

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
401471823

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: RED RIVER RANCH HOLDINGS LLC	Operator No: 10044	Phone Numbers
Address: 15850 COUNTY RD 13		Phone: (303) 921-9176
City: WESTON State: CO Zip: 81091		Mobile: (303) 921-9176
Contact Person: Jack Sosebee	Email: jack.sosebee@comcast.net	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: _____ Initial Form 27 Document #: 401471823

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 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 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 checked="" 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: CENTRALIZED EP WASTE MGMT FAC	Facility ID: 292833	API #: _____	County Name: LAS ANIMAS
Facility Name: RRRH CENTRALIZED WASTE MGMT	Latitude: 36.998693	Longitude: -105.014669	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SENE	Sec: 17	Twp: 35S	Range: 68W Meridian: 6 Sensitive Area? Yes

SITE CONDITIONS

General soil type - USCS Classifications ML Most Sensitive Adjacent Land Use wildlife

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

Is groundwater less than 20 feet below ground surface? Yes

Other Potential Receptors within 1/4 mile

None

SITE INVESTIGATION PLAN

TYPE OF WASTE:

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> E&P Waste | <input type="checkbox"/> Other E&P Waste | <input type="checkbox"/> Non-E&P Waste |
| <input checked="" type="checkbox"/> Produced Water | <input type="checkbox"/> Workover Fluids | _____ |
| <input type="checkbox"/> Oil | <input type="checkbox"/> Tank Bottoms | |
| <input type="checkbox"/> Condensate | <input type="checkbox"/> Pigging Waste | |
| <input type="checkbox"/> Drilling Fluids | <input type="checkbox"/> Rig Wash | |
| <input type="checkbox"/> Drill Cuttings | <input type="checkbox"/> Spent Filters | |
| | <input type="checkbox"/> Pit Bottoms | |
| | <input type="checkbox"/> Other (as described by EPA) | _____ |

DESCRIPTION OF IMPACT

Impacted?	Impacted Media	Extent of Impact	How Determined
No	SOILS	NA	Sampling and analysis

INITIAL ACTION SUMMARY

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

NA

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):

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 0

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

Approximate areal extent (square feet) _____

NA / ND

NA Highest concentration of TPH (mg/kg) _____

NA 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? No

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

Number of groundwater monitoring wells installed _____

Number of groundwater samples exceeding 910-1 _____

NA Highest concentration of Benzene (µg/l) _____

NA Highest concentration of Toluene (µg/l) _____

NA Highest concentration of Ethylbenzene (µg/l) _____

NA Highest concentration of Xylene (µg/l) _____

NA Highest concentration of Methane (mg/l) _____

Surface Water

0 Number of surface water samples collected

_____ 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?

REMEDIAL ACTION PLAN

SOURCE REMOVAL SUMMARY

Describe how source is to be removed.

NA

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.

NA

Soil Remediation Summary

In Situ

- Bioremediation (or enhanced bioremediation)
- Chemical oxidation
- Air sparge / Soil vapor extraction
- Natural Attenuation
- Other _____

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
- Land Treatment
- Bioremediation (or enhanced bioremediation)
- Chemical oxidation
- Other _____

Groundwater Remediation Summary

- No Bioremediation (or enhanced bioremediation)
- No Chemical oxidation
- No Air sparge / Soil vapor extraction
- No Natural Attenuation
- No 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.

NA

REMEDATION PROGRESS UPDATE

PERIODIC REPORTING

Frequency: Quarterly Semi-Annually Annually Other NA _____

Report Type: Groundwater Monitoring Land Treatment Progress Report O&M Report

Other NA _____

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.

NA

Is the described reclamation complete? Yes

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? Yes

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

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). 09/29/2014

Date of commencement of Site Investigation. _____

Date of completion of Site Investigation. _____

REMEDIAL ACTION DATES

Date of commencement of Remediation. _____

Date of completion of Remediation. _____

SITE RECLAMATION DATES

Date of commencement of Reclamation. _____

Date of completion of Reclamation. 08/20/2017

OPERATOR COMMENT

The Red River Ranch centralized E&P waste management facility was permitted in 2007 (Permit No. 292833) and consists of four ponds - Pond A (Facility 286150), Pond B (Facility 285604), Pond D (Facility 286531), and Pond E (Facility 286532) - into which CBM produced water was piped. [Pond C was never constructed.] The water in the ponds (a mixture of CBM produced water, surface water runoff, and precipitation) was then discharged into Lorencito Canyon and its tributaries.

Production from all CBM wells at Red River Ranch ended in March 2012, all CBM flows into the ponds ceased at that time. Red River Ranch then began a pond closure process that included the following steps.

1. Submission of Form 27s (with soil/sediment sampling and other data) providing remediation workplans for each pond on October 27, 2014. The document numbers are: Pond A - 200416196, Pond B - 200416202, Pond D 200416223, and Pond E - 200416224. All four Form 27s were approved. Because the Form 27 workplans provided for retention of the ponds without recontouring, the approvals included a requirement that the COGCC environmental staff be notified if and when Red River Ranch's variance requests regarding final land contours were approved by the Director. The Form 27 approvals for Ponds D and E (the only ponds with liners) also required Red River Ranch to notify COGCC when the pit liners were disposed and to provide documentation of disposal at a permitted disposal site.
2. Because removal of the liners in Ponds D and E would have destroyed the aquatic and wetland vegetation in those ponds, Red River Ranch asked COGCC whether it might be possible to leave the liners in place. COGCC informed Red River Ranch that the agency would be willing to consider approving such a variance request if it was first approved by CDPHE. Red River Ranch requested authorization from CDPHE to leave the liners in place, and CDPHE approved that request on November 30, 2015.
3. Submission of Form 4s requesting a variance to leave the ponds as functioning ponds (with liners left in place in Ponds D and E). The document numbers are: Pond A - 400747990, Pond B - 400747991, Pond D - 400747989, and Pond E - 400747992. All four variance requests were approved.

A list of the above COGCC documents and their attachments is attached to this Form 27.

Red River Ranch is, with this Form 27, requesting that its centralized E&P waste management facility permit be terminated.

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

Signed: Jack Sosebee _____

Title: Designated Representative _____

Submit Date: _____

Email: jack.sosebee@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

<u>COA Type</u>	<u>Description</u>

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

<u>Att Doc Num</u>	<u>Name</u>
401471883	OTHER

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)