

State of Colorado
Energy & Carbon Management Commission

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Document Number:

404110352

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 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: NOBLE ENERGY INC | Operator No: 100322 | Phone Numbers Phone: (330) 597-6847 Mobile: () |
| Address: 1099 18TH STREET SUITE 1500 | | |
| City: DENVER | State: CO | Zip: 80202 |
| Contact Person: Phillip Porter | Email: RBUEUF27@chevron.com | |

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 27627 Initial Form 27 Document #: 403310423

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 #: 123-15216 | County Name: WELD |
| Facility Name: HSR-TUDOR 11-31A | Latitude: 40.267140 | Longitude: -104.708490 | |
| ** correct Lat/Long if needed: Latitude: _____ | | Longitude: _____ | |
| QtrQtr: NESW | Sec: 31 | Twps: 4N | Range: 65W Meridian: 6 Sensitive Area? Yes |

SITE CONDITIONS

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

Freshwater Pond 0.17mi NE

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 |
|-----------|----------------|------------------|-----------------|
| No | GROUNDWATER | NA | Not encountered |
| No | 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 was conducted pertaining to the HSR-TUDOR 11-31A wellhead cut and cap and flowline removal. The wellhead was cut and capped per ECMC rules. Approximately 737' of flowline was removed.

Three (3) grab soil samples were collected at the wellhead excavation (1), and flowline terminuses at the wellhead (1) and separator (1). 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, EC, SAR, pH, and boron. All samples collected were analyzed by a certified laboratory using approved ECMC laboratory analysis methods.

Additional twelve (12) soil samples were collected surrounding the associated separator and flowline terminus to delineate residual pH. Twenty four (24) background soil samples were collected from soil of native/similar lithographic material to further compare residual pH. All samples collected were analyzed for pH by a certified laboratory using approved ECMC laboratory analysis methods. The results from the delineation sampling will be provided on a subsequent supplemental Form 27.

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

Number of soil samples collected 0
Number of soil samples exceeding 915-1 0
Was the areal and vertical extent of soil contamination delineated? No
Approximate areal extent (square feet) 0

NA / ND

NA Highest concentration of TPH (mg/kg) _____
NA Highest concentration of SAR _____
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?

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?

A site assessment will be scheduled to delineate residual pH at the flowline terminus at the separator.

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
_____ Air sparge / Soil vapor extraction
_____ Natural Attenuation
_____ Other _____

If Yes: Estimated Volume (Cubic Yards) _____
Name of Licensed Disposal Facility or ECMC Facility ID # _____
_____ 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

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 Quarterly Update

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: \$ 500

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? 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? No

Does the previous reply indicate consideration of background concentrations? _____

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 ECMC 1000 Series Rules. Residual pH will be confirmed as still present, and previous values will be laterally and vertically defined. If residual pH is observed and is delineated, a detailed reclamation plan will be provided in a Supp. 27 as applicable to close Remediation Number 27627 with ECMC.

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. 12/21/2025

Proposed date of completion of Reclamation. 04/21/2028

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. 12/28/2022

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

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 04/21/2023

Proposed site investigation commencement. 03/01/2023

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:

This is a quarterly update. The Operator's Environmental Consultant on this Site has recently changed and is conducting a thorough review of the project. Any proposed additional investigation activities, reports, and addressing of COAs will be provided in Supplemental Form 27 submittals.

OPERATOR COMMENT

This is a quarterly update. The results from the delineation sampling will be provided on a subsequent supplemental Form 27. Additional delineation sampling plan will be provided on a subsequent supplemental Form 27

In response to ECMC Form 27 Comment dated 2/17/2025 (#403906432), Operator is submitting a replacement Form 27. Based on currently available data, this project is not affected by data integrity irregularities and is not associated with Operator's data integrity review process and its Rule 525.e. Voluntary Disclosure. As part of its data integrity review process, Operator requested the lab protect the laboratory analytical reports from subsequent unauthorized modification by anyone outside the lab, which resulted in the lab reissuing the original reports with additional protections (Reissued Reports). The Reissued Reports were received directly from the lab on [2/18/2025 and 2/13/2025 which includes a watermark confirming both the laboratory representative who reissued the report and the date and time of the reissuance or the application of a Digital ID/Verified Certification (lock) to support reissuance. The metadata associated with this Reissued Reports also includes the lab representative's name, the date and time the laboratory reissued the report, and an explanation for the report reissuance. The Reissued Reports are attached to this submission.

In the event additional responsive information is received or discovered that would suggest this project should be incorporated into the ongoing data integrity review process associated with Operator's Rule 525.e. Voluntary Disclosure, Operator will update and/or amend the statements in this submission and provide any new or revised data or other information responsive to ECMC's general comments responding to Operator's Form 27 submission found in Document Number 403906432.

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: 27627

COA Type

Description

| | |
|-------|--|
| | |
| 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

| | |
|--|--|
| | |
|--|--|

Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

| | | |
|--|--|---------------------|
| | | Stamp Upon Approval |
|--|--|---------------------|

Total: 0 comment(s)