

State of Colorado
Energy & Carbon Management Commission

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Document Number:
404371921
Receive Date:
10/12/2025

Report taken by:
Julie Rothey

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> | Phone Numbers |
| 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 #: 43029 Initial Form 27 Document #: 404371921

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>123-23213</u> | County Name: <u>WELD</u> |
| Facility Name: <u>WOOLLEY 23-8</u> | Latitude: <u>40.063808</u> | Longitude: <u>-105.030078</u> | |
| ** correct Lat/Long if needed: Latitude: _____ | | Longitude: _____ | |
| QtrQtr: <u>NESW</u> | Sec: <u>8</u> | Twp: <u>1N</u> | Range: <u>68W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u> |

| | | | |
|--|----------------------------|-------------------------------|---|
| Facility Type: <u>OFF-LOCATION FLOWLINE</u> | Facility ID: <u>466061</u> | API #: _____ | County Name: <u>WELD</u> |
| Facility Name: <u>WOOLLEY B-61N68W 8NWSW</u> | Latitude: <u>40.063138</u> | Longitude: <u>-105.034086</u> | |
| ** correct Lat/Long if needed: Latitude: _____ | | Longitude: _____ | |
| QtrQtr: <u>NWSW</u> | Sec: <u>8</u> | Twp: <u>1N</u> | Range: <u>68W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u> |

SITE CONDITIONS

General soil type - USCS Classifications SC

Most Sensitive Adjacent Land Use Residential

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

Cottonwood Ditch is 385-ft to the NE.

The Domestic Well (DWR Receipt 9062452, Permit 17523-F) is approx. 740-ft to the NW. This well was constructed to 576-ft. Static water level was recorded at 122-ft.

The Domestic Well (DWR Receipt 0260271, Permit 142263-) is approx. 1200-ft to the NW. This well was constructed to 260-ft. Static water level was recorded at 60-ft.

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 ECOM rule 911 at the WOOLLEY-61N68W 8NESW (305594) oil and gas location pertaining to the cut/cap of the Woolley 23-8 (05-123-23213) and decommission of the Woolley 23-8 (12323213_FL) Line. 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):

Complete "Proposed Soil Sampling" information is provided in the "Operator Comments and Submittal" section.

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 ECOM 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 ECOM 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 <u> 0 </u> | Highest concentration of TPH (mg/kg) <u> </u> |
| Number of soil samples exceeding 915-1 <u> </u> | Highest concentration of SAR <u> </u> |
| Was the areal and vertical extent of soil contamination delineated? <u> </u> | BTEX > 915-1 <u> </u> |
| Approximate areal extent (square feet) <u> </u> | Vertical Extent > 915-1 (in feet) <u> </u> |

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

REMEDATION 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)
 _____ Chemical oxidation
 _____ Air sparge / Soil vapor extraction
 _____ Natural Attenuation
 _____ Other _____

_____ Excavate and offsite disposal
 _____ 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 Operator requests annual reporting schedule until fieldwork commences, at which point quarterly reports will be filed within 90-days of work being initiated.

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 _____

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.

The General Liability coverage within the Civitas Resources insurance program includes coverage for bodily injury, property damage, and pollution clean-up costs arising from qualifying pollution events of a sudden and accidental nature subject to a \$1,000,000 per occurrence limit and \$2,000,000 aggregate limit. The Civitas Resources insurance program includes Excess Liability coverage of \$110,000,000 per occurrence and in the aggregate which sits over the sudden and accidental pollution within the General Liability coverage. It is the opinion of Civitas Resources that this total tower of limit is adequate to address the costs of remediation associated with any qualifying pollution event.

Operator anticipates the remaining cost for this project to be: \$ 20000 _____

WASTE DISPOSAL INFORMATION

Was E&P waste generated as part of this remediation? _____

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: _____

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. 09/25/2025

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

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 11/11/2025

Proposed site investigation commencement. 11/14/2025

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 Woolley 23-8 (05-123-23213)
- Decommission of off-location flowline 12323213_FL

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

PROPOSED SOIL SAMPLING:

Grab confirmation soil samples will be collected from beneath the wellhead. 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 ECMC Table 915-1, and EC, SAR, pH, metals, and boron. All samples collected will be analyzed by a certified laboratory using approved ECMC laboratory analysis methods.

Grab confirmation soil samples will be collected from beneath the flowline start/end points. 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 ECMC laboratory analysis methods. If line removed, grab soil samples will be collected at the bell hole locations during flowline removal for submittal to a certified laboratory. If abandoned in place, a site assessment will be completed along the flowline. Soil samples will be collected at 250' intervals and will be field screened with a PID. If a suspected release is discovered, grab soil samples will be collected for laboratory analysis.

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: 10/12/2025

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: Julie Rothey

Date: 11/12/2025

Remediation Project Number: 43029

COA Type

Description

| | |
|--------|---|
| | <p>Mapped flowline runs through a jurisdictional Freshwater Emergent Wetland as mapped on the National Wetland Inventory Maps. Operator shall confirm flowline integrity through the wetland area or conduct environmental investigation to confirm the absence of impacts in the area.</p> <p>In the event that operations impact or encroach on the wetland, 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.</p> |
| | <p>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:</p> <ul style="list-style-type: none">-where the line crosses Cottonwood ditch-where the line changes direction-where the line crosses an NWI mapped wetland- both endcaps (risers)-every 250ft (field screen) <p>These samples can be obtained by a hand auger boring.</p> |
| 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

| | |
|-----------|---|
| 404371921 | INVESTIGATION/REMEDATION WORKPLAN (INITIAL) |
| 404388109 | SITE MAP |
| 404432547 | FORM 27-INITIAL-SUBMITTED |

Total Attach: 3 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)