

State of Colorado  
Energy & Carbon Management Commission

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Document Number:  
404124888  
Receive Date:  
03/25/2025

Report taken by:  
Nick Cholas

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 Phone: (303) 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 #: 17203 Initial Form 27 Document #: 402623218

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 #: 123-25490	County Name: WELD
Facility Name: WERNING 7-2B	Latitude: 40.342580	Longitude: -104.742080	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SWNE	Sec: 2	Twp: 4N	Range: 66W Meridian: 6 Sensitive Area? Yes

Facility Type: FLOWLINE SYSTEM	Facility ID: 469881	API #: _____	County Name: _____
Facility Name: _____	Latitude: _____	Longitude: _____	
** correct Lat/Long if needed: Latitude: 40.342580		Longitude: -104.742080	
QtrQtr: _____	Sec: _____	Twp: _____	Range: _____ Meridian: _____ Sensitive Area? Yes

## SITE CONDITIONS

General soil type - USCS Classifications SW \_\_\_\_\_

Most Sensitive Adjacent Land Use crop \_\_\_\_\_

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**

Wetland > 1/10th mile S; occupied dwelling < 1/4 mile NW; crop; wetland adjacent tank battery

# SITE INVESTIGATION PLAN

## TYPE OF WASTE:

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> <b>E&amp;P Waste</b> | <input type="checkbox"/> <b>Other E&amp;P Waste</b>  | <input checked="" type="checkbox"/> <b>Non-E&amp;P Waste</b> |
| <input checked="" type="checkbox"/> Produced Water       | <input type="checkbox"/> Workover Fluids             | no waste generated   |
| <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	laboratory analysis
No	SOILS	NA	laboratory 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 will be conducted pertaining to the WERNING 07-02B wellhead cut and cap and flowline removal. Approximately 2,270' of flowline will be removed. The ECMC will be updated in a supplemental Form 27 if a portion of the flowline is abandoned-in-place due to field constraints. The wellhead will be cut and capped per ECMC rules.

One grab soil sample was collected for analysis by a certified laboratory for ECMC Table 915-1 compounds.

One grab groundwater sample was collected and analyzed for all organic compounds per ECMC Table 915-1.

## 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 ):

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

# SITE INVESTIGATION REPORT

## SAMPLE SUMMARY

Soil

NA / ND

Number of soil samples collected 1  
Number of soil samples exceeding 915-1 0  
Was the areal and vertical extent of soil contamination delineated? Yes  
Approximate areal extent (square feet) 0

ND Highest concentration of TPH (mg/kg) \_\_\_\_\_  
-- Highest concentration of SAR 1.28  
BTEX > 915-1 No  
Vertical Extent > 915-1 (in feet) 0

**Groundwater**

Number of groundwater samples collected 1  
Was extent of groundwater contaminated delineated? Yes  
Depth to groundwater (below ground surface, in feet) 4  
Number of groundwater monitoring wells installed 0  
Number of groundwater samples exceeding 915-1 0

ND Highest concentration of Benzene (µg/l) \_\_\_\_\_  
ND Highest concentration of Toluene (µg/l) \_\_\_\_\_  
ND Highest concentration of Ethylbenzene (µg/l) \_\_\_\_\_  
ND 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?
- 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**

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**
  - \_\_\_\_\_ Bioremediation ( or enhanced bioremediation )
  - \_\_\_\_\_ Chemical oxidation
  - \_\_\_\_\_ Air sparge / Soil vapor extraction
- Ex Situ**
  - \_\_\_\_\_ Excavate and offsite disposal
  - \_\_\_\_\_ If Yes: Estimated Volume (Cubic Yards) \_\_\_\_\_
  - \_\_\_\_\_ 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

### 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 Data Validation

## 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 anticipates the remaining cost for this project to be: \$ \_\_\_\_\_

## 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? Yes

Does the previous reply indicate consideration of background concentrations? No

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.

Is the described reclamation complete? Yes

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. 06/30/2026

Proposed date of completion of Reclamation. 06/30/2029

## 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. 03/05/2021

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

### SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 04/09/2021

Proposed site investigation commencement. \_\_\_\_\_

Proposed completion of site investigation. 06/30/2025

### REMEDIAL ACTION DATES

Proposed start date of Remediation. 06/08/2021

Proposed date of completion of Remediation. 06/30/2026

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:

Implementation schedule updated to reflect the schedule to complete the supplemental site investigation. The ECMC will be updated on a subsequent Form 27 with the results of the supplemental site investigation, or if the schedule is changed due to site access constraints.

**OPERATOR COMMENT**

In response to ECMC Form 27 Comment dated 02/17/2025 (Document Number 404024732), 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 report from subsequent unauthorized modification by anyone outside the lab, which resulted in the lab reissuing the original report with additional protections (Reissued Report). The Reissued Report was received directly from the lab on 02/13/2025 which includes a watermark confirming both the laboratory representative who reissued the report and the date and time of the reissuance. The metadata associated with this Reissued Report 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 Report is 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 404024732.

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

Signed: Caitlin Tillema

Title: Environmental Consultant

Submit Date: 03/25/2025

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: Nick Cholas

Date: 05/08/2025

Remediation Project Number: 17203

**COA Type****Description**

	Operator will continue quarterly reporting until the site investigation is complete and Table 915-1 standards are met within the remediation area.
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**

404124888	INVESTIGATION/REMEDATION WORKPLAN (SUPPLEMENTAL)
404124969	ANALYTICAL RESULTS
404124972	ANALYTICAL RESULTS
404196278	FORM 27-SUPPLEMENTAL-SUBMITTED

Total Attach: 4 Files

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

Environmental	Operator states: "The Reissued Report is attached to this submission."	05/08/2025
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Total: 1 comment(s)