

State of Colorado Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

Received 01/02/15

REM 8913

Document 2313948

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: 95960

Name of Operator: Wexpro Company

Address: PO Box 458

City: Rock Springs State: WY Zip: 82902

Contact Name and Telephone:

Tammy Fredrickson

No: 307.352.7514

Fax: 307.352.7575

API Number: 05-081-05488

County: Moffat

Facility Name: Ace Unit 8 - Pit #1

Facility Number: 100700

Well Name: Ace Unit

Well Number: 8

Location: (QtrQtr, Sec, Twp, Rng, Meridian): NWNW 34-12N-97W, 6th Latitude: 40.962111 Longitude: -108.282678

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.): Rangeland

Soil type, if not previously identified on Form 2A or Federal Surface Use Plan: Tresano-Hiatha-Kandaly

Potential receptors (water wells within 1/4 mi, surface waters, etc.): 1068' from seasonal draw

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

Impacted Media (check):



Soils



Vegetation



Groundwater



Surface Water

Extent of Impact:

Unknown

How Determined:

Visual

REMEDIALTION WORKPLAN

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

Visual inspection. Well was plugged in 2002 and it appears pit was closed and reclaimed at that time.

Describe how source is to be removed:

It is unknown how source was removed. No past analysis or documentation could be found. Surface owner (BLM) had no records either.

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.:

To be determined once soil analysis is obtained.



REMEDIATION WORKPLAN (Cont.)

Tracking Number: _____
Name of Operator: WexPro
OGCC Operator No: 95960
Received Date: 1/2/15
Well Name & No: 081 05488
Facility Name & No: 100700

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 timing 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.

Wexpro intends to obtain a composite sample of the pit bottom and a composite sample of the sidewall where the load line was present. An offsite sample will be obtained for analysis. All samples will be tested per table 910-1. Core samples will be obtained using a posthole digger or small auger.

Well pad and pits were previously closed and recontoured during final reclamation efforts.

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: <u>9/2014</u>	Date Site Investigation Completed: <u>10/2014</u>	Date Remediation Plan Submitted: <u>1/2015</u>
Remediation Start Date: <u>TBD</u>	Anticipated Completion Date: <u>Summer 2016</u>	Actual Completion Date: <u>TBD</u>

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

Print Name: Tammy Fredrickson

Signed: Tammy Fredrickson

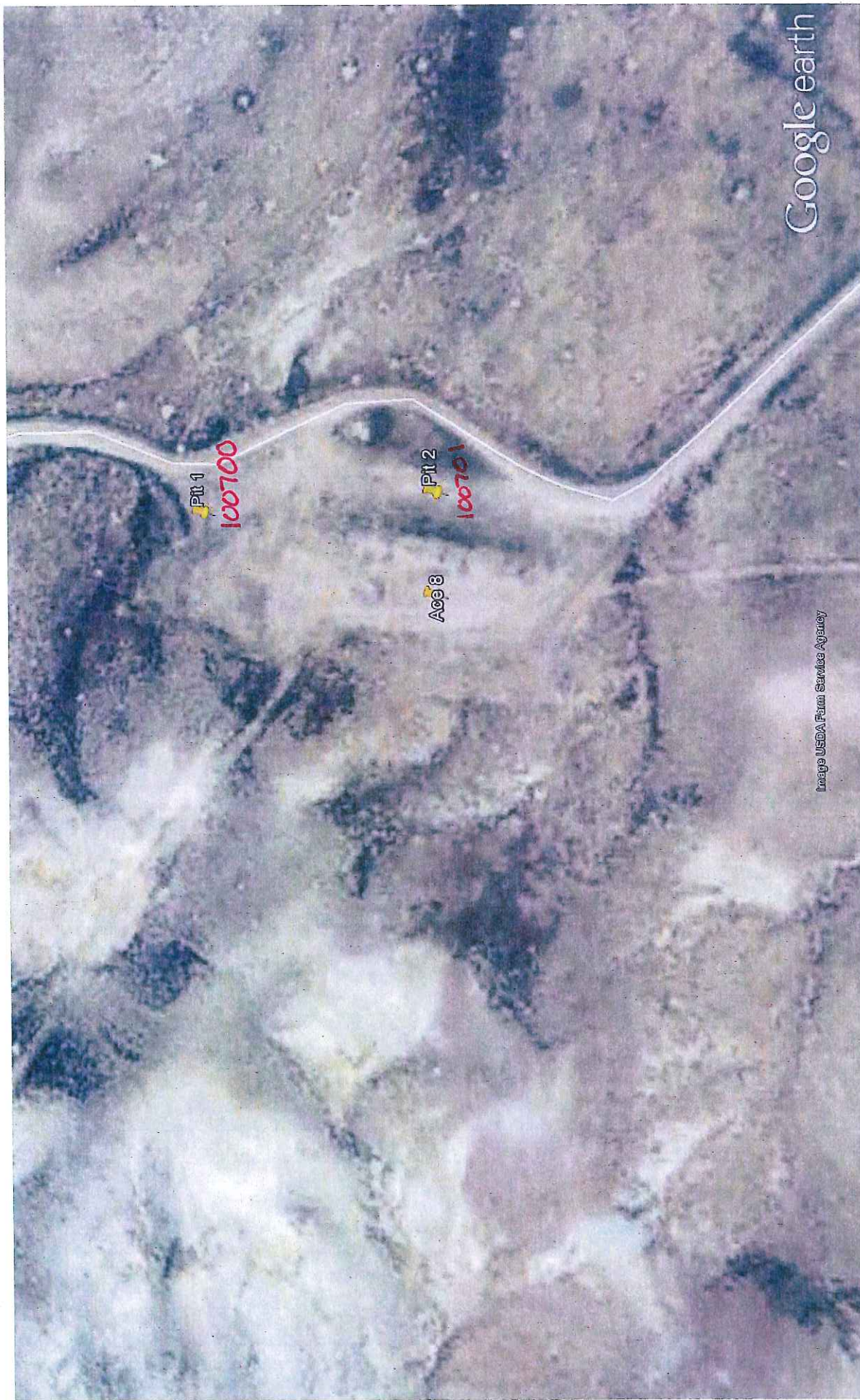
Title: Senior Permit Agent

Date: 1/5/2015

OGCC Approved: Tim Neidel

Title: EPS II

Date: 2/12/15



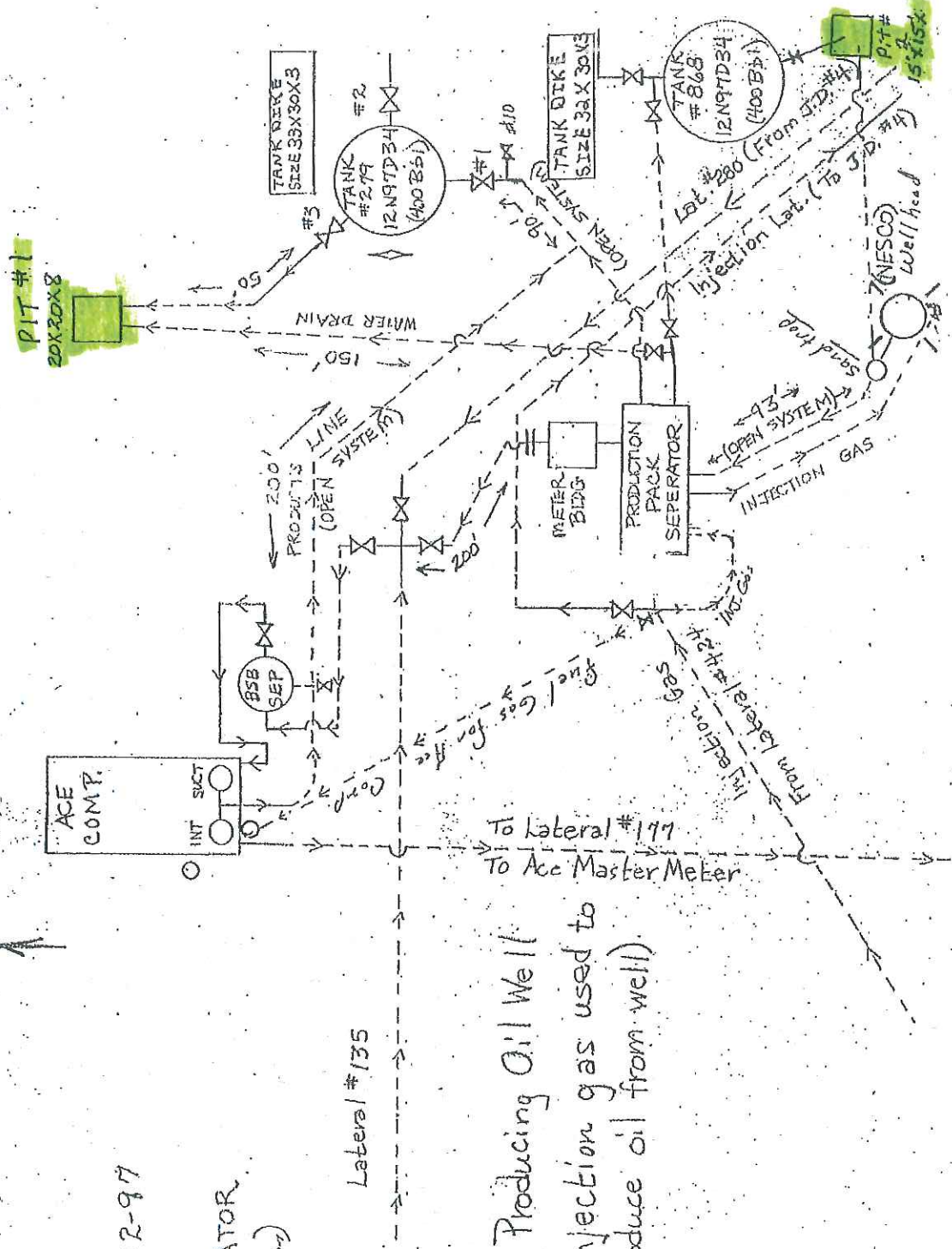
800

200

feet
meters

Google earth

Ace Unit Well #8
 NW NW SEC 34-12-97
 Colo 03689
 WEXPRO CO. OPERATOR
 (Wasatch Formation)



Producing Oil Well
 (Injection gas used to
 produce oil from well)

- LEGEND
- Gas Meter
 - Valve
 - Bull Plug
 - Underground
 - Site Security Tube

Revised 3-27-93

