

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

Date 07/28/2015

REM 9190

Doc 2495239

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: 05-081-05704

County: Moffat

Facility Name: State 2 Pit

Facility Number: 100403

Well Name: State of Colorado

Well Number: 2

Location: (QtrQtr, Sec, Twp, Rng, Meridian): SENW 16-11N-97W

Latitude: 40.916084

Longitude: -108.299158

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: Vermillion-Langspring Complex

Potential receptors (water wells within 1/4 mi, surface waters, etc.): Seasonal drainage approximately 1119 feet from well pad.

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

Impacted Media (check):

Extent of Impact:

How Determined:



Soils

Unknown



Vegetation



Groundwater



Surface Water

None

Visual Inspection

REMEDIALTION WORKPLAN

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

Visual inspection. Soil analysis will be obtained per table 910-1. Sample locations will be guided by rule 910b.(3)B. Fencing will remain in place to prevent intrusion by stock or wildlife. Surface owner (BLM) will be notified of sample results. See proposed sample points attached.

Describe how source is to be removed:

Buried lines will be purged, cut and capped a minimum of 3 feet below the surface.

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.:

Remediation efforts, if necessary, will be decided after soil analysis is complete.

FORM
27
Rev 6/99

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REMEDIAL WORKPLAN (Cont.)

Tracking Number: _____
Name of Operator: _____
OGCC Operator No: _____
Received Date: _____
Well Name & No: STATE 2 PIT
Facility Name & No: 100403

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.

The pit will be reclaimed and reseeded. Disturbed area will be recontoured, to the best ability to allow for final reclamation. Seed mix will be determined after soil analysis is completed.

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: 7/2015 Date Site Investigation Completed: 7/2015 Date Remediation Plan Submitted: 7/23/15
Remediation Start Date: _____ Anticipated Completion Date: 9/2015 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: Tammy Fredrickson

Signed: Tammy Fredrickson

Title: Senior Permit Agent

Date: 7/23/2015

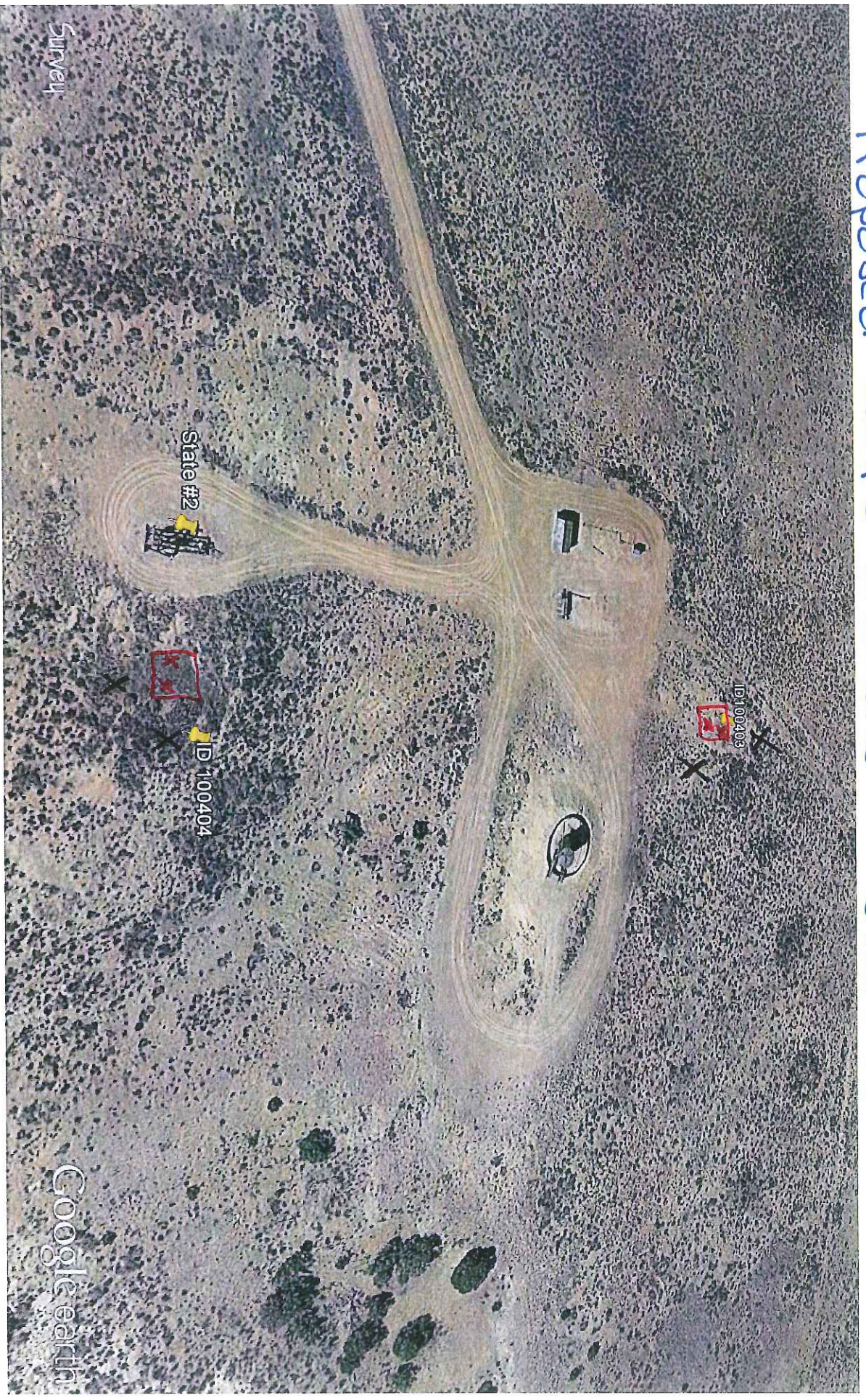
OGCC Approved: Kas Neidel

Title: EPS II

Date: 7/28/15

SEE CO's IN DATA entered FORM

Proposed Sample Locations - State #2



Google earth

feet
meters

300

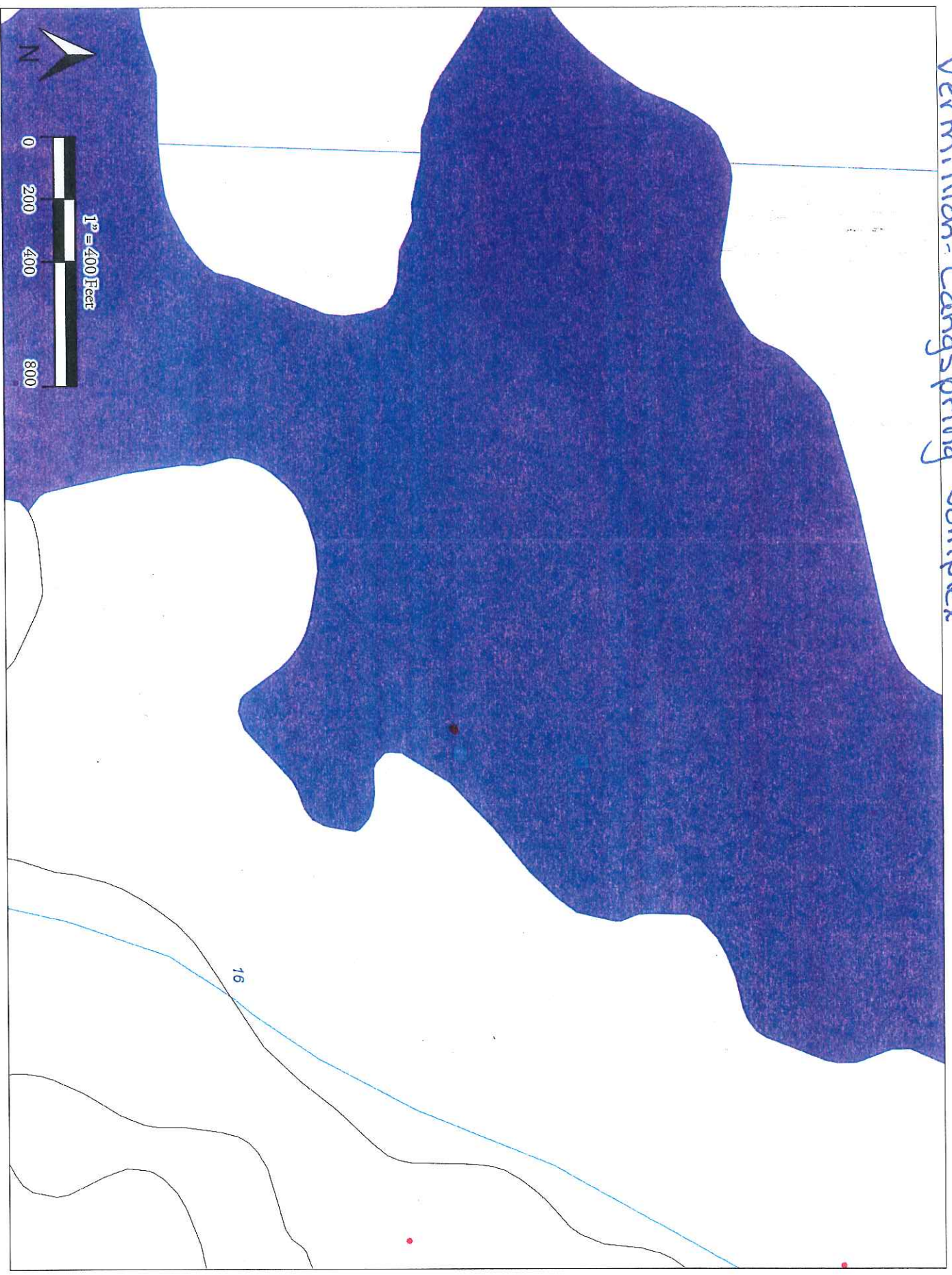
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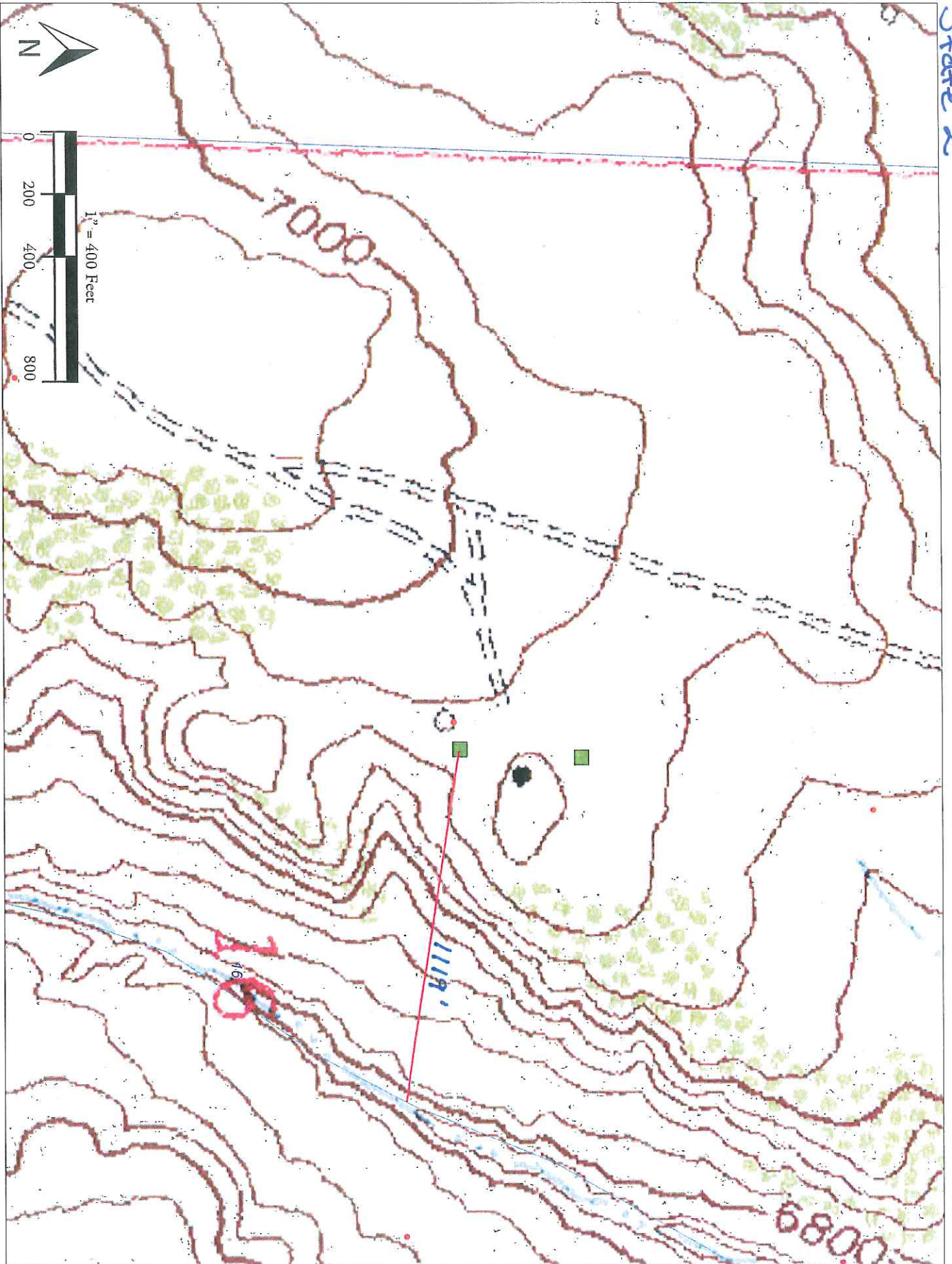
X - Offsite Samples

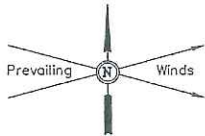
X - Pit Samples

Vermillion-Langspring Complex



State 2

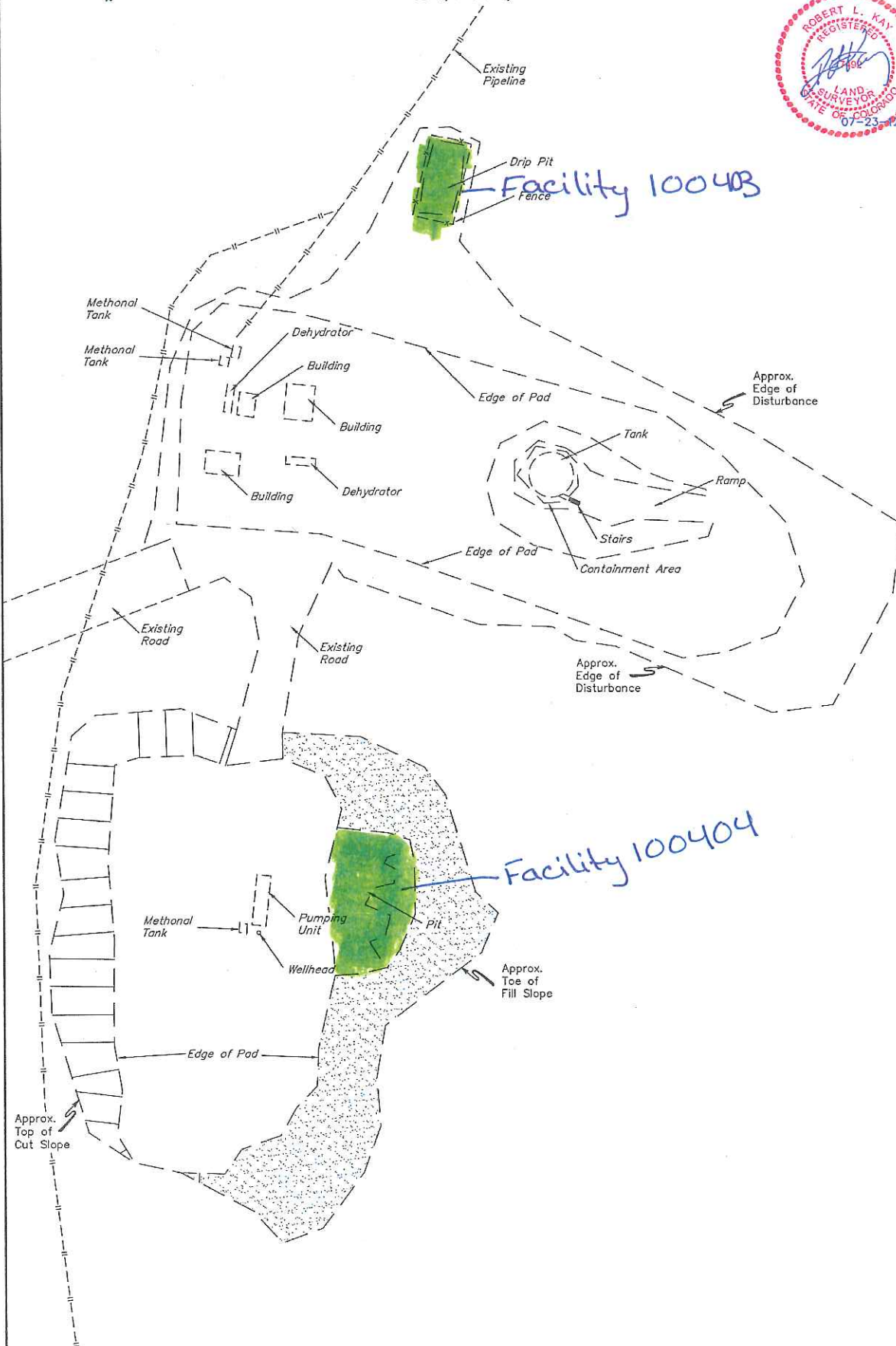




WEXPRO COMPANY
AS-BUILT SITE PLAN FOR
STATE OF COLORADO #2
SECTION 16, T11N, R97W, 6th P.M.
SE 1/4 NW 1/4

FIGURE #1

SCALE: 1" = 50'
DATE: 07-12-12
DRAWN BY: J.M.H.



FINISHED GRADE ELEV. AT LOC. STAKE = 6973.6'

UINTAH ENGINEERING & LAND SURVEYING
85 So. 200 East • Vernal, Utah 84078 • (435) 789-1017