

27

Rev 6/99

State of Colorado

Oil and Gas Conservation Commission

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



#7271

FOR OGCC USE ONLY

RECEIVED
 9/8/2012
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): _____

OGCC Operator Number: 69200

Name of Operator: Petroleum Energy Corporation

Address: 90 Silver Fox Drive

City: Greenwood Village

State: CO Zip: 80121-2156

Contact Name and Telephone:

John W. Julander

No: 303-741-9504

Fax: _____

API Number: 05-123-05558-00

County: Weld

Facility Name: _____

Facility Number: 112012

Well Name: Walker

Well Number: 0

Location: (QtrQtr, Sec, Twp, Rng, Meridian): SWSE 18-8N-57W 6th P.M.

Latitude: 40.656770

Longitude: -103.798990

TECHNICAL CONDITIONS

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

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.): dry land pasture

Soil type, if not previously identified on Form 2A or Federal Surface Use Plan: Bushman-curabith-canyon complex (sandy loam)

Potential receptors (water wells within 1/4 mi, surface waters, etc.): 1,000' East and 1,000' West

Surf H2O/drainage

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

Impacted Media (check):



Soils



Vegetation



Groundwater



Surface Water

Extent of Impact:

30' x 30' x 7' deep pit

How Determined:

visual

REMEDIAL WORKPLAN

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

Take pit soil samples from a depth of 10' to Accutest Laboratories for analysis and send results to Annie Eckman.

Describe how source is to be removed:

Haul pit soil to Waste Management landfill at Ault, Colorado and replace with with good soil.

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.:

Same as above

Submit Page 2 with Page 1



Tracking Number: _____
Name of Operator: Petroleum Energy Corp
OGCC Operator No: 69200
Received Date: _____
Well Name & No: Walker 0
Facility Name & No: " " # 112012

Page 2
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.

Backfill, compact and recontour back to landowner's useage.
Reseed with dry land pasture seed.

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:

Samles' analytical results, location drawing and chain of custody were sent to Annie Eckman.

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

Waste Management landfill at Ault, Colorado

IMPLEMENTATION SCHEDULE

Date Site Investigation Began: 08/18/2012 Date Site Investigation Completed: _____ Date Remediation Plan Submitted: _____
Remediation Start Date: _____ Anticipated Completion Date: _____ 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: John W. Julander

Signed: John W. Julander

Title: President

Date: 09/08/2012

OGCC Approved: ACE for John Axelsson

Title: NE Region EPS

Date: 9/11/2012