

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203

Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

403356248

Receive Date:

Report taken by:

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.

Closure request is not available for an Initial Site Investigation and Remediation Workplan.

OPERATOR INFORMATION

Name of Operator: <u>PADCO LLC</u>	Operator No: <u>24500</u>	Phone Numbers
Address: <u>800 W 6TH STREET SUITE 1010</u>		Phone: <u>(918) 630-9912</u>
City: <u>LOS ANGELES</u>	State: <u>CA</u>	Zip: <u>90017</u>
Contact Person: <u>Dan Richmond</u>	Email: <u>dan@dsrinc.net</u>	Mobile: <u>(918) 630-9912</u>

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: _____ Initial Form 27 Document #: 403356248

PURPOSE INFORMATION

- ☐ Rule 913.c.(1): Pit or Cuttings Trench closure.
- ☐ Rule 913.c.(2): Buried or partially buried vessel closure, which will be by removal.
- ☐ Rule 913.c.(3): Remediation of Spill and Releases pursuant to Rule 912.
- ☐ Rule 913.c.(4): Land treatment of Oily Waste pursuant to Rule 905.e.
- ☐ Rule 913.c.(5): Closure of Centralized E&P Waste Management Facilities pursuant to Rule 907.h.
- ☐ Rule 913.c.(6): Remediation of impacted Groundwater pursuant to Rule 915.e.(3).D, and the contaminant concentrations in Table 915-1.
- ☐ Rule 913.c.(7): Investigation and remediation of natural gas in soil or Groundwater.
- ☐ Rule 913.c.(8): When requested by the Director due to any potential risk to soil, Groundwater, or surface water.
- ☐ Rule 913.c.(9): Decommissioning of Oil and Gas Facilities.
- ☐ Rule 913.g: Changes of Operator.
- ☐ Rule 915.b: Request to leave elevated inorganics in situ.
- ☒ Other: Removal of off-location flowline

SITE INFORMATION

No Multiple Facilities

Facility Type: <u>OFF-LOCATION FLOWLINE</u>	Facility ID: <u>475335</u>	API #: _____	County Name: _____
Facility Name: _____	Latitude: <u>39.864778</u>	Longitude: <u>-103.311991</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: _____	Sec: _____	Twp: _____	Range: _____
Meridian: _____		Sensitive Area? <u>No</u>	

SITE CONDITIONS

General soil type - USCS Classifications SC

Most Sensitive Adjacent Land Use Agriculture

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

SITE INVESTIGATION PLAN**TYPE OF WASTE:**
☐ E&P Waste
 ☐ Other E&P Waste
 ☒ Non-E&P Waste
☐ Produced Water☐ Workover Fluids

Flowline

☐ 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
UNDETERMINED	SOILS	TBD	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.

Initial sampling associated with the removal of ~475 feet of off-location flowline associated with the plugged and abandoned Gulley #1-D well (API 05-121-08922)

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):

Samples will be obtained to determine if soils will meet table 9-15 standards. Samples will be grab samples. Samples for the off-location buried flowline will be one (1) at the well location and one (1) at the heater treater riser, other sampling as necessary based on visual observations during the excavation.

Proposed Groundwater Sampling

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

If ground water is encountered, a ground water sample will be taken and evaluated. Groundwater is not anticipated based on previous reclamation near this site.

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 915-1 _____
Was the areal and vertical extent of soil contamination delineated? _____
Approximate areal extent (square feet) _____

NA / ND

Highest concentration of TPH (mg/kg) _____
Highest concentration of SAR _____
BTEX > 915-1 _____
Vertical Extent > 915-1 (in feet) _____

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 915-1 _____

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
Number of surface water samples exceeding 915-1
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**SOURCE REMOVAL SUMMARY**

Describe how source is to be removed.

The ~475 feet of buried off-location flowline will be dug up and removed. If any soils are found to not meet Table 915 standards it is anticipated that the soils will be dug and hauled to an approved waste disposal facility. The well has been P&A, the well site equipment has been removed, the production equipment has been removed.

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.

If any contaminated soils are determined (based on soil sample analysis results), these soils will be dug out/loaded/hauled to an approved waste soil disposal site. Closure samples will be taken and analyzed.

Soil Remediation Summary

☐ In Situ

☐ Ex Situ

_____ Bioremediation (or enhanced bioremediation)

_____ Excavate and offsite disposal

_____ Chemical oxidation

_____ If Yes: Estimated Volume (Cubic Yards) _____

_____ Air sparge / Soil vapor extraction

_____ Name of Licensed Disposal Facility or COGCC Facility ID # _____

_____ Natural Attenuation
_____ Other _____

_____ 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.

REMEDIATION PROGRESS UPDATE

PERIODIC REPORTING

Approved Reporting Schedule:

☐ Quarterly

☐ Semi-Annually

☐ Annually

☐ Other

☐ **Request Alternative Reporting Schedule:**

☐ Semi-Annually

☐ Annually

☐ Other

Rule 913.e:

After initial approval of a Form 27, the Operator will provide quarterly update reports in a Supplemental Form 27 to document progress of site investigation and remediation, unless an alternative reporting schedule has been requested by the Operator and approved by the Director. The Director may request a more frequent reporting schedule based on site-specific conditions.

Report Type:

☐ Groundwater Monitoring

☐ Land Treatment Progress Report

☐ O&M Report

☐ Other

Adequacy of Operator's General Liability Insurance and Financial Assurance

Describe the adequacy of the Operator's general liability insurance and Financial Assurance to fully address the anticipated costs of Remediation, including the estimated remaining cost for this project (below).

If this information has been provided on a Form 27 within the last 12 months, provide the Document Number of that form.

PADCO is adequately bonded per Rule 702 and is compliant with the insurance requirements per Rule 705.

Operator anticipates the remaining cost for this project to be: \$ 2000

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:

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.

After the removal of the off-location flowline, refill the trench, grade level with surrounding agricultural land, return to farmer for planting crops.

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 provide the seed mix? No

If YES, does the seed mix comply with local soil conservation district recommendations? _____

Did the local soil conservation district provide the seed mix? No

SITE RECLAMATION DATES

Proposed date of commencement of Reclamation. 04/03/2023

Proposed date of completion of Reclamation. 05/31/2023

IMPLEMENTATION SCHEDULE

Per Rule 913.d.(2): Any change from the approved implementation schedule will be requested at least 14 days in advance, and the Operator may not make the change without the Director's approval.

PRIOR DATES

Date of Surface Owner notification/consultation, if required. _____

Actual Spill or Release date, or date of discovery. _____

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 04/03/2023

Proposed site investigation commencement. 04/05/2023

Proposed completion of site investigation. 04/07/2023

REMEDIAL ACTION DATES

Proposed start date of Remediation. 04/05/2023

Proposed date of completion of Remediation. 05/01/2023

Per Rule 913.d.(2): Any change from the approved implementation schedule will be requested at least 14 days in advance, and the Operator may not make the change without the Director's approval.

☐ Change from approved implementation schedule per Rule 913.d.(2).

Basis for change in implementation schedule:

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: Ty J Smith

Title: Consultant

Submit Date: _____

Email: tysmith@lesair.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: _____

COA Type**Description**

0 COA	

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**

403356253	REMEDIAL ACTION PLAN
403356254	SITE MAP

Total Attach: 2 Files

General Comments**User Group****Comment****Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)