

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax 894-2109



FOR OGCC USE ONLY

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11/24/2010

SITE INVESTIGATION AND REMEDIATION WORKPLAN

This form shall be submitted to the Director for approval prior to the initiation of site investigation and remediation activities. Form 27 is intended to be used whenever possible. Additional documentation will be required when large volumes of soil and groundwater have been impacted or involve large facilities with multiple source areas. See Rule 910. Attach as many pages as needed to fully describe the proposed work.

OGCC Employee:

☐ Spill ☐ Complaint
☐ Inspection ☐ NOAV

Tracking No: 2522349

CAUSE OF CONDITION BEING INVESTIGATED AND REMEDIATED

☒ Spill or Release ☐ Plug & Abandon ☐ Central Facility Closure ☐ Site/Facility Closure ☐ Other (describe):

GENERAL INFORMATION

OGCC Operator Number: 10120		Contact Name and Telephone	
Name of Operator: Noble Energy Inc.		Todd Cullum	
Address: 804 Grand Avenue		No: 970-785-5000	
City: Platteville State: CO Zip: 80651		Fax: 970-785-5099	
API/Facility No: 05-123-31069		County: Weld	
Facility Name: Dillard		Facility Number:	
Well Name: AB 10-7		Well Number:	
Location (QtrQtr, Sec, Twp, Rng, Meridian): SW/NE Sec.10, T7N, R64W		Latitude: Longitude:	

TECHNICAL CONDITIONS

Type of Waste Causing Impact (crude oil, condensate, produced water, etc.): condensate

Site Conditions: Is location within a sensitive area (according to Rule 901e)? Y ☒ N If yes, attach evaluation.

Adjacent land use (cultivated, irrigated, dry land farming, industrial, residential, etc.): Pasture

Soil type, if not previously identified on Form 2A or Federal Surface Use Plan: Manzanola Clay Loam

Potential receptors (water wells within 1/4 mi, surface waters, etc.): No name draw 490' south west

Description of Impact (if previously provided, refer to that form or document):

Impacted Media (check):	Extent of Impact:	How Determined:
<input checked="" type="checkbox"/> Soils	130' x 46' x 6" 131 cu yds	Visual; Hanby Kit was used during excavation to determine extent of impact
<input type="checkbox"/> Vegetation		
<input type="checkbox"/> Groundwater		
<input type="checkbox"/> Surface water		

REMEDIATION WORKPLAN

Describe initial action taken (if previously provided, refer to that form or document): see Form 19

Describe how source is to be removed: Impacted soil was excavated and hauled to the North Weld Sanitary landfill. Field kit analysis (Hanby Kit) was used to determine the extent of impact.

Describe how remediation of existing impacts is to be accomplished, including removal and disposal at an injection well or licensed facility, land treatment on site, removal of impacted groundwater, insitu bioremediation, burning of oily vegetation, etc.: Impacted soil was excavated and hauled to the North Weld Sanitary landfill.

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REMEDIAL WORKPLAN (CONT.)

OGCC Employee:

Tracking Number: _____
Name of Operator: Noble Energy Inc.
OGCC Operator No: 10120
Received Date: _____
Well Name & No: _____
Facility Name & No.: Dillard AB 10-7

If groundwater has been impacted, describe proposed monitoring plan (# of wells or sample points, sampling schedule, analytical methods, etc.):

N/A

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. Use additional sheet for description if required.

Excavated soil was hauled off and surface was recontoured to preexisting grade.

Attach samples and analytical results taken to verify remediation of impacts. Show locations of samples on an onsite schematic or drawing.

Is further site investigation required? ☐ Y ☒ N If yes, describe:

N/A

Final disposition of E&P waste (landtreated and disposed onsite, name of licensed disposal facility, recycling, reuse, etc.):

All excavated soil was disposed of at the North Weld Sanitary landfill.

IMPLEMENTATION SCHEDULE

Date Site Investigation Began: <u>11/4/2010</u>	Date Site Investigation Completed: _____	Remediation Plan Submitted: <u>11/17/2010</u>
Remediation Start Date: <u>11/4/2010</u>	Anticipated Completion Date: _____	Actual Completion Date: <u>11/11/2010</u>

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

Print Name: Todd Cullum

Signed: Todd Cullum Title: Environmental Specialist Date: November 17, 2010

OGCC Approved: John Axelson for Todd Cullum Date: 12/1/2010