

State of Colorado  
Energy & Carbon Management Commission

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Document Number:  
404460205  
Receive Date:  
12/04/2025

Report taken by:  
Jason Kosola

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 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: UNKNOWN	Operator No: 1	Phone Numbers Phone: (970) 946-3761 Mobile: ( )
Address: XXXXXXXXXXXXXXXXXXXX		
City: XXXXX	State: XX	Zip: _____
Contact Person: Jacob Harter	Email: jharter@cottonwoodconsulting.com	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 43445 Initial Form 27 Document #: 404460205

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 #: 067-05623	County Name: LA PLATA
Facility Name: MCCULLOCH 1 (OWP)	Latitude: 37.157938	Longitude: -107.924884	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SESW	Sec: 27	Twps: 34N	Range: 10W Meridian: M Sensitive Area? Yes

SITE CONDITIONS

General soil type - USCS Classifications CL Most Sensitive Adjacent Land Use Range Land  
Is domestic water well within 1/4 mile? No Is surface water within 1/4 mile? No  
Is groundwater less than 20 feet below ground surface? No

## 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	TBD	AVO inspection, field screening, analytical results

### INITIAL ACTION SUMMARY

Description of initial action or emergency response measures take to abate, investigate, and/or remediate impacts associated with E&P Waste.

The ECMC OWP has prepared this Initial Form 27 to provide notice of the plugging and abandonment of the McCulloch #1 well and the decommissioning of the associated wellsite. In accordance with ECMC Rule 915.e (2)B, visual inspection and field screening of soils around the wellhead, associated flowlines, and production equipment will be conducted and soil and groundwater (if present) samples will be collected and submitted for laboratory analysis to determine if concentrations and values are in compliance with 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 ):

Soil samples will be collected for laboratory analysis of ECMC Table 915-1 constituents from areas most likely to have been impacted. Visual inspection and field screening of soils will be conducted in the areas surrounding the wellhead, flowlines if present, and production equipment if present. Based on field screening and field observations, discrete soil samples will be collected and submitted for laboratory analysis of ECMC Table 915-1 constituents.

#### Proposed Groundwater Sampling

Will groundwater samples be collected as part of this investigation? ( Number, analyses, and locations of samples ):

If a pathway to groundwater is discovered or groundwater is encountered during plugging and decommissioning activities, a groundwater sample will be collected and analyzed for ECMC Table 915-1 groundwater constituents.

#### 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 \_\_\_\_\_  
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? 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?

Background soil samples will be collected from nearby native soils to assess the background concentrations of ECMC Table 915-1 constituents.

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.

All production equipment associated with this well will be removed during the plugging and decommissioning of the well.

**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.

Impacted material discovered during the scope of this work plan will be removed and disposed of as E&P waste at an approved facility.

**Soil Remediation Summary**

In Situ

Ex Situ

\_\_\_\_\_ Bioremediation ( or enhanced bioremediation )

Yes \_\_\_\_\_ Excavate and offsite disposal

\_\_\_\_\_ Chemical oxidation

If Yes: Estimated Volume (Cubic Yards) 10

\_\_\_\_\_ 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

### 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 Plug and abandon well and decommission on site production equipment and flow line(s).

## 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 scope of work described in this Initial Site Investigation and Remediation Workplan will be completed by the ECMC Orphaned Well Program. The ECMC is not an oil and gas operator. This document will be used, in part, to bid out various phases of this facility closure.

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

## 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 the ECMC 1000 Series Rules, and will be addressed during a separate phase of the OWP work.

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. \_\_\_\_\_

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

### SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 11/01/2025

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

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 Site Investigation and Remediation Work Plan is being submitted on behalf of the ECMC Orphaned Well Program.

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

Signed: Jacob Harter

Title: Consultant

Submit Date: 12/04/2025

Email: jharter@cottonwoodconsulting.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: Jason Kosola

Date: 12/05/2025

Remediation Project Number: 43445

**COA Type****Description**

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**

404460205	INVESTIGATION/REMEDATION WORKPLAN (INITIAL)
404461831	FORM 27-INITIAL-SUBMITTED

Total Attach: 2 Files

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

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)