

State of Colorado Oil and Gas Conservation Commission

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Document Number:

401627324

Receive Date:

05/10/2018

Report taken by:

CHRIS CANFIELD

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: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Operator No: <u>47120</u>	Phone Numbers
Address: <u>P O BOX 173779</u>		Phone: <u>(720) 929-4306</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80217-3779</u>
Contact Person: <u>Erik Mickelson</u>	Email: <u>Erik.Mickelson@anadarko.com</u>	Mobile: <u>()</u>

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 11340 Initial Form 27 Document #: 401627324

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 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

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

Facility Type: <u>LOCATION</u>	Facility ID: <u>318102</u>	API #: _____	County Name: <u>WELD</u>
Facility Name: <u>GERALD PICKERING GU-61N65W 29SWNE</u>		Latitude: <u>40.025147</u>	Longitude: <u>-104.683686</u>
** correct Lat/Long if needed: Latitude: <u>40.025671</u>		Longitude: <u>-104.683271</u>	
QtrQtr: <u>SWNE</u>	Sec: <u>29</u>	Twp: <u>1N</u>	Range: <u>65W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>
Facility Type: <u>LOCATION</u>	Facility ID: <u>318890</u>	API #: _____	County Name: <u>WELD</u>
Facility Name: <u>ELLANORA M ACKERSON GAS UNIT- 61N67W 2SWSE</u>		Latitude: <u>40.075906</u>	Longitude: <u>-104.853925</u>
** correct Lat/Long if needed: Latitude: <u>40.075401</u>		Longitude: <u>-104.854375</u>	
QtrQtr: <u>SWSE</u>	Sec: <u>2</u>	Twp: <u>1N</u>	Range: <u>67W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>
Facility Type: <u>LOCATION</u>	Facility ID: <u>319311</u>	API #: _____	County Name: <u>WELD</u>
Facility Name: <u>TROUDT-USX VV-61N67W 7NWSE</u>		Latitude: <u>40.062442</u>	Longitude: <u>-104.929240</u>
** correct Lat/Long if needed: Latitude: <u>40.058861</u>		Longitude: <u>-104.933168</u>	
QtrQtr: <u>NWSE</u>	Sec: <u>7</u>	Twp: <u>1N</u>	Range: <u>67W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

Facility Type: LOCATION		Facility ID: 326790		API #:		County Name: WELD	
Facility Name: UPRR 43 PAN AM GAS UNIT J-61N67W 19NESE				Latitude: 40.033889		Longitude: -104.927331	
				** correct Lat/Long if needed: Latitude: 40.033735		Longitude: -104.926228	
QtrQtr: NESE	Sec: 19	Twp: 1N	Range: 67W	Meridian: 6	Sensitive Area? Yes		

Facility Type: LOCATION		Facility ID: 327382		API #:		County Name: WELD	
Facility Name: WALSH GAS UNIT-62N68W 24NWSE				Latitude: 40.121404		Longitude: -104.949951	
				** correct Lat/Long if needed: Latitude: 40.119027		Longitude: -104.948746	
QtrQtr: NWSE	Sec: 24	Twp: 2N	Range: 68W	Meridian: 6	Sensitive Area? Yes		

Facility Type: LOCATION		Facility ID: 328082		API #:		County Name: WELD	
Facility Name: PEAKS 35-2				Latitude: 40.076700		Longitude: -104.974100	
				** correct Lat/Long if needed: Latitude: 40.076965		Longitude: -104.974030	
QtrQtr: SESW	Sec: 2	Twp: 1N	Range: 68W	Meridian: 6	Sensitive Area? Yes		

Facility Type: LOCATION		Facility ID: 331441		API #:		County Name: WELD	
Facility Name: ROBBINS-61N67W 24NWNW				Latitude: 40.041808		Longitude: -104.845822	
				** correct Lat/Long if needed: Latitude: 40.038851		Longitude: -104.842046	
QtrQtr: NWNW	Sec: 24	Twp: 1N	Range: 67W	Meridian: 6	Sensitive Area? Yes		

Facility Type: TANK BATTERY		Facility ID: 446225		API #:		County Name: ADAMS	
Facility Name: BOX ELDER G-61S65W 26SESW				Latitude: 39.930914		Longitude: -104.635165	
				** correct Lat/Long if needed: Latitude:		Longitude:	
QtrQtr: SESW	Sec: 26	Twp: 1S	Range: 65W	Meridian: 6	Sensitive Area? Yes		

Facility Type: TANK BATTERY		Facility ID: 451745		API #:		County Name: WELD	
Facility Name: Borgmann SE 1 2N68W battery				Latitude:		Longitude:	
				** correct Lat/Long if needed: Latitude: 40.162001		Longitude: -104.946282	
QtrQtr:	Sec:	Twp:	Range:	Meridian:	Sensitive Area? Yes		

Facility Type: TANK BATTERY		Facility ID: 451746		API #:		County Name: WELD	
Facility Name: Borgman U 1-10JI battery				Latitude:		Longitude:	
				** correct Lat/Long if needed: Latitude: 40.164498		Longitude: -104.950615	
QtrQtr:	Sec:	Twp:	Range:	Meridian:	Sensitive Area? Yes		

SITE CONDITIONS

General soil type - USCS Classifications SC Most Sensitive Adjacent Land Use Residential and Agriculture

Is domestic water well within 1/4 mile? Yes 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

NA

SITE INVESTIGATION PLAN

TYPE OF WASTE:

☒ E&P Waste

☐ Other E&P Waste

☐ Non-E&P Waste

☒ Produced Water

☐ Workover Fluids

☒ 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
No	GROUNDWATER	See Sump Closure Reports	Groundwater sample results provided, if applicable
Yes	SOILS	See Sump Closure Reports	Soil sample results provided

INITIAL ACTION SUMMARY

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

The objective of the soil and groundwater (if present) sampling was to determine if petroleum hydrocarbon impacts to the subsurface media resulted from operating a produced water sump at the site.

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):

Soil sampling was conducted to determine if petroleum hydrocarbon impacts to subsurface soil resulted from operating a produced water sump at the respective sites. For each sump closure site, one or more soil samples were collected for laboratory analysis of benzene, toluene, ethylbenzene, and total xylenes (BTEX), total petroleum hydrocarbons (TPH), pH, and specific conductivity (EC). The soil sampling activities, laboratory analytical results, and conclusions will be summarized in a Sump Closure Report for each site.

Proposed Groundwater Sampling

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

If groundwater was encountered in the sump excavation, a groundwater sample was collected and submitted for laboratory analysis of BTEX. The groundwater sampling activities will be summarized in the Sump Closure Reports, as applicable.

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 13

Number of soil samples exceeding 910-1 0

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

Approximate areal extent (square feet) 240

Groundwater

Number of groundwater samples collected 2

Was extent of groundwater contaminated delineated? Yes

Depth to groundwater (below ground surface, in feet) 4'

Number of groundwater monitoring wells installed 0

Number of groundwater samples exceeding 910-1 0

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.

NA / ND

-- Highest concentration of TPH (mg/kg) 117.9

NA Highest concentration of SAR

BTEX > 910-1 No

Vertical Extent > 910-1 (in feet) 0

ND Highest concentration of Benzene (µg/l)

-- Highest concentration of Toluene (µg/l) 4.88

ND Highest concentration of Ethylbenzene (µg/l)

ND Highest concentration of Xylene (µg/l)

NA Highest concentration of Methane (mg/l)

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.

Soil samples were collected from the sump excavations for laboratory analysis of TPH, BTEX, pH, and EC. Impacted soil, if encountered, was transported to either Front Range Regional Landfill in Erie, Colorado.

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.

Source removal, as applicable, completed at the sump closure sites will be summarized in the Sump Closure Reports. Groundwater impacts were not encountered. No further action is required for these sites.

Soil Remediation Summary

☐ In Situ

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

☒ Ex Situ

Yes _____ Excavate and offsite disposal
If Yes: Estimated Volume (Cubic Yards) _____ 70
Name of Licensed Disposal Facility or COGCC Facility ID # _____
No _____ 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

REMEDIATION PROGRESS UPDATE

PERIODIC REPORTING

Frequency: ☐ Quarterly ☐ Semi-Annually ☐ Annually ☒ Other Initial Report; Produced water vessel closure

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

☒ Other Produced water vessel closure

WASTE DISPOSAL INFORMATION

Was E&P waste generated as part of this remediation? Yes

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

NA

Volume of E&P Waste (solid) in cubic yards 70

E&P waste (solid) description Petroleum hydrocarbon impacted soil (Ackerson Ellanora M GU #2)

COGCC Disposal Facility ID #, if applicable:

Non-COGCC Disposal Facility: Front Range Landfill in Erie, Colorado

Volume of E&P Waste (liquid) in barrels 0

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.

Sump closure sites have been reclaimed (interim) or are in the process of being reclaimed (final) in accordance with COGCC 1000 Series Reclamation Rules.

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). 08/24/2017

Date of commencement of Site Investigation. 08/24/2017

Date of completion of Site Investigation. 01/30/2018

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. _____

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: Erik Mickelson

Title: Senior HSE Representative

Submit Date: 05/10/2018

Email: Erik.Mickelson@anadarko.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: CHRIS CANFIELD

Date: 05/11/2018

Remediation Project Number: 11340

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

401627324	FORM 27-INITIAL-SUBMITTED
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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)