

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
401493234

Receive Date:

Report taken by:

Site Investigation and Remediation Workplan (Supplemental 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: COMPLETE ENERGY SERVICES INC	Operator No: 10604	Phone Numbers
Address: 4727 GAILLARDIA PKWY STE 250		
City: OKLAHOMA CITY	State: OK Zip: 73142	
Contact Person: Jason Henderson	Email: Jason.Henderson@CompleteEnergy.com	
		Phone: (405) 3650952
		Mobile: ()

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 10805 Initial Form 27 Document #: 401445670

PURPOSE INFORMATION

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

SITE INFORMATION

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

Facility Type: SPILL OR RELEASE Facility ID: 452769 API #: _____ County Name: WELD

Facility Name: HPD Platteville SWD 1 Latitude: 40.216800 Longitude: -104.720000

** correct Lat/Long if needed: Latitude: 40.216800 Longitude: -104.720000

QtrQtr: NENE Sec: 24 Twp: 3N Range: 66W Meridian: 6 Sensitive Area? No

SITE CONDITIONS

General soil type - USCS Classifications SP Most Sensitive Adjacent Land Use Agricultural land

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

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 type="checkbox"/> Produced Water | <input type="checkbox"/> Workover Fluids | _____ |
| <input checked="" 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
Yes	SOILS	1350 square feet	soil samples for field screening

INITIAL ACTION SUMMARY

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

Crews were onsite the same day with vac trucks, front end loader, and shovels to remove impacted soil. It is estimated that 865 bbls of fluid were released; 800 bbls stayed inside containment, and 65 bbls spilled outside of containment. LT Environmental was onsite to assess impacted soil and collect confirmation samples.

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):

Yes, ten soil samples were collected as part of the investigation. The confirmation soil samples will consist grab samples. Analysis will include BTEX and TPH. Sample nomenclature began with HPD01, HPD02, etc. Sample location diagram is attached.

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 10
Number of soil samples exceeding 910-1 0
Was the areal and vertical extent of soil contamination delineated? Yes
Approximate areal extent (square feet) 1350

NA / ND

-- Highest concentration of TPH (mg/kg) 460
NA Highest concentration of SAR
BTEX > 910-1 No
Vertical Extent > 910-1 (in feet) 0

Groundwater

Number of groundwater samples collected 0
Was extent of groundwater contaminated delineated? No
Depth to groundwater (below ground surface, in feet) 12'
Number of groundwater monitoring wells installed 0
Number of groundwater samples exceeding 910-1 0

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
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?

REMEDIAL ACTION PLAN

Does this Supplemental Form 27A include changes to a previously approved Remedial Action Plan? No _____

SOURCE REMOVAL SUMMARY

Describe how source is to be removed.

Impacted sludge and oil were removed by vac trucks. Soil was hauled offsite to an approved Waste Management facility

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.

Soil samples were collected from the excavation for field screening and laboratory analysis. Laboratory results for the confirmation soil samples indicate that TPH and BTEX concentrations are below COGCC allowable levels at the extent of the excavation.

Soil Remediation Summary

In Situ

Ex Situ

_____ Bioremediation (or enhanced bioremediation)

Yes _____ Excavate and offsite disposal

_____ Chemical oxidation

If Yes: Estimated Volume (Cubic Yards) _____ 54

_____ Air sparge / Soil vapor extraction

Name of Licensed Disposal Facility or COGCC Facility ID # _____

_____ Natural Attenuation

_____ Excavate and onsite remediation

_____ Other _____

_____ 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.

Groundwater is monitored semi-annually under Weld County use by special review (USR) # 1677.

REMEDIATION 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: _____

REMEDIATION COMPLETION REPORT

REMEDIATION COMPLETION SUMMARY

Is this a Final Closure Request for this Remediation Project? No

Do all soils meet Table 910-1 standards? _____

Does the previous reply indicate consideration of background concentrations? _____

Are the only residual soil impacts pH, SAR, or EC at depths greater than 3 feet below ground surface? _____

Does Groundwater meet Table 910-1 standards? _____

Is additional groundwater monitoring to be conducted? _____

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? _____

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. 10/25/2017

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 10/26/2017

Date of commencement of Site Investigation. 10/26/2017

Date of completion of Site Investigation. 11/09/2017

REMEDIAL ACTION DATES

Date of commencement of Remediation. 10/27/2017

Date of completion of Remediation. 11/09/2017

SITE RECLAMATION DATES

Date of commencement of Reclamation. _____

Date of completion of Reclamation. _____

OPERATOR COMMENT

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

Signed: Bryan Paraspolo

Title: Environmental Scientist

Submit Date: _____

Email: bparaspolo@ltenv.com

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: 10805

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

<u>401493239</u>	<u>OTHER</u>
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)