

State of Colorado
Energy & Carbon Management Commission

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Document Number:
404117156

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	Phone Numbers
Address: 1099 18TH STREET SUITE 1500		Phone: (303) 597-6847
City: DENVER State: CO Zip: 80202		Mobile: ()
Contact Person: Phillip Porter	Email: RBUEUF27@chevron.com	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 23914 Initial Form 27 Document #: 403097976

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: WELL	Facility ID: _____	API #: 123-10553	County Name: WELD
Facility Name: EASTON 12-1	Latitude: 40.328710	Longitude: -104.613830	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SENW	Sec: 12	Twps: 4N	Range: 65W Meridian: 6 Sensitive Area? Yes

SITE CONDITIONS

General soil type - USCS Classifications SW Most Sensitive Adjacent Land Use Industrial Land

Is domestic water well within 1/4 mile? Yes 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

Industrial Structures 0.03mi W, 0.08/0.12mi NE
Airport 0.1mi NE
Residential 0.15mi S, 0.18mi E, 0.22mi N
Farm Structure 0.21mi E, 0.15/0.19mi S
Baseball Field 0.2mi SE
Riverine 0.23mi W

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	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 COGCC Rule 911 a site investigation will be conducted pertaining to the EASTON 12-01 wellhead cut and cap and flowline removal. Approximately 691' of flowline was removed. The wellhead was cut and capped per COGCC rules. Additionally, soil samples were collected 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. The Flowline Pre-Abandonment Notice Document number was included under Related Forms.

A grab soil sample was collected at the base of the excavation or the area showing the highest degree of impact during field screening activities at the wellhead excavation. Additionally, soil samples were collected 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. A grab confirmation soil sample was collected at the wellhead excavation. Soil samples were analyzed by a certified laboratory for ECMC Table 915-1 compounds. All samples collected were analyzed by a certified laboratory using approved COGCC laboratory analysis methods.

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):

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 0

Number of soil samples exceeding 915-1 0

Was the areal and vertical extent of soil contamination delineated?

Approximate areal extent (square feet) 0

ND Highest concentration of TPH (mg/kg)

-- Highest concentration of SAR 0.699

BTEX > 915-1 No

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?

A background sample was collected from similar lithographic soil adjacent to the assessment area for pH analysis. Background pH was outside of the ECMC Table 915-1 regulatory range. In the flowline sample FL-02 3FT, pH was outside of the ECMC Table 915-1 regulatory range but below background.

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.

No source was generated

REMEDIATION 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.

NA

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

____ 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 NFA Request - Final Report

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 NFA Request - Final Report, verified lab reports attached

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 intends to directly address the costs of remediation at the locations as part of our asset retirement obligation process and operations. Operator has general liability insurance (policy MWZZ 316714) and financial assurance in compliance with ECMC rules. Records are available on the ECMC's website.

Operator anticipates the remaining cost for this project to be: \$ 0

WASTE DISPOSAL INFORMATION

Was E&P waste generated as part of this remediation? No

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? Yes

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? Yes

Does the previous reply indicate consideration of background concentrations? Yes

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.

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. 06/07/2022

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

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). _____

Proposed site investigation commencement. 07/15/2022

Proposed completion of site investigation. _____

REMEDIAL ACTION DATES

Proposed start date of Remediation. _____

Proposed date of completion of Remediation. 12/12/2022

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 SF27 represents a 1Q25 TU for EASTON 12-1. The WH sampling was conducted by Eagle consulting in October 2022 and identified no organic exceedances. Elevated pH above 8.3 was observed; however, the confirmation background sample also exceeded the 915-1 criteria. Secured analytical data reports are attached. Upon receipt of a secured laboratory report, analytical findings will be summarized and provided. SF27s will continue to be submitted on a quarterly basis.

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

Signed: Justin Onwiler

Title: Environmental Consultant

Submit Date: _____

Email: cvxform27@erm.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: 23914

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**

404117215	ANALYTICAL RESULTS
404117217	ANALYTICAL RESULTS

Total Attach: 2 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)