

FORM

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



FOR OGCC USE ONLY

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): Tracking No: 4603

OGCC Employee:

☐ Spill ☐ Complaint
☐ Inspection ☐ NOAV

Tracking No:

OGCC Operator Number: 96705	Contact Name and Telephone:
Name of Operator: WPX Energy Production LLC	Vanessa Fields
Address: 721 S. Main Street	No: 505-333-1880
City: Aztec State: NM Zip: 87410	Fax: 505-333-1805
API Number: 05-067-05515	County: LaPlata
Facility Name:	Facility Number: 325172
Well Name: Bondad 33-9	Well Number: 005
Location: (QtrQtr, Sec, Twp, Rng, Meridian): 03-33N-09W, NMPM Latitude: 37.130715 Longitude: -107.818407	

TECHNICAL CONDITIONS

Type of Waste Causing Impact (crude oil, condensate, produced water, etc): Produced water and residual dissolved hydrocarbons

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.): Native-Range

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

Potential receptors (water wells within 1/4 mi, surface waters, etc.): No water wells within 1/4 mile Florida river 0.1 mile south 102 feet

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

Impacted Media (check):	Extent of Impact:	How Determined:
<input type="checkbox"/> Soils		N/A
<input type="checkbox"/> Vegetation		N/A
<input type="checkbox"/> Groundwater		N/A
<input type="checkbox"/> Surface Water		N/A

REMEDIAL WORKPLAN

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

No impacet to the environment was detected when partially buried 120 BBL fiberglass tank with banded 40 mil plastic liner was removed and re-placed with a double bottom and wall steel tank API tank.

Describe how source is to be removed:

Existing buried vessel (pit) was excavated along with 40 mil plastic liner and disposed off at Bondad Landfill. Collection of composite sample (results attached) of excavatioon bottom and sidewalls were obtained.

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.:

No contamination was identified in the removal of the existing fiberglass tank.



REMEDIATION WORKPLAN (Cont.)

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

OGCC Employee: _____

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

N/A

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.

TBD when well is P&A

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.):

Bondad Landfill, Bondad Colorado

IMPLEMENTATION SCHEDULE

Date Site Investigation Began: 2-1-2015 Date Site Investigation Completed: 2-10-2015 Date Remediation Plan Submitted: N/A
Remediation Start Date: 2-16-2015 Anticipated Completion Date: 3-1-2015 Actual Completion Date: 3/15/2015

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

Print Name: Vanessa Fields Signed: [Signature]
Title: Environmental Specialist Date: 4-27-2015

OGCC Approved: _____ Title: _____ Date: _____