

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:
404446980
Receive Date:
11/21/2025

Report taken by:
Krystal Heibel

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>WESTERN OPERATING COMPANY</u>	Operator No: <u>95620</u>	Phone Numbers
Address: <u>1165 DELAWARE STREET #200</u>	Phone: <u>(303) 726-8650</u>	
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80204</u>	Mobile: <u>()</u>	
Contact Person: <u>Steve James</u>	Email: <u>steve@westernoperating.com</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 38529 Initial Form 27 Document #: 404066172

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>087-05130</u>	County Name: <u>MORGAN</u>
Facility Name: <u>PETERSON, MAX 1</u>	Latitude: <u>40.024030</u>	Longitude: <u>-103.623920</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SENE</u>	Sec: <u>27</u>	Twp: <u>1N</u>	Range: <u>56W</u> Meridian: <u>6</u> Sensitive Area? <u>No</u>

Facility Type: <u>LOCATION</u>	Facility ID: <u>313655</u>	API #: _____	County Name: <u>MORGAN</u>
Facility Name: <u>PETERSON, MAX-61N56W 27SENE</u>	Latitude: <u>40.024030</u>	Longitude: <u>-103.623920</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SENE</u>	Sec: <u>27</u>	Twp: <u>1N</u>	Range: <u>56W</u> Meridian: <u>6</u> Sensitive Area? <u>No</u>

Facility Type: OFF-LOCATION FLOWLINE Facility ID: 479480 API #: _____ County Name: MORGAN
Facility Name: Wellhead Line 27SENW Latitude: 40.024039 Longitude: -103.633289
** correct Lat/Long if needed: Latitude: _____ Longitude: _____
QtrQtr: SENW Sec: 27 Twp: 1N Range: 56W Meridian: 6 Sensitive Area? No

SITE CONDITIONS

General soil type - USCS Classifications SM 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

Closest Domestic Well within quarter mile – None
Additional Water Wells – Permit 96-WCB 0.56mi East
Nearest Surface Water – 0.89 mile northwest
Nearest Occupied Building – None
No other potential receptors or wildlife high priority habitats are located within ¼ mile of the Site
Above distances are approximations

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	SOILS	No known impacts	Investigation pending

INITIAL ACTION SUMMARY

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

In accordance with ECMC Rule 911, this form serves as notification for the decommissioning and abandonment of the Peterson, Max #1 wellhead. See Form 27 initial Document 404066172 Figure 1 for a General Location Map of the wellhead area. Final plugging operations took place 1st quarter 2025. The ground and sub-surfaces were visually inspected for hydrocarbon impacts during equipment decommissioning.

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 from the floor and sidewalls in cardinal directions of the wellhead for field screening purposes. Discrete grab confirmation soil samples will be collected for laboratory analysis either in any area of suspected hydrocarbon impacts, or, absent any suspected soil impacts, adjacent to the cut and capped wellhead and from below the wellhead flowline riser. Soil samples will be submitted to an accredited laboratory for analysis of all Table 915-1 soil constituents of concern. See Form 27 initial 404066172 Figure 2 for an illustration of the wellhead and proposed soil sample locations.

Proposed Groundwater Sampling

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

If groundwater is encountered during decommissioning and/or abandonment activities, a grab sample will be collected as soon as practical. If contaminated soil is in contact with groundwater or if free product/hydrocarbon sheen are observed, the release will be reported in accordance with Rule 912.b. Groundwater samples will be submitted for laboratory analysis of Table 915-1 Groundwater Inorganic Parameters and Organic Compounds in Groundwater.

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 _____ 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?

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

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.

If a suspected release is identified through soil screening and/or laboratory analysis, soils may be removed and transported to a licensed disposal facility. If all source material cannot be removed during excavation activities, alternative plans will be proposed in subsequent Form 27 supplemental.

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.

If reportable soil impacts, as defined in Rule 912.b., are discovered, a Form 19 Spill/Release report will be submitted and a site-specific remediation plan will be developed and submitted via a Supplemental Form 27.

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.

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.

Final reclamation will be conducted in accordance with ECMC 1004 Series Rules.

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. _____

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. 12/18/2024

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

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 01/22/2025

Proposed site investigation commencement. 02/14/2025

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 has been submitted to satisfy the quarterly reporting requirement for Remediation Project 38529.

As noted in the attached secured laboratory analytical reports 2503188, laboratory analysis using EPA 8260B and 8015 Methods for samples collected on 3/10/2025 were performed outside of EPA recommended hold-times due to laboratory backlog.

This location was backfilled, graded, access road removed, and seeded in preparation for reclamation following receipt of the laboratory report documenting sample compliance and prior to discovery of the laboratory hold times noted above.

To avoid potentially unnecessary disturbance to ongoing reclamation at this location, Western Operating proposes to utilize Entrada field geologists and submeter accurate GPS to navigate to the surface locations of the previously collected samples WH01@6 and WH01-E@4 to recollect grab confirmation soil samples using hand auger for submittal to a NELAP accredited laboratory for analysis of EPA method 8260B and 8015 for GBTEX+N, TMBs, DRO, and ORO in order to demonstrate compliance and no further action at this wellhead decommissioning.

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

Signed: Ryan Finley

Title: Senior Project Geologist

Submit Date: 11/21/2025

Email: rfinley@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: Krystal Heibel

Date: 04/15/2026

Remediation Project Number: 38529

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**

Att Doc Num	Name
404446980	FORM 27-SUPPLEMENTAL-SUBMITTED
404447099	MAP
404447103	SOIL SAMPLE LOCATION MAP
404447107	ANALYTICAL DATA SUMMARY TABLE(S)
404447120	LABORATORY ANALYTICAL REPORT
404447122	LABORATORY ANALYTICAL REPORT

Total Attach: 6 Files

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

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)