

# State of Colorado Oil and Gas Conservation Commission

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Document Number:

402529576

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	<b>Phone Numbers</b>
Address: 1001 17TH STREET #1600		Phone: (970) 285.2739
City: DENVER State: CO Zip: 80202		Mobile: (970) 987.4650
Contact Person: Brett Middleton	Email: bmiddleton@caerusoilandgas.com	

### PROJECT, PURPOSE & SITE INFORMATION

#### PROJECT INFORMATION

Remediation Project #: 15310

Initial Form 27 Document #: 402330404

#### 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 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: 436984	API #: _____	County Name: MESA
Facility Name: SPILL/RELEASE POINT	Latitude: 39.174408	Longitude: -108.100545	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: SWN	Sec: 22	Twp: 10S	Range: 96W Meridian: 6 Sensitive Area? Yes

#### SITE CONDITIONS

General soil type - USCS Classifications GM

Most Sensitive Adjacent Land Use Agricultural Operation

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? No

Other Potential Receptors within 1/4 mile

# 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	SOILS	Surficial	Laboratory analytical results

## 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 refer to the sample narrative attached to this form for previous remediation and sampling efforts conducted 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 ):

See attached investigation report.

### 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 16

Number of soil samples exceeding 910-1 6

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

Approximate areal extent (square feet) 4750

### NA / ND

-- Highest concentration of TPH (mg/kg) 107

-- Highest concentration of SAR 35.8

BTEX > 910-1 No

Vertical Extent > 910-1 (in feet) 3

### Groundwater

Number of groundwater samples collected 0

Was extent of groundwater contaminated delineated? Yes

Depth to groundwater (below ground surface, in feet) 100'

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.

Caerus proposed to excavate and stockpile the top six inches of soil for post remediation reclamation and excavate approximately 52 c.u. yard of SAR impacted soils see figure 2. the top 6" will be blended with imported topsoil and recontoured to meet pre-excavation grade.

## 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.

See the attached remediation approach detailed out in the attached investigation report. Caerus would like to request a reduced sampling analyte list based on previous investigation and remediation sampling. Impacts exceeded COGCC Table 910-1 for inorganics specifically SAR and EC. Caerus requests future sampling be required for SAR and EC only.

## 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) \_\_\_\_\_ 52

Name of Licensed Disposal Facility or COGCC Facility ID # \_\_\_\_\_

Yes \_\_\_\_\_ Excavate and onsite remediation

No \_\_\_\_\_ Land Treatment

No \_\_\_\_\_ Bioremediation (or enhanced bioremediation)

No \_\_\_\_\_ Chemical oxidation

Yes Other \_\_\_\_\_ topsoil blending due to low concentrations of inorganics

## 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.

No groundwater impacts have been identified.

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

## 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? \_\_\_\_\_

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.

Caerus will recontour and seed the site and install stormwater controls to prevent erosion and reclamation.

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? 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. 05/14/2020

### **SITE INVESTIGATION DATES**

Date of Initial Actions described in Site Investigation Plan (start date). 05/14/2014

Date of commencement of Site Investigation. 04/30/2014

Date of completion of Site Investigation. 08/26/2014

### **REMEDIAL ACTION DATES**

Date of commencement of Remediation. 11/24/2020

Date of completion of Remediation. \_\_\_\_\_

### **SITE RECLAMATION DATES**

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

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

### **OPERATOR COMMENT**

Previous remediation investigation details can be found in Doc# 402347345 & 402330404

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

Signed: Brett Middleton

Title: Environmental Lead

Submit Date: \_\_\_\_\_

Email: bmiddleton@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: 15310

### **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**

402529659	REMEDIAL ACTION PLAN
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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)