

State of Colorado
Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:
404123713
Receive Date:
03/11/2025
Report taken by:
Laurel Anderson

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: <u>NOBLE ENERGY INC</u>	Operator No: <u>100322</u>	Phone Numbers Phone: <u>(970) 313-5582</u> Mobile: <u>()</u>
Address: <u>1099 18TH STREET SUITE 1500</u>		
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Jason Davidson</u>	Email: <u>Jason.Davidson@chevron.com</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 34446 Initial Form 27 Document #: 403714536

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>123-27331</u>	County Name: <u>WELD</u>
Facility Name: <u>FRICO 36-15</u>	Latitude: <u>40.219420</u>	Longitude: <u>-104.655230</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SWSW</u>	Sec: <u>15</u>	Twp: <u>3N</u>	Range: <u>65W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

Facility Type: <u>SPILL OR RELEASE</u>	Facility ID: <u>488719</u>	API #: _____	County Name: <u>WELD</u>
Facility Name: <u>Frico 36-15</u>	Latitude: <u>40.219410</u>	Longitude: <u>-104.655253</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SWSW</u>	Sec: <u>15</u>	Twp: <u>3N</u>	Range: <u>65W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

SITE CONDITIONS

General soil type - USCS Classifications SW _____

Most Sensitive Adjacent Land Use Grassland _____

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

Well Within Bald Eagle Roost or Communal Roost HPH
Well Within Mule Deer Severe Winter Range HPH
Lake 0.19mi SE
Freshwater Forested/Shrub Wetland 0.09mi E
Farm Structure 0.17mi N

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	GROUNDWATER	NA	Lab Analysis if encountered
Yes	SOILS	TBD	Confirmation Soil Sampling

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 Frico 36-15 wellhead cut and cap. The wellhead was cut and capped per ECMC rules. Laboratory analytical results indicated a historical release occurred at the decommissioned wellhead. Please refer to the operator comments for additional information regarding the historical release and remedial efforts to be conducted at the wellhead.

Approximately 1914' 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. Soil samples will be taken along the flowline 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.

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):

Following source mass removal of hydrocarbon impacted soil, confirmation soil samples will be collected from the final extents of the excavation. Soil samples will be taken along the flowline 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. Soil samples were analyzed by a certified laboratory for the full extent of Table 915-1, including but not limited to: TPH (total volatile [C6-C10] and extractable [C10-C36] hydrocarbons) organic compounds in soil per ECMC Table 915-1, and EC, SAR, pH, metals, and boron. All samples collected were analyzed by a certified laboratory using approved ECMC 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, a grab groundwater will be collected and analyzed for all organic and inorganic parameters (TDS, chloride, sulfate) 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 wellhead area occurred during decommissioning activities. Field personnel field screened all disturbed areas using visual and olfactory senses to determine if laboratory confirmation sampling was required. The ECMC Wellhead Closure Checklist was utilized and filled out during the abandonment process. A photolog is attached.

SITE INVESTIGATION REPORT

SAMPLE SUMMARY

Soil

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

NA / ND

Highest concentration of TPH (mg/kg) _____
Highest concentration of SAR _____
BTEX > 915-1 _____
Vertical Extent > 915-1 (in feet) _____

Groundwater

Number of groundwater samples collected 0
Was extent of groundwater contaminated delineated? Yes
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?

Source mass removal of hydrocarbon impacted soil is to be conducted as soon as possible.

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.

Any hydrocarbon impacted material will be transported off-site to a licensed disposal facility in accordance with Rules 905 and 906.

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.

Wellhead decommissioning activities and confirmation soil sampling at the Frico 36-15 wellhead occurred on October 31, 2024. Laboratory analytical results indicated a historical release occurred at the Frico 36-15 decommissioned wellhead and was reported as a historic release in Form 19 document number 404024486. Hydrocarbon impacted material at the wellhead will be removed and hauled to a permitted disposal facility. Final analytical results will be summarized in a subsequent Supplemental Form 27 submittal and will be reported along with ongoing Remediation Project Number 34446.

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
_____ Natural Attenuation
_____ Other _____

_____ 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.

Groundwater was not encountered during excavation of the wellhead for cut and cap activities.

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 Supplemental Form 27

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.

Noble intends to directly address the costs of remediation at the locations as part of our asset retirement obligation process and operations. Noble has general liability insurance (policies MWZZ316714 and MWZX316724) and financial assurance in compliance with ECMC rules. Records are available on the ECMC's website. The cost for remediation is an estimate only, costs may change upwards or downward based on site-specific information. Noble makes no representation or guarantees as to the accuracy of the estimate.

Operator anticipates the remaining cost for this project to be: \$ 50000

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.

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? No

If YES, does the seed mix comply with local soil conservation district recommendations? _____

Did the local soil conservation district provide the seed mix? No

SITE RECLAMATION DATES

Proposed date of commencement of Reclamation. 10/22/2025

Proposed date of completion of Reclamation. 02/25/2026

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. 12/11/2024

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 10/31/2024

Proposed site investigation commencement. 10/31/2024

Proposed completion of site investigation. 05/31/2025

REMEDIAL ACTION DATES

Proposed start date of Remediation. 04/01/2025

Proposed date of completion of Remediation. 07/01/2025

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:

Based on the discovery of historic hydrocarbon impacts at the wellhead, source mass removal activities will be initiated as soon as possible. The implementation schedule has been updated to reflect these changes.

OPERATOR COMMENT

This Supplemental Form 27 was prepared as a first quarter 2025 timeline update for the historic release that was discovered at the Frico 36-15 wellhead. Supplemental source mass removal activities are pending will be initiated via mechanical excavation as soon as possible. Pursuant to Rule 913.e, quarterly reporting will continue for the location until data indicates no further action is warranted.

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

Signed: Chelsea Veryser

Title: Project Geologist

Submit Date: 03/11/2025

Email: chevronfr@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: Laurel Anderson

Date: 10/14/2025

Remediation Project Number: 34446

COA Type**Description**

	ECMC has processed this form as an update; no analytical was attached thus approval of this form does not imply any agreement with comments on completion of site investigation. All ongoing/unaddressed comments/COAs from previous Forms remain applicable.
	Per Rule 912.a.(1-2): Immediately upon discovering any Spills or Releases of E&P Waste, produced Fluids, or unauthorized Releases of natural gas that meet the criteria of Rules 912.b.(1).H, I, or J, regardless of size or volume, Operators will control and contain the Spill or Release to protect and minimize adverse impacts to public health, safety, welfare, the environment, and wildlife resources. Operators will investigate, clean up, and document impacts resulting from Spills and Releases as soon as the impacts are discovered. Operator shall conduct these operations analyzing samples for the full suite of Table 915-1 constituents.
2 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**

404123713	FORM 27-SUPPLEMENTAL-SUBMITTED
-----------	--------------------------------

Total Attach: 1 Files

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

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

Total: 0 comment(s)