

State of Colorado Oil and Gas Conservation Commission

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Document Number:

401349666

Receive Date:

Report taken by:

Site Investigation and Remediation Workplan (Initial Form)

This form shall be submitted to the Director for approval prior to the initiation of site investigation and remediation activities. However, this shall not preclude the Operator from taking immediate action to protect public health or safety, the environment, wildlife, or livestock.

This Form 27 describes site conditions as currently understood by the Operator; approval of this Form 27 by COGCC is based on the site conditions accurately described herein; any changes in site conditions identified during or subsequent to the performance of the approved workplan may necessitate additional investigation or remediation which shall be described on a supplemental Form 27. This Form 27 is intended to provide basic information regarding the proposed site investigation and remediation actions, but the workplan may be more fully described in attached documentation.

Refer to Rules 340, 905, 906, 907, 908, 909, and 910

OPERATOR INFORMATION

Name of Operator: CHURCHILL ENERGY INC	Operator No: 16910	Phone Numbers
Address: 8177 SOUTH NORFOLK STREET		Phone: (303) 840-7000
City: ENGLEWOOD State: CO Zip: 80112		Mobile: (303) 618-5025
Contact Person: Gary Kluksdahl	Email: gary.kluksdahl@comcast.net	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: Initial Form 27 Document #: 401349666

PURPOSE INFORMATION

- | | |
|--|--|
| <input type="checkbox"/> 901.e. Sensitive Area Determination | <input type="checkbox"/> 909.c.(5), Rule 910.b.(4): Remediation of impacted ground water |
| <input checked="" type="checkbox"/> 909.c.(1), Rule 905: Pit or PW vessel closure | <input type="checkbox"/> Rule 909.e.(2)A.: Notice completion of remediation in accordance with Rule 909.b. |
| <input checked="" type="checkbox"/> 909.c.(2), Rule 906: Spill/Release Remediation | <input type="checkbox"/> Rule 909.e.(2)B.: Closure of remediation project |
| <input type="checkbox"/> 909.c.(3), Rule 907.e.: Land treatment of oily waste | <input type="checkbox"/> Rule 906.c.: Director request |
| <input type="checkbox"/> 909.c.(4), Rule 908.g.: Centralized E&P Waste Management Facility closure | <input type="checkbox"/> Other |

SITE INFORMATION

N Multiple Facilities (in accordance with Rule 909.c.)

Facility Type: UIC DISPOSAL	Facility ID: 150405	API #:	County Name: LINCOLN
Facility Name: CHAMPLIN LIMON 1-19	Latitude: 39.249654	Longitude: -103.712509	
** correct Lat/Long if needed: Latitude:		Longitude:	
QtrQtr: NWSW	Sec: 19	Twp: 9S	Range: 56W Meridian: 6 Sensitive Area? Yes

SITE CONDITIONS

General soil type - USCS Classifications SC Most Sensitive Adjacent Land Use Cattle pasture

Is domestic water well within 1/4 mile? No Is surface water within 1/4 mile? No

Is groundwater less than 20 feet below ground surface? No

Other Potential Receptors within 1/4 mile

SITE INVESTIGATION PLAN

TYPE OF WASTE:

☒ E&P Waste

☐ Other E&P Waste

☒ Non-E&P Waste

☒ Produced Water

☐ Workover Fluids

Sand & Dirt carried off location by wind & rainwater

☒ Oil

☐ Tank Bottoms

☐ Condensate

☐ Pigging Waste

☐ Drilling Fluids

☐ Rig Wash

☐ Drill Cuttings

☐ Spent Filters

☐ Pit Bottoms

☐ Other (as described by EPA)

DESCRIPTION OF IMPACT

Impacted?	Impacted Media	Extent of Impact	How Determined
Yes	SOILS	Probable chlorides in soil	visual
Yes	VEGETATION	No growth in spill paths	visual

INITIAL ACTION SUMMARY

Description of initial action or emergency response measures take to abate, investigate, and/or remediate impacts associated with E&P Waste.

Oily dirt has been removed from around water tanks inside containment area on 6/27/17

PROPOSED SAMPLING PLAN

Proposed Soil Sampling

☒ Will soil samples be collected as part of this investigation? (Number, type (grab/composite), analyses, and locations of samples):

Grab samples per attached Map#1 (13 total)

Proposed Groundwater Sampling

☐ Will groundwater samples be collected as part of this investigation? (Number, analyses, and locations of samples):

Proposed Surface Water Sampling

☐ Will surface water samples be collected as part of this investigation? (Number, analyses, and locations of samples):

Additional Investigative Actions

☐ Additional alternative investigative actions described in attached Site Investigation Plan (summary):

SITE INVESTIGATION REPORT

SAMPLE SUMMARY

Soil

Number of soil samples collected 0

Number of soil samples exceeding 910-1

Was the areal and vertical extent of soil contamination delineated? Yes

Approximate areal extent (square feet) 8000

NA / ND

Highest concentration of TPH (mg/kg)

Highest concentration of SAR

BTEX > 910-1

Vertical Extent > 910-1 (in feet)

Groundwater

Number of groundwater samples collected 0

Was extent of groundwater contaminated delineated? Yes

Depth to groundwater (below ground surface, in feet) 225

Number of groundwater monitoring wells installed 0

Number of groundwater samples exceeding 910-1

Highest concentration of Benzene (µg/l)

Highest concentration of Toluene (µg/l)

Highest concentration of Ethylbenzene (µg/l)

Highest concentration of Xylene (µg/l)

Highest concentration of Methane (mg/l)

Surface Water

0 Number of surface water samples collected

0 Number of surface water samples exceeding 910-1

If surface water is impacted, other agency notification may be required.

OTHER INVESTIGATION INFORMATION

☐ Were impacts to adjacent property or offsite impacts identified?

☐ Were background samples collected as part of this site investigation?

☐ Was investigation derived waste (IDW) generated as part of this investigation?

Volume of solid waste (cubic yards)

Volume of liquid waste (barrels)

☒ Is further site investigation required?

Samples to be taken upon approval of Remediation Plan

REMEDIAL ACTION PLAN

SOURCE REMOVAL SUMMARY

Describe how source is to be removed.

Source is wind and rain moving material off location downslope. Operator proposes to install crushed rock berm across edge of location on east side to mitigate further soil removal.

REMEDIATION SUMMARY

Describe how remediation of existing impacts to soil and groundwater is to be accomplished (i.e. summarize remedial action plan). Provide a brief narrative description including: technical justification, schedule for implementation, estimated time to attain NFA status, plus plans and specifications for the selected remedial action technology.

Fall 2017 After sampling and analysis, Operator proposes to disc or plow affected area and scarify with manure and/or straw to hold ground. Native seed per SCS will be drilled into affected area. Spring 2018 Operator will review progress with seed growth and soil holding, repeating operation as required.

Soil Remediation Summary

☒ **In Situ**

Yes Bioremediation (or enhanced bioremediation)

No Chemical oxidation

No Air sparge / Soil vapor extraction

No Natural Attenuation

Yes Other mix with organic material
(manure, straw)

☐ **Ex Situ**

Excavate and offsite disposal

If Yes: Estimated Volume (Cubic Yards)

Name of Licensed Disposal Facility or COGCC Facility ID #

Excavate and onsite remediation

No Land Treatment

No Bioremediation (or enhanced bioremediation)

Chemical oxidation

Other

Groundwater Remediation Summary

☐ Bioremediation (or enhanced bioremediation)

☐ Chemical oxidation

☐ Air sparge / Soil vapor extraction

☐ Natural Attenuation

☐ Other

GROUNDWATER MONITORING

If groundwater has been impacted, describe proposed monitoring plan, including # of wells or sample points, monitoring schedule, analytical methods, points of compliance. Attach a groundwater monitoring location diagram.

REMEDATION PROGRESS UPDATE

PERIODIC REPORTING

Frequency: ☒ Quarterly ☐ Semi-Annually ☐ Annually ☐ Other _____

Report Type: ☐ Groundwater Monitoring ☒ Land Treatment Progress Report ☐ O&M Report
☐ Other _____

WASTE DISPOSAL INFORMATION

Was E&P waste generated as part of this remediation? No

Describe beneficial use, if any, of E&P Waste derived from this remediation project:

Volume of E&P Waste (solid) in cubic yards _____

E&P waste (solid) description _____

COGCC Disposal Facility ID #, if applicable: _____

Non-COGCC Disposal Facility: _____

Volume of E&P Waste (liquid) in barrels _____

E&P waste (liquid) description _____

COGCC Disposal Facility ID #, if applicable: _____

Non-COGCC Disposal Facility: _____

RECLAMATION PLAN

RECLAMATION PLANNING

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.

Disc/plow operations will conform to existing slop and grade. Seed mixture to be approved by SCS and Surface Owner. Noxious weeds will be controlled by herbicide.

Is the described reclamation complete? No

Does the reclamation described herein constitute interim or final reclamation of the Oil and Gas Location?

☐ Interim? ☐ Final?

Did the Surface Owner approve the seed mix? _____

If NO, does the seed mix comply with local soil conservation district recommendations? _____

IMPLEMENTATION SCHEDULE

PRIOR DATES

Date of Surface Owner notification/consultation, if required. _____

Actual Spill or Release date, if known. _____

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 06/27/2017

Date of commencement of Site Investigation. 06/21/2017

Date of completion of Site Investigation. _____

REMEDIAL ACTION DATES

Date of commencement of Remediation. 09/30/2017

Date of completion of Remediation. _____

SITE RECLAMATION DATES

Date of commencement of Reclamation. _____

Date of completion of Reclamation. _____

OPERATOR COMMENT

This is an initial submittal with the largest portion of the work yet to be completed.

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

Signed: Gary Kluksdahl

Title: President

Submit Date:

Email: gary.kluksdahl@comcast.net

Based on the information provided herein, this Application for Site Investigation and Remediation Workplan complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved:

Date:

Remediation Project Number:

COA Type**Description**

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Attachment Check List

Upon approval, the approved Form 27 and all listed attachments will be indexed to the Remediation Project file. Only the approved Form 27 will also be indexed to the related Facilities.

Att Doc Num**Name**

401349672	MAP
401349673	SITE MAP

Total Attach: 2 Files

General Comments**User Group****Comment****Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)