement. A Form 44 pre-notification will be filed as soon as possible. This schedule may be adjusted due to unforeseen circumstances, delays, and/or changes in weather. The related tank battery (Facility ID: 477262) and associated facilities will not be decommissioned at this time.

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

Signed: Ryan Finley

Title: Senior Project Geologist

Submit Date: 01/22/2025

Email: rfinley@entradainc.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: 01/22/2025

Remediation Project Number: 38529

COA Type**Description**

	Operator shall clarify if the off-location flowlines are being removed or abandoned-in-place.
	In accordance with Rule 913.e.(3), Operator will adopt a quarterly reporting schedule. ECMC selected Quarterly under Remediation Progress Update.
	Operator shall attach a Soil Sample Location Map that illustrates the location of the off-location flowline (Facility ID: 479480) along with field screening locations and soil sample locations.
	Operators will collect and submit for laboratory analysis a soil sample collected from the areas most likely to have been impacted during the operational life of the flowline. These areas include, but are not limited to: where Flowlines connect to the wellhead, surface equipment, risers, valves, or manifolds; where Flowlines bend or were repaired in the past and at joints and hammer unions; where Flowlines connect to Flowlines or equipment of different material; and where Flowlines crossed drainages or surface water or are in contact with shallow groundwater.
	Operator shall conduct an environmental investigation to confirm the presence or absence of impacts adjacent to the flowline at a minimum of every 250'.
5 COAs	

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
404066172	INVESTIGATION/REMEDATION WORKPLAN (INITIAL)
404066229	MAP
404066230	SITE INVESTIGATION PLAN
404066727	FORM 27-INITIAL-SUBMITTED

Total Attach: 4 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)