

# State of Colorado Oil and Gas Conservation Commission

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402273820

Receive Date:

12/31/2019

Report taken by:

ROB YOUNG

## 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: FRITZLER RESOURCES INC	Operator No: 31257	<b>Phone Numbers</b> Phone: (970) 8679388 Mobile: (970) 7680845
Address: P O BOX 114		
City: FORT MORGAN	State: CO Zip: 80701	
Contact Person: Gene Fritzler	Email: gfritzler12@gmail.com	

### PROJECT, PURPOSE & SITE INFORMATION

#### PROJECT INFORMATION

Remediation Project #: 9126 Initial Form 27 Document #: 2086940

#### 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 type="checkbox"/> 909.c.(4), Rule 908.g.: Centralized E&P Waste Management Facility closure | <input checked="" type="checkbox"/> Other Use of prod H2O for livestock                                    |

#### SITE INFORMATION

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

Facility Type: WELL	Facility ID:	API #: 121-05439	County Name: WASHINGTON
Facility Name: WEST FORK UNIT 17		Latitude: 39.767341	Longitude: -103.591103
		** correct Lat/Long if needed: Latitude:	Longitude:
QtrQtr: NWNW	Sec: 30	Twp: 3S	Range: 55W Meridian: 6 Sensitive Area? No

#### SITE CONDITIONS

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

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

Permitted Water from Westfork Well

☐ 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	approximately 0.5 acres	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.

Livestock use was discontinued and valve was shut within 24 hours of inspection.

### 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 ):

15 soil samples were collected and results are tabulated in attachment. After ripping and diking the area sample will be taken to delineate the impact further. We anticipate this to proceed this by Fall fo 2019

#### Proposed Groundwater Sampling

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

Map is Attached , Two wells 22 ft from surface were drilled, no ground water was encountered now water was collected.

#### Proposed Surface Water Sampling

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

At the the time no surface water was available.

### Additional Investigative Actions

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

Additional investigative research will procede as needed after we can disk the area.

# SITE INVESTIGATION REPORT

## SAMPLE SUMMARY

### Soil

Number of soil samples collected 15

Number of soil samples exceeding 910-1 3

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

Approximate areal extent (square feet) 2000

### NA / ND

NA Highest concentration of TPH (mg/kg)

-- Highest concentration of SAR 41

BTEX > 910-1 No

Vertical Extent > 910-1 (in feet) 2

### 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

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?

Refer to Attachment A.

## 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.

Land Owner is disking area. If he does not disk area this summer(2019) we will finish disking and adding soil addendums to remediate area.

### **REMEDICATION 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.

In Process- Since the area is limited blending and disking area into surrounding area will significantly reduced the SAR level  
We are also evaluating surfactants and other addendums as well a more salt resistant grass. The rancher has suggested a clover which we are evaluating

### **Soil Remediation Summary**

☒ **In Situ**

\_\_\_\_\_ Bioremediation ( or enhanced bioremediation )  
\_\_\_\_\_ Chemical oxidation  
\_\_\_\_\_ Air sparge / Soil vapor extraction  
Yes \_\_\_\_\_ 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**

☐ \_\_\_\_\_ 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.

N/A

## REMEDATION PROGRESS UPDATE

### PERIODIC REPORTING

**Frequency:** ☐ Quarterly ☐ Semi-Annually ☐ Annually ☒ Other December 2019 Update

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

☒ Other Status

### 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: \_\_\_\_\_

## REMEDATION COMPLETION REPORT

### REMEDATION COMPLETION SUMMARY

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

Do all soils meet Table 910-1 standards? No

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? No

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.

Impacted area will be disked and sampled for BTEX, TPH, EC, SAR, pH

Soil addendums if required will be disked in and native grasses will be sowed

in.

Refer to Attachment A for details

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. \_\_\_\_\_

### SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). \_\_\_\_\_

Date of commencement of Site Investigation. 06/01/2015

Date of completion of Site Investigation. \_\_\_\_\_

### REMEDIAL ACTION DATES

Date of commencement of Remediation. 07/01/2015

Date of completion of Remediation. 08/01/2016

### SITE RECLAMATION DATES

Date of commencement of Reclamation. \_\_\_\_\_

Date of completion of Reclamation. \_\_\_\_\_

### OPERATOR COMMENT

We continue to work with the rancher.

Analysis are forthcoming,

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

Signed: Gene Fritzler

Title: VP

Submit Date: 12/31/2019

Email: gfritzler12@gmail.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: ROB YOUNG

Date: 01/09/2020

Remediation Project Number: 9126

### COA Type

### Description

	Provide the most recent soil analytical data and sample location map via supplemental eForm 27 by 1/24/2020.
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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

402273820	FORM 27-SUPPLEMENTAL-SUBMITTED
402275210	REMEDATION PROGRESS REPORT

Total Attach: 2 Files

## General Comments

### User Group

### Comment

### Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)