

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
402214897

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: CAERUS PICEANCE LLC	Operator No: 10456	Phone Numbers
Address: 1001 17TH STREET #1600		
City: DENVER	State: CO	Zip: 80202
Contact Person: Jake Janicek	Email: jjanicek@caerusoilandgas.com	Phone: (970) 285-2720
		Mobile: (970) 778-2314

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 10527 Initial Form 27 Document #: 401412080

PURPOSE INFORMATION

<input type="checkbox"/> 901.e. Sensitive Area Determination	<input checked="" 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 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: SPILL OR RELEASE	Facility ID: 452145	API #: _____	County Name: GARFIELD
Facility Name: K35 CDP Pipeline	Latitude: 39.653930	Longitude: -108.142341	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: NWSW	Sec: 35	Twp: 4S	Range: 96W
		Meridian: 6	Sensitive Area? Yes

SITE CONDITIONS

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

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? Yes

Other Potential Receptors within 1/4 mile

The COGCC mapping website has a blue line (Waters of the State) within a 1/4 mile of the point of release but the area referenced is dry and in a vegetated drainage.

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 checked="" 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	GROUNDWATER	Map Attached	lab analyses
Yes	SOILS	Request Map	lab analyses

INITIAL ACTION SUMMARY

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

Please see Remediation Project for previous action summary information

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):

Groundwater monitoring will be conducted on a monthly and quarterly basis. Monthly monitoring activities will include gauging fluid levels of the sump and all groundwater monitoring wells and collecting groundwater samples from monitoring wells MW-15, MW-26, MW-29, MW-30, MW-32, MW-33, MW-34, MW-35, MW-38, MW-46, and the spring if flowing. One monthly monitoring event of each quarter will include groundwater samples from all monitoring wells where LNAPL is not observed. All groundwater samples will be submitted for laboratory analysis of BTEX. Groundwater monitoring and sampling activities will be reported to the COGCC quarterly via Supplemental Form 27.

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? No
Approximate areal extent (square feet) 0

NA / ND

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

Groundwater

Number of groundwater samples collected 56
Was extent of groundwater contaminated delineated? Yes
Depth to groundwater (below ground surface, in feet) 20'
Number of groundwater monitoring wells installed 0
Number of groundwater samples exceeding 910-1 20

-- Highest concentration of Benzene (µg/l) 2600
-- Highest concentration of Toluene (µg/l) 690
-- Highest concentration of Ethylbenzene (µg/l) 380
-- Highest concentration of Xylene (µg/l) 2700
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.

To date, Caerus has installed three air sparge curtains comprised of 17 air sparge wells. By using an on-site compressor to force air into the groundwater formation, this system will remediate both the free phase and dissolved phase hydrocarbons. Additional remediation strategies will be assessed as data is collected.

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.

To date, Caerus has installed three air sparge curtains comprised of 17 air sparge wells. By using an on-site compressor to force air into the groundwater formation, this system will remediate both the free phase and dissolved phase hydrocarbons. Additional remediation strategies will be assessed as data is collected.

Soil Remediation Summary

In Situ

Ex Situ

_____ Bioremediation (or enhanced bioremediation)

_____ Excavate and offsite disposal

_____ Chemical oxidation

_____ If Yes: Estimated Volume (Cubic Yards) _____

Yes _____ 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

_____ Bioremediation (or enhanced bioremediation)

_____ Chemical oxidation

Yes _____ 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.

Groundwater monitoring will be conducted on a monthly and quarterly basis. Monthly monitoring activities will include gauging fluid levels of the sump and all groundwater monitoring wells and collecting groundwater samples from monitoring wells MW-15, MW-26, MW-29, MW-30, MW-32, MW-33, MW-34, MW-35, MW-38, MW-46, and the spring if flowing. One monthly monitoring event of each quarter will include groundwater samples from all monitoring wells where LNAPL is not observed. All groundwater samples will be submitted for laboratory analysis of BTEX. Groundwater monitoring and sampling activities will be reported to the COGCC quarterly via Supplemental Form 27.

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? _____

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.

A reclamation plan will be developed after site investigation is complete and a remediation plan is in place.

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. 10/10/2017

Actual Spill or Release date, if known. _____

SITE INVESTIGATION DATES

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

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

Date of completion of Site Investigation. _____

REMEDIAL ACTION DATES

Date of commencement of Remediation. 01/03/2018

Date of completion of Remediation. _____

SITE RECLAMATION DATES

Date of commencement of Reclamation. _____

Date of completion of Reclamation. _____

OPERATOR COMMENT

Extent of soil impacts can be found on maps attached to COGCC Documents 401446345 and 401480416.

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

Signed: Jake Janicek

Title: EHS Specialist

Submit Date: _____

Email: jjanicek@caerusoilandgas.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: 10527

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

402214898	ANALYTICAL RESULTS
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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)