

State of Colorado
Energy & Carbon Management Commission

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404559084
Receive Date:
02/27/2026

Report taken by:
Krystal Heibel

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>OWN RESOURCES OPERATING LLC</u>	Operator No: <u>10699</u>	Phone Numbers Phone: <u>(970) 332-3585</u> Mobile: <u>()</u>
Address: <u>305 S RIDGE STREET #6279</u>		
City: <u>BRECKENRIDGE</u>	State: <u>CO</u>	Zip: <u>80424</u>
Contact Person: <u>Niels Phaf</u>	Email: <u>niels.phaf@ownresources.com</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 44405 Initial Form 27 Document #: 404559084

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>125-10571</u>	County Name: <u>YUMA</u>
Facility Name: <u>LEB SOCK 11-27 4N47W</u>	Latitude: <u>40.289860</u>	Longitude: <u>-102.621560</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>NWNW</u>	Sec: <u>27</u>	Twp: <u>4N</u>	Range: <u>47W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

Facility Type: <u>LOCATION</u>	Facility ID: <u>337764</u>	API #: _____	County Name: <u>YUMA</u>
Facility Name: <u>LEB SOCK-64N47W 27NWNW</u>	Latitude: <u>40.289860</u>	Longitude: <u>-102.621560</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>NWNW</u>	Sec: <u>27</u>	Twp: <u>4N</u>	Range: <u>47W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

Facility Type: OFF-LOCATION FLOWLINE Facility ID: 469620 API #: _____ County Name: YUMA
Facility Name: Wellhead Line 11-27 Latitude: 40.292694 Longitude: -102.621042
** correct Lat/Long if needed: Latitude: _____ Longitude: _____
QtrQtr: NWNW Sec: 27 Twp: 4N Range: 47W Meridian: 6 Sensitive Area? Yes

SITE CONDITIONS

General soil type - USCS Classifications ML Most Sensitive Adjacent Land Use Pasture 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

Other Potential Receptors within 1/4 mile

A domestic/livestock well approximately 1765' southwest, water depth >112' , an irrigation well approximately 3788' southwest, water depth >170', an irrigation well approximately 2837' southeast, water depth >175', designated groundwater management area, designated basin, a freshwater emergent near by, however non present at the time.

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 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	Field Screening and Soil 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.

No initial action or emergency response measures required and/or taken, this Form 27 is for a planned P& A. Scope: wellhead location ID (337764), shared meter shed, off-location gas flowline and on-location water flowline. The gas will be disconnected at the shared meter shed approximately 1038 feet north of the wellhead. The meter shed will not be removed. Flowlines will be cut and capped and abandoned in place per Rule 1105.

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):

A minimum of 3 sample will be collected: one from the wellhead, one from the gas disconnect, and one background 60 ft from the wellhead. Visual field screening will be conducted at the well site, meter shed location and along the flowline, any visual disturbance will be investigated. Also field screening will be done at the two excavations, covering each wall and floor quadrant. Sampling locations will be adjusted based on field screening, excavation screening results. Samples will be taken from the highest soil screening location within the excavation; if all screenings are zero, from the highest visible staining location; if no staining is present samples will be collected as described earlier. All samples will be analyzed according to the full Table 915-1.

Proposed Groundwater Sampling

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

Groundwater is not expected in any of the excavations.

Proposed Surface Water Sampling

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

No surface water in the area

Additional Investigative Actions

Additional alternative investigative actions described in attached Site Investigation Plan (summary):

SITE INVESTIGATION REPORT

SAMPLE SUMMARY

Soil

NA / ND

Number of soil samples collected 0

 Highest concentration of TPH (mg/kg)

Number of soil samples exceeding 915-1

 Highest concentration of SAR

Was the areal and vertical extent of soil contamination delineated? _____

BTEX > 915-1 _____

Approximate areal extent (square feet) _____

Vertical Extent > 915-1 (in feet) _____

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?

A background sample from an undisturbed area will be collected to use as a baseline for Table 915-1 reclamation standards for the remainder of this remediation project.

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.

If samples don't meet table 915-1 levels remedial actions are required which typically include in-place treatment, decompaction and natural attenuation which will bring the most common outliers (EC, SAR) - salt content - back to allowed levels within 1-2 years.

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.

Remediation efforts will primarily address impacts associated with produced water, which historically results in elevated salt concentrations and high electrical conductivity in affected soils. The remediation action plan includes application of soil amendments, mechanical decompaction, and natural attenuation. These combined strategies are expected to reduce constituent levels to meet Table 915-1 standards within one to two years.

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

_____ Name of Licensed Disposal Facility or ECOM Facility ID # _____

_____ Natural Attenuation

_____ Excavate and onsite remediation

_____ Other _____

_____ 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 _____

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.

Own Resources Operating is following the minimum insurance requirements of Rule 705.b and these insurances are registered with the ECMC as per Rules 705.d and 705.e. The ECMC requires a minimum of \$5M of liability coverage, which exceeds Remediation Costs. We also have an approved assurance plan under option 5.

Operator anticipates the remaining cost for this project to be: \$ 750 _____

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.

Upon completion of plugging and abandonment activities, the well location will be reclaimed. Where needed, compaction alleviation, site restoration, and revegetation will be conducted in accordance with the standards outlined in Rule 1003. Any disturbed areas around the wellhead and access road, will be treated as necessary and practical, to prevent the spread of noxious weeds and undesirable species, and to minimize erosion.

Is the described reclamation complete? _____

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. 03/16/2026

Proposed date of completion of Reclamation. 11/30/2028

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. 02/27/2026

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

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 03/16/2026

Proposed site investigation commencement. _____

Proposed completion of site investigation. 05/04/2026

REMEDIAL ACTION DATES

Proposed start date of Remediation. 03/17/2026

Proposed date of completion of Remediation. 05/29/2026

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:

OPERATOR COMMENT

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

Signed: Azucena Torres

Title: Remediation & Reclamation

Submit Date: 02/27/2026

Email: azucena.torres@ownresources.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: Krystal Heibel

Date: 03/11/2026

Remediation Project Number: 44405

COA Type**Description**

	Operator shall conduct an environmental investigation to confirm the presence or absence of impacts adjacent to the flowline at a minimum of every 250'.
	Operator will submit a minimum of one soil sample from the bend(s) in the flowline for the same laboratory analysis proposed.
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**

404559084	INVESTIGATION/REMEDATION WORKPLAN (INITIAL)
404559240	SOIL SAMPLE LOCATION MAP
404559242	SOIL SAMPLE LOCATION MAP
404559244	SOIL SAMPLE LOCATION MAP
404559246	PHOTO DOCUMENTATION
404575006	FORM 27-INITIAL-SUBMITTED

Total Attach: 6 Files

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

		Stamp Upon Approval
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Total: 0 comment(s)