

State of Colorado
Oil and Gas Conservation Commission



#7430

FOR OGCC USE ONLY

OGCC Employee:

Spill Complaint
 Inspection NOAV

Tracking No:

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

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: <u>23320</u>	Contact Name and Telephone:
Name of Operator: <u>DeClar Oil & Gas, Inc.</u>	<u>Lewis Camp</u>
Address: <u>13500 Rd W</u>	No: <u>970-590-3332</u>
City: <u>Weldona</u> State: <u>Colo</u> Zip: <u>80653</u>	Fax: <u>970-645-9834</u>

API Number: <u>05-087-07838-00</u>	County: <u>Morgan</u>
Facility Name: <u>Arbor</u>	Facility Number: <u>102695</u>
Well Name: <u>Peterson</u>	Well Number: <u>13-7</u>
Location: (QtrQtr, Sec, Twp, Rng, Meridian): <u>SWNE, Sec 13, T2N, R56W, 6th P.M.</u> Latitude: <u>40.141136</u> Longitude: <u>-103.592014</u>	

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 farming

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:
<input type="checkbox"/> Soils	_____	_____
<input type="checkbox"/> Vegetation	_____	_____
<input type="checkbox"/> Groundwater	_____	_____
<input type="checkbox"/> Surface Water	_____	_____

REMEDIAL WORKPLAN

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

Have Samples from the Skim pit & main pit attached.
Need to close in the pit and re-claim the surface for plug & abandon.

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.:



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

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.

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: _____
Remediation Start Date: _____ Anticipated Completion Date: _____ Actual Completion Date: _____

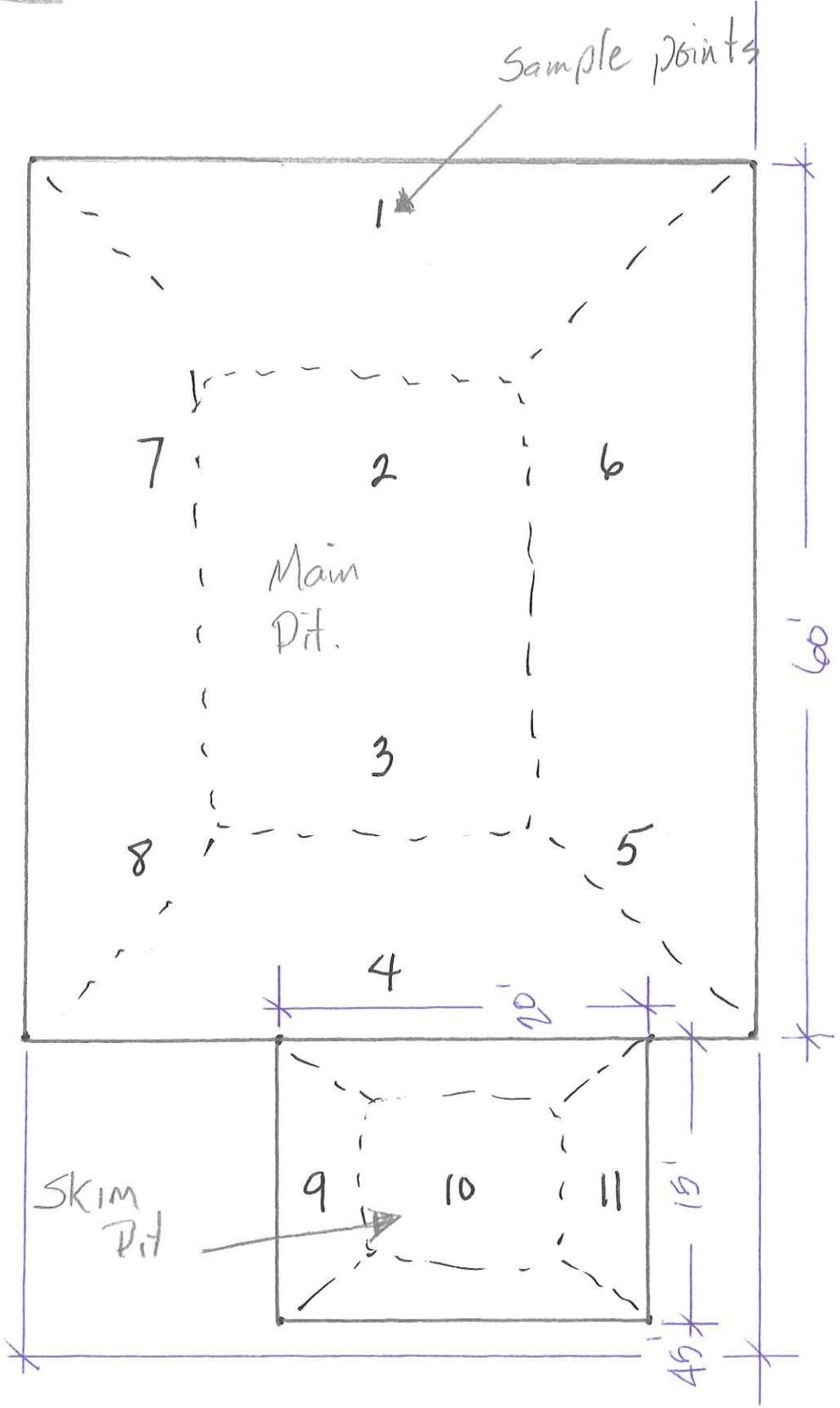
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Lewis Camp Signed: Lewis Camp
Title: Geologist Date: 10-30-2012

OGCC Approved: ACE for John Axelsson Title: NE EPS Date: 11/26/2012

COAs: As inorganic (SAR) exceeds Table 910-1, impacted soils must be buried beneath at least three (3) feet of clean fill material. Ann Eckman 11/26/2012

Peterson 13-7
Pit : Skim Pit Sample Plat



Sampling procedures can affect the value of analytical results - customers are advised to use appropriate sampling protocol to insure samples are truly representative of the bulk sample.

August 29, 2012

DeClar Oil
13500 Rd W
Weldona, CO 80653

Project: Peterson 13-7

Laboratory No.: E12227-2(page 2 of 2)

Method EPA 602/SW8020 A, EPA 624/SW8015 and SW8260

Sample ID	Date Sampled	Date Analyzed	Benzene	Toluene	Ethyl-benzene	o,p-Xylene	m-Xylene	Surrogate Recovery
			ug/kg	ug/kg	ug/kg	ug/kg	ug/kg	%
1	08/13/12	08/15/12	U	U	U	U	U	108
2	08/13/12	08/16/12	U	U	U	U	U	109
3	08/13/12	08/16/12	U	U	U	U	U	119
4	08/13/12	08/16/12	U	U	U	U	U	127
5	08/13/12	08/17/12	U	U	U	U	U	112
6	08/13/12	08/17/12	U	U	U	U	U	112
7	08/13/12	08/17/12	U	U	U	U	U	81.5
8	08/13/12	08/17/12	U	U	U	U	U	88.6
9	08/13/12	08/17/12	U	U	U	U	U	88.1
10	08/13/12	08/18/12	U	U	U	U	U	76.7
11	08/13/12	08/18/12	U	U	U	U	U	92.1

Reporting Limit:

4

4

4

4

4

QC Limits: 74-147

U=Compound analyzed for but not detected

J=Compound detected at a level below reporting limit.

Project Manager

Date

WELD LABORATORIES, INC.
1527 First Avenue • Greeley, Colorado 80631
Phone: (970) 353-8118 • Fax: (970) 353-1671
www.weldlabs.com

8/29/12

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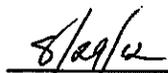
August 29, 2012

DeClar Oil
13500 Rd W
Weldona, CO 80653

Laboratory No. E12227-2 (page 1 of 2)
Date Sampled: 8/13/2012
Date Received: 8/14/2012
Project: Peterson 13-7

Sample ID	TRPH (mg/kg)	Calcium (mg/kg)	Magnesium (mg/kg)	Sodium (mg/kg)	SAR	pH (SI)	Ec (mmhos/cm)
1	less than 5	68.9	20.7	708	19.2	8.08	3.99
2	21.6	66.6	20.2	632	17.4	6.41	4.81
3	less than 5	57.8	21.9	266	7.6	6.49	2.06
4	less than 5	72.0	18.7	1110	30.1	7.09	5.31
5	less than 5	69.0	18.7	518	14.3	7.21	4.89
6	less than 5	62.4	16.4	522	15.2	7.40	4.86
7	19.1	65.0	18.1	622	17.6	7.41	4.38
8	18.7	75.1	22.1	1396	36.4	7.68	5.49
9	35.1	69.8	20	568	15.4	7.21	4.20
10	less than 5	62.4	18.4	286	8.2	7.28	2.21
11	less than 5	60.0	19.3	330	9.5	8.19	2.06


Project Manager


Date

Sampling procedures can affect the value of analytical results - customers are advised to use appropriate sampling protocol to insure samples are truly representative of the bulk sample.