

State of Colorado  
**Oil and Gas Conservation Commission**

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



FOR OGCC USE ONLY

**RECEIVED**  
**6/23/2011**

**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.

**CAUSE OF CONDITION BEING INVESTIGATED AND REMEDIATED**

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

OGCC Operator Number: _____	Contact Name and Telephone: _____
Name of Operator: _____	_____
Address: _____	No: _____
City: _____ State: _____ Zip: _____	Fax: _____
API Number: _____	County: _____
Facility Name: _____	Facility Number: _____
Well Name: _____	Well Number: _____
Location: (QtrQtr, Sec, Twp, Rng, Meridian): _____ Latitude: _____ Longitude: _____	

**TECHNICAL CONDITIONS**

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

**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.): \_\_\_\_\_

Soil type, if not previously identified on Form 2A or Federal Surface Use Plan: \_\_\_\_\_

Potential receptors (water wells within 1/4 mi, surface waters, etc.): \_\_\_\_\_

\_\_\_\_\_

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

Impacted Media (check):	Extent of Impact:	How Determined:
Soils	_____	_____
Vegetation	_____	_____
Groundwater	_____	_____
Surface Water	_____	_____

**REMEDIALTION WORKPLAN**

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

\_\_\_\_\_

**Describe how source is to be removed:**

\_\_\_\_\_

**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.:**

\_\_\_\_\_



REMEDIAL WORKPLAN (Cont.)

Tracking Number: \_\_\_\_\_  
Name of Operator: \_\_\_\_\_  
OGCC Operator No: \_\_\_\_\_  
Received Date: \_\_\_\_\_  
Well Name & No: PA 22-21  
Facility Name & No: PIT # 422644

OGCC Employee: \_\_\_\_\_

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

Ground water has not been impacted.

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.

The pit will be reclaimed in accordance with the 1000 series rules.

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:

One grab sample was collected from the middle of the pit.

See attached plat for the grab sample and pit location.

See attached analytical report for the analytical results.

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

No E&P waste was generated.

IMPLEMENTATION SCHEDULE

Date Site Investigation Began: <u>11/19/2010</u>	Date Site Investigation Completed: <u>6/21/2011</u>	Date Remediation Plan Submitted: <u>6/23/2011</u>
Remediation Start Date: <u>NA</u>	Anticipated Completion Date: <u>NA</u>	Actual Completion Date: <u>6/21/2011</u>

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

Print Name: Karolina Blaney

Signed: Karolina Blaney

Title: Environmental Specialist

Date: 6/23/2011

OGCC Approved: Chris Camfield

Title: FOR Chris Camfield

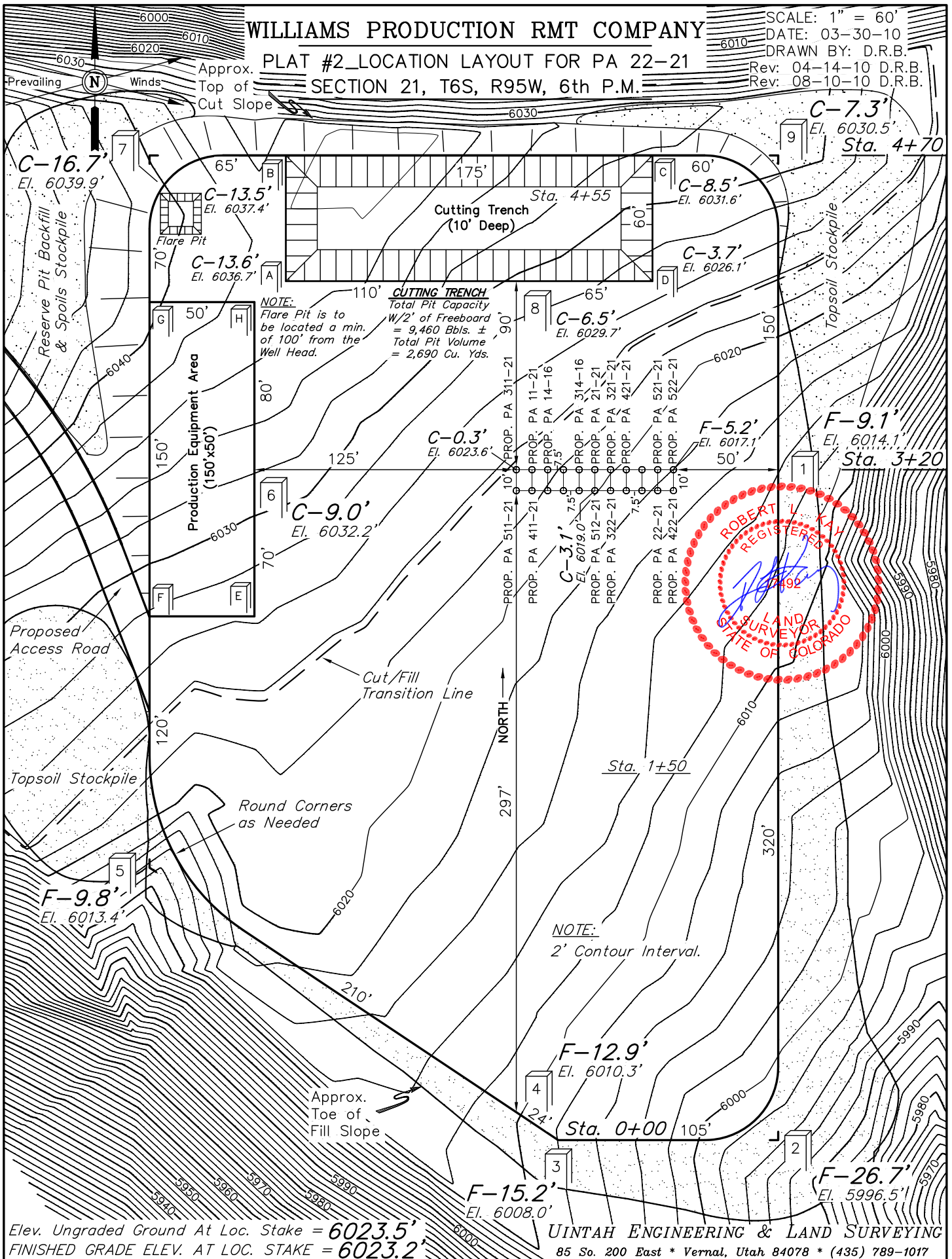
Date: July 15, 2011

# WILLIAMS PRODUCTION RMT COMPANY

PLAT #2 LOCATION LAYOUT FOR PA 22-21

SECTION 21, T6S, R95W, 6th P.M.

SCALE: 1" = 60'  
DATE: 03-30-10  
DRAWN BY: D.R.B.  
Rev: 04-14-10 D.R.B.  
Rev: 08-10-10 D.R.B.





06/21/11

## Technical Report for

**Williams Production RMT Company**

**PA 22-21 Flare Pit**

**Accutest Job Number: T77687**

**Sampling Date: 06/01/11**

### Report to:

**Williams Production RMT Company**

**karolina.blaney@williams.com**

**ATTN: Karolina Blaney**

**Total number of pages in report: 10**



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Conference and/or state specific certification programs as applicable.

A handwritten signature in black ink that reads 'Paul K Canevaro'.

**Paul Canevaro**  
**Laboratory Director**

**Client Service contact: Sylvia Garza 713-271-4700**

Certifications: TX (T104704220-10-3) AR (88-0756) FL (E87628) KS (E-10366) LA (85695/04004)  
OK (9103)

This report shall not be reproduced, except in its entirety, without the written approval of Accutest Laboratories.  
Test results relate only to samples analyzed.

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Sample Summary

Williams Production RMT Company  
PA 22-21 Flare Pit

Job No: T77687

Sample Number	Collected		Time By	Received	Matrix		Client Sample ID
	Date				Code	Type	
T77687-1	06/01/11	11:45	RW	06/04/11	SO	Soil	PA 22-21 FLARE PIT

Soil samples reported on a dry weight basis unless otherwise indicated on result page.

## Sample Results

## Report of Analysis

## Report of Analysis

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<b>Client Sample ID:</b>	PA 22-21 FLARE PIT	<b>Date Sampled:</b>	06/01/11
<b>Lab Sample ID:</b>	T77687-1	<b>Date Received:</b>	06/04/11
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	83.5
<b>Method:</b>	SW846 8015		
<b>Project:</b>	PA 22-21 Flare Pit		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	BB0007719.D	1	06/10/11	AT	n/a	n/a	GBB368
Run #2							

	Initial Weight	Final Volume	Methanol Aliquot
Run #1	5.84 g	5.0 ml	100 ul
Run #2			

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH-GRO (C6-C10)	1.70	6.1	0.37	mg/kg	J

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
460-00-4	4-Bromofluorobenzene	91%		46-127%
98-08-8	aaa-Trifluorotoluene	100%		44-120%

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound



## Report of Analysis

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<b>Client Sample ID:</b>	PA 22-21 FLARE PIT	<b>Date Sampled:</b>	06/01/11
<b>Lab Sample ID:</b>	T77687-1	<b>Date Received:</b>	06/04/11
<b>Matrix:</b>	SO - Soil	<b>Percent Solids:</b>	83.5
<b>Method:</b>	SW846 8015 M SW846 3550B		
<b>Project:</b>	PA 22-21 Flare Pit		

	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	IF207028.D	10	06/09/11	HD	06/06/11	OP18753	GIB1216
Run #2							

	Initial Weight	Final Volume
Run #1	30.3 g	1.0 ml
Run #2		

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	78.0	40	33	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
84-15-1	o-Terphenyl	0% <sup>a</sup>		33-115%		

(a) Outside control limits due to dilution.

ND = Not detected      MDL - Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Misc. Forms

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### Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody

10165 Harwin Dr, Ste 150 Houston, TX 77036  
TEL: 713-271-4700 FAX: 713-271-4770  
www.accutest.com

FED-EX Tracking #	Bottle Order Control #
Accutest Quote #	Accutest Job # <b>T77687</b>
Requested Analyses	
Matrix Codes	
DW - Drinking Water GW - Ground Water WW - Wastewater SW - Surface Water SO - Soil SL - Sludge SED - Sediment OI - Oil LIO - Other Liquid AIR - Air SOL - Other Solid WP - Wipe FB - Field Blank EB - Equipment Blank RB - Rinse Blank TB - Trip Blank	
LAB USE ONLY	

Client / Reporting Information		Project Information	
Company Name: <b>Williams Production</b> Address: <b>258 City Rd 215</b> State: <b>CO</b> Zip: <b>81635</b> Contact: <b>melina.blaney@williams.com</b> Phone: <b>706832295 / 9702859573</b> Email: <b>Head W</b>		Project Name: <b>PA 22-21 Flare Pit</b> Street: _____ City: _____ State: _____ Company Name: _____ Street Address: _____ City: _____ State: _____ Zip: _____ Project Manager: <b>Karalima Blaney</b>	
Field ID / Point of Collection		Collection	
<b>PA 22-21 Flare Pit</b> Date: <b>6/1/11</b> Time: <b>11:45</b> Sampled By: <b>RW</b> Matrix: <b>SO</b> # of bottles: <b>1</b>		Number of preserved bottles: HC, MECH, ZANICH, HNO3, H2SO4, HNO2, HNO1, MECH, TSP, NALISA, ENCODE, OTHER	
Turnaround Time (Business days)		Data Deliverable Information	
<input checked="" type="checkbox"/> Standard <input type="checkbox"/> 5 Day RUSH <input type="checkbox"/> 4 Day RUSH <input type="checkbox"/> 3 Day RUSH <input type="checkbox"/> 2 Day RUSH <input type="checkbox"/> 1 Day EMERGENCY Emergency & Rush T/A data available VIA Lablink		Approved By (Accutest PM): / Date: _____ <input type="checkbox"/> Commercial "A" (Level 1) <input checked="" type="checkbox"/> Commercial "B" (Level 2) <input type="checkbox"/> FULT1 (Level 3+4) <input type="checkbox"/> REDT1 (Level 3+4) <input type="checkbox"/> Commercial "C" <input type="checkbox"/> TRRP <input type="checkbox"/> EDD Format <input type="checkbox"/> Other _____ Commercial "A" = Results Only Commercial "B" = Results + QC Summary Commercial "C" = Results + QC & Surrogate Summary	
Comments / Special Instructions			
Sample Custody must be documented below each time samples change possession, including courier delivery.			
Dispatched by Sampler: <b>Ken W</b> Inquired by Sampler: <b>FedEx</b> Inquired by: _____	Date Time: <b>6/3/11</b> Date Time: <b>6/4/11 1010</b> Date Time: _____	Received By: <b>1</b> Received By: <b>3</b> Received By: <b>5</b>	Relinquished By: <b>2</b> Relinquished By: <b>4</b> Custody Seal # _____ <input type="checkbox"/> Intact <input type="checkbox"/> Not Intact Preserved where applicable <input type="checkbox"/> On Ice <input checked="" type="checkbox"/> Cooler Temp: <b>4.4°C</b>

T77687: Chain of Custody

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Accutest Job Number: T77687 Client: WILLIAMS PRODUCTION Project: PA 22-21 FLARE PIT  
 Date / Time Received: 6/4/2011 10:10 Delivery Method: FedEx Airbill #'s: 874632744048  
 No. Coolers: 1 Therm ID: IRGUN4; Temp Adjustment Factor: -0.1;  
 Cooler Temps (Initial/Adjusted): #1: (4.5/4.4);

**Cooler Security**  
 1. Custody Seals Present: ☒ Y ☐ N  
 2. Custody Seals Intact: ☒ Y ☐ N  
 3. COC Present: ☒ Y ☐ N  
 4. Smpl Dates/Time OK: ☒ Y ☐ N

**Cooler Temperature**  
 1. Temp criteria achieved: ☒ Y ☐ N  
 2. Cooler temp verification: IR Gun  
 3. Cooler media: Ice (Bag)

**Quality Control Preservation**  
 1. Trip Blank present / cooler: ☐ Y ☒ N ☐ N/A  
 2. Trip Blank listed on COC: ☐ Y ☒ N ☐ N/A  
 3. Samples preserved properly: ☒ Y ☐ N ☐ N/A  
 4. VOCs headspace free: ☐ Y ☐ N ☒ N/A

**Sample Integrity - Documentation**  
 1. Sample labels present on bottles: ☒ Y ☐ N  
 2. Container labeling complete: ☒ Y ☐ N  
 3. Sample container label / COC agree: ☒ Y ☐ N

**Sample Integrity - Condition**  
 1. Sample recvd within HT: ☒ Y ☐ N  
 2. All containers accounted for: ☒ Y ☐ N  
 3. Condition of sample: Intact

**Sample Integrity - Instructions**  
 1. Analysis requested is clear: ☒ Y ☐ N  
 2. Bottles received for unspecified tests: ☐ Y ☒ N  
 3. Sufficient volume recvd for analysis: ☒ Y ☐ N  
 4. Compositing instructions clear: ☐ Y ☐ N ☒ N/A  
 5. Filtering instructions clear: ☐ Y ☐ N ☒ N/A

Comments

*Danny Huddleston* 6/4/11

## Sample Receipt Log

**Job #:** T77687

**Date / Time Received:** 6/4/2011 10:10:00 AM

**Initials:** DARRELLH

**Client:** WILLIAMS PRODUCTION

Cooler #	Sample ID:	Vol	Bot #	Location	Pres	pH	Therm ID	Initial Temp	Therm CF	Corrected Temp
1	T77687-1	16oz	1	VR	N/P	Note #2 - Preservative check not applicable.	IRGUN4	4.5	-0.1	4.4

**T77687: Chain of Custody**

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