

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



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**FEB 13 2012**  
**COGCC**

**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:

**CAUSE OF CONDITION BEING INVESTIGATED AND REMEDIATED**

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

OGCC Operator Number: <u>24461</u>	Contact Name and Telephone: <u>Bill Warburton</u>
Name of Operator: <u>Diversified Operating Corporation</u>	No: <u>303 384-9611</u>
Address: <u>15000 W 6th. Ave. Suite 102</u>	Fax: <u>303 384-9612</u>
City: <u>Golden</u> State: <u>CO</u> Zip: <u>80401</u>	

API Number: <u>05-057-6124-00</u>	County: <u>Jackson</u>
Facility Name: _____	Facility Number: <u>115269</u>
Well Name: <u>Allard</u>	Well Number: <u>30-8-5</u>
Location: (QtrQtr, Sec, Twp, Rng, Meridian): <u>SENE Sec 30 T10N R79W 6thPM</u> Latitude: _____ Longitude: _____	

**TECHNICAL CONDITIONS**

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

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.): Grazing Land

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

Potential receptors (water wells within 1/4 mi, surface waters, etc.): None

**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	<u>Oil stain on pit Berm</u>	<u>Visual</u>
<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):**

On Jan 26 an update was submitted with pictures showing the ice had been removed, the pit flooded with warm water and all the oil removed from the surface of the pit. The oil and water mixture was removed with a vaccum truck.

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

In the spring, estimated to be around June 15th, the oily soil will be removed from the pit, put on a sheet of pit liner plastic and farmed on the location using Bio-sorb to break down the hydrocarbons. The soil in the bottom of the pit will be sampled and analyzed for contaminants. In the fall, estimated to be October, 2012 a sample of the farmed soil will be analyzed for contaminants. Both results will be submitted to the COGCC for final approval. The pit then will be backfilled and recontoured to the landscape. Since the water table is shallow the pit will need to be filled in stages to assure that it does not turn to mud giving future settling problems.

**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.:**

Diversified Operating Corporation is consulting with the land owner and will have a written agreement with the responsible party to perform this operation on the location pad. This agreement will be forwarded to you as soon as we get it in place. If DOC fails in this attempt the clean up plan will be ammended and resubmitted to the COGCC.



Tracking Number: \_\_\_\_\_  
Name of Operator: \_\_\_\_\_  
OGCC Operator No: \_\_\_\_\_  
Received Date: \_\_\_\_\_  
Well Name & No: \_\_\_\_\_  
Facility Name & No: \_\_\_\_\_

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**REMEDIATION WORKPLAN (Cont.)**

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

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

**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.  
Pit will be backfilled in stages because of the shallow water table. Every attempt will be made to have this done before winter 2012 sets in. It is essential that we do the backfill in such a way that the soil is allowed to dry to some degree before the next layer is added. The area will not be seeded at this time since it is on the working production pad.

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:

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

**IMPLEMENTATION SCHEDULE**

Date Site Investigation Began: \_\_\_\_\_ Date Site Investigation Completed: \_\_\_\_\_ Date Remediation Plan Submitted: 02/13/2012  
Remediation Start Date: 02/13/2012 Anticipated Completion Date: 11/30/2012 Actual Completion Date: \_\_\_\_\_

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete  
Print Name: Bill Warburton Signed: Bill Warburton  
Title: Petroleum Engineer Date: 02/13/2012

OGCC Approved: \_\_\_\_\_ **NOT APPROVED** Title: \_\_\_\_\_ Date: \_\_\_\_\_  
ATE 2/17/12

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*BEFORE CLEAN UP*





BREAKING ICE FOR  
OIL REMOVAL

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*BERM STAIN AFTER OIL  
REMOVAL WITH VAC TRUCK.*

