

**State of Colorado**  
**Energy & Carbon Management Commission**

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404040273  
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Report taken by:  
Alexander Ahmadian

**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 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>CRESTONE PEAK RESOURCES OPERATING LLC</u>	Operator No: <u>10633</u>	<b>Phone Numbers</b>
Address: <u>555 17TH STREET SUITE 3700</u>	City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Phone: <u>(303) 294-7864</u>
Contact Person: <u>Jacob Evans</u>	Email: <u>jevans@civiresources.com</u>	Mobile: <u>( )</u>

**PROJECT, PURPOSE & SITE INFORMATION**

**PROJECT INFORMATION**

Remediation Project #: 38865 Initial Form 27 Document #: 404040273

**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: <u>WELL</u>	Facility ID: _____	API #: <u>014-20657</u>	County Name: <u>BROOMFIELD</u>
Facility Name: <u>BAKER 32-27</u>	Latitude: <u>40.024045</u>	Longitude: <u>-104.987729</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SWNE</u>	Sec: <u>27</u>	Twp: <u>1N</u>	Range: <u>68W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

Facility Type: <u>WELL</u>	Facility ID: _____	API #: <u>014-20658</u>	County Name: <u>BROOMFIELD</u>
Facility Name: <u>BAKER 31-27</u>	Latitude: <u>40.024040</u>	Longitude: <u>-104.987762</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SWNE</u>	Sec: <u>27</u>	Twp: <u>1N</u>	Range: <u>68W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

Facility Type: WELL	Facility ID: _____	API #: 014-20694	County Name: BROOMFIELD
Facility Name: BAKER 4-2-27	Latitude: 40.024034	Longitude: -104.987795	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SWNE	Sec: 27	Twp: 1N	Range: 68W Meridian: 6 Sensitive Area? Yes

Facility Type: WELL	Facility ID: _____	API #: 014-20695	County Name: BROOMFIELD
Facility Name: BAKER 6-4-27	Latitude: 40.024028	Longitude: -104.987832	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SWNE	Sec: 27	Twp: 1N	Range: 68W Meridian: 6 Sensitive Area? Yes

Facility Type: OFF-LOCATION FLOWLINE	Facility ID: 473601	API #: _____	County Name: BROOMFIELD
Facility Name: BAKER C UNIT-61N68W 27SENE	Latitude: 40.025646	Longitude: -104.983961	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SENE	Sec: 27	Twp: 1N	Range: 68W Meridian: 6 Sensitive Area? Yes

Facility Type: OFF-LOCATION FLOWLINE	Facility ID: 473602	API #: _____	County Name: BROOMFIELD
Facility Name: BAKER C UNIT-61N68W 27SENE	Latitude: 40.025646	Longitude: -104.984007	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SENE	Sec: 27	Twp: 1N	Range: 68W Meridian: 6 Sensitive Area? Yes

Facility Type: FLOWLINE SYSTEM	Facility ID: 485466	API #: _____	County Name: WELD
Facility Name: CPR Flowline System	Latitude: 40.154619	Longitude: -104.892886	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SENE	Sec: 9	Twp: 2N	Range: 67W Meridian: 6 Sensitive Area? Yes

**SITE CONDITIONS**

General soil type - USCS Classifications CL \_\_\_\_\_ Most Sensitive Adjacent Land Use Cropland \_\_\_\_\_

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**

No surface water within 1/4 of a mile.  
 The Monitoring Well (DWR Receipt 0023688, Permit 23688-MH) approx 80-ft to the NW is the nearest permitted water well. This well was never constructed.  
 The planned construction depth was 20-ft, no static water level recorded. Residential Well (DWR Receipt 0202996, Permit 113861-) is approx 475-ft to the SE.  
 This well was constructed to 790-ft, static water level recorded at 200-ft. Commercial Well (DWR Receipt 9061560, Permit 13369-F) approx 760-ft to the NW.  
 This well was constructed to 675-ft, static water level recorded at 200-ft.  
 Groundwater less than 20 ft is not expected at the disturbance location.  
 This location is not within a HPH area. CPW consultation not required.

# SITE INVESTIGATION PLAN

## TYPE OF WASTE:

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> E&P Waste      | <input type="checkbox"/> Other E&P Waste             | <input checked="" type="checkbox"/> Non-E&P Waste |
| <input checked="" type="checkbox"/> Produced Water | <input type="checkbox"/> Workover Fluids             | No waste has been generated to date               |
| <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	N/A	Laboratory 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.

A site investigation will be conducted pursuant to COGCC rule 911 at the BAKER/32-27 (380085) oil and gas location pertaining to the cut/cap of the BAKER 6-4-27 (05-014-20695), BAKER 4-2-27 (05-014-20694), BAKER 31-27 (05-014-20658) and BAKER 32-27 (05-014-20657) and decommission of the BAKER 6-4-27 (01420695\_FL), BAKER 4-2-27 (01420694\_FL), BAKER 31-27 (01420658\_FL) and BAKER 32-27 (01420657\_FL) WH Lines. See site map exhibit for details.

## 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 will be collected from beneath the wellhead and flowline start/end points. Potholes will be dug every 250 feet along the flowline path. These observation points will be photographed and field screened. Additional soil samples will be collected when flowline repairs are observed, changes in flow direction, or when there is a change in the flowline material type. Soil samples will be analyzed by a certified laboratory for TPH (total volatile [C6-C10] and extractable [C10-C36] hydrocarbons), organic compounds in soil per COGCC Table 915-1, and EC, SAR, pH, metals, and boron. All samples collected will be analyzed by a certified laboratory using approved COGCC laboratory analysis methods.

### Proposed Groundwater Sampling

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

If groundwater is encountered during the site investigation a grab groundwater sample will be collected and analyzed for all organic and inorganic compounds per ECMC Table 915-1.

### 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 of the location will occur during decommission activities. Field personnel will field screen all disturbed areas using visual and olfactory senses to determine if laboratory confirmation sampling is required. The COGCC Flowline Closure and Wellhead Closure Checklists will be utilized and filled out during the decommission process. A photolog will be submitted on the Subsequent Form 27.

# 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.

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.

N/A

**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.



# 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 COGCC 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. 12/11/2024

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

### SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 01/31/2025

Proposed site investigation commencement. 02/03/2025

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 Intent is submitted prior to decommissioning the following assets:

- Cut/cap of the BAKER 6-4-27 (05-014-20695)
- Cut/cap of the BAKER 4-2-27 (05-014-20694)
- Cut/cap of the BAKER 31-27 (05-014-20658)
- Cut/cap of the BAKER 32-27 (05-014-20657)
- Decommission of off-location flowlines BAKER 6-4-27 (01420695\_FL), BAKER 4-2-27 (01420694\_FL), BAKER 31-27 (01420658\_FL) and BAKER 32-27 (01420657\_FL) WH lines.

Please see related flowline pre-abandonment notices for specifics on planned field operations  
See attached Site Map for details.

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

Signed: Stephany Olsen

Title: Sr Regulatory Analyst

Submit Date: 01/01/2025

Email: regulatory@civiresources.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: Alexander Ahmadian

Date: 02/11/2025

Remediation Project Number: 38865

**COA Type****Description**

	Operator shall conduct an environmental investigation to confirm by laboratory sample the presence or absence of impacts adjacent to the flowline in all applicable locations: -where the line crosses an unnamed drainage -where the line changes direction -both endcaps (risers) -every 250ft (field screen)
	Operator shall fully populate the implementation schedule in accordance with Rule 913.d on the subsequent Supplemental Form 27.
	Location is adjacent to a jurisdictional Wetlands as mapped on the National Wetland Inventory Maps. In the event that operations encroach upon the wetlands, Operator shall consult with the US Army Corps of Engineers regarding compliance with Sections 401 and 404 of the Clean Water Act. Operator shall submit all communications/permits obtained to the ECMC via Form 4 Sundry. Note: Approval of this Form 27 does not supersede any Federal, State or Local regulations.

3 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.

<b>Att Doc Num</b>	<b>Name</b>
404040273	INVESTIGATION/REMEDATION WORKPLAN (INITIAL)
404045302	SITE MAP
404088554	FORM 27-INITIAL-SUBMITTED

Total Attach: 3 Files

**General Comments**

<b>User Group</b>	<b>Comment</b>	<b>Comment Date</b>
		Stamp Upon Approval

Total: 0 comment(s)