

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:
404527687
Receive Date:
02/01/2026
Report taken by:
Jason Kosola

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 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: <u>GUNNISON ENERGY LLC</u>	Operator No: <u>10515</u>	Phone Numbers Phone: <u>(303) 5140757</u> Mobile: <u>()</u>
Address: <u>999 18TH STREET SUITE 1755N</u>		
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>
Contact Person: <u>Hayden Wambach</u>	Email: <u>haydenw@taqenergy.com</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 42833 Initial Form 27 Document #: 404341668

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>029-06091</u>	County Name: <u>DELTA</u>
Facility Name: <u>ALLEN 12-91 12-24</u>	Latitude: <u>39.023110</u>	Longitude: <u>-107.508190</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SESW</u>	Sec: <u>12</u>	Twp: <u>12S</u>	Range: <u>91W</u> Meridian: <u>6</u> Sensitive Area? <u>No</u>

Facility Type: <u>PIT</u>	Facility ID: <u>281909</u>	API #: _____	County Name: <u>DELTA</u>
Facility Name: <u>ALLEN 12-91 12-24</u>	Latitude: <u>39.023128</u>	Longitude: <u>-107.505744</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SESW</u>	Sec: <u>12</u>	Twp: <u>12S</u>	Range: <u>91W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

Facility Type: LOCATION	Facility ID: 322002	API #:	County Name: DELTA
Facility Name: ALLEN 12-91-612S91W 12SESW	Latitude: 39.023110	Longitude: -107.508190	
** correct Lat/Long if needed: Latitude:		Longitude:	
QtrQtr: SESW	Sec: 12	Twtp: 12S	Range: 91W Meridian: 6 Sensitive Area? No

SITE CONDITIONS

General soil type - USCS Classifications CL Most Sensitive Adjacent Land Use Rangeland

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

Nearest water well is on pad. The water well is an industrial well (Permit No. 77517-F); depth to groundwater is 3491'.
 Fughes-Curecanti stony loams, 10 to 40 percent slopes, Unit Symbol 41.
 No RBUs within 1/4 Mile.
 This location is within 1202.d HPH Elk Migration Corridor and Elk Protection Area; therefore, a consultation was not required as per the ECMC CPW CONSULTATION PROCESS FOR OPERATIONS AT EXISTING LOCATIONS IN WILDLIFE HABITATS OPERATOR GUIDANCE dated May, 2025.

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	GROUNDWATER	TBD	Lab analysis, if encountered
UNDETERMINED	SOILS	TBD	Lab 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.

The ALLEN 12-91 #12-24 wellhead and location will be assessed per ECMC Rule 911.a. 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. Visual inspection and field screening of soils around the wellhead and associated flowline will be conducted during sampling activities. The Topographic Site Location map showing the geographic setting of the site is provided.

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 the wellhead cut and cap operations, soil will be sampled from the base of the excavation adjacent to the wellhead, at each side wall within the excavation, adjacent to the flowline connection at the wellhead, and adjacent to the flowline endpoint riser. Soil samples will be submitted to an accredited laboratory for analysis using standard methods appropriate for detecting the target analytes in ECMC Table 915-1. Background samples will be collected at locations of comparable, nearby, non-impacted, native soil. Proposed soil sample locations are provided.

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):

SITE INVESTIGATION REPORT

SAMPLE SUMMARY

Soil

NA / ND

Number of soil samples collected 3

 Highest concentration of TPH (mg/kg)

Number of soil samples exceeding 915-1 3

Highest concentration of SAR _____

Was the areal and vertical extent of soil contamination delineated? No

BTEX > 915-1 No

Approximate areal extent (square feet) 25

Vertical Extent > 915-1 (in feet) 4

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?

(2) discreet background samples were collected in accordance with proposed sampling locations. Samples were used to delineate the in situ wellhead samples taken. Results are attached.

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?

Additional sampling event will need to occur to complete full site investigation report as included on the form 27initial. Sampling locations will be where surface equipment was after it has been removed from location.

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.

N/A

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.

N/A

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 ECMC 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 90 days after receipt of analytical

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.

Gunnison Energy, LLC, has complied with General Liability Insurance requirements per Rule 705 and is fully bonded per Rule 702 to fully address the anticipated costs of remediation. This is the initial assessment for WH and location closure the costs represent the estimated cost for labor and analytical samples.

Operator anticipates the remaining cost for this project to be: \$ 5000

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: _____

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? _____

Does the previous reply indicate consideration of background concentrations? _____

Does Groundwater meet Table 915-1 standards? _____

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.

The site will be reclaimed in accordance with ECMC 1000 Series Reclamation Rules per surface owner direction.

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). _____

Proposed site investigation commencement. 10/20/2025

Proposed completion of site investigation. 05/01/2026

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:

Update of site investigation schedule based off field dates for decommissioning work.

OPERATOR COMMENT

Q1 progress update: Operator submitted soil sampling results for [Site Name/Project ID]. Three samples showed elevated arsenic, but in-situ values are consistent with background samples at similar lithologic depths and with offset-location data. One wellhead sample showed chromium at 0.31 mg/kg (0.01 mg/kg above the ECMC approval level of 0.30 mg/kg). No other contaminants were detected, and field screening indicates the minor exceedances are attributable to localized oil-and-gas material contamination rather than a subsurface release.

Additional sampling is planned in spring/early summer once winter conditions allow heavy equipment access for decommissioning. The operator requests ECMC review and approval to close out the specific locations listed (no additional sampling during the second round) unless ECMC requires confirmatory sampling—if so, please specify scope and timeframe. Laboratory reports, COCs, QA/QC, and site photos are attached.

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

Signed: Hayden Wambach

Title: ARO Consultant

Submit Date: 02/01/2026

Email: haydenw@taqenergy.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: 04/14/2026

Remediation Project Number: 42833

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**

404527687	INVESTIGATION/REMEDATION WORKPLAN (SUPPLEMENTAL)
404527698	OTHER
404527701	ANALYTICAL RESULTS
404527708	SITE INVESTIGATION REPORT
404619527	FORM 27-SUPPLEMENTAL-SUBMITTED

Total Attach: 5 Files

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

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)