

Proj 1833

FORM
27
Rev 6/99

State of Colorado Oil and Gas Conservation Commission



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SITE INVESTIGATION AND REMEDIATION WORKPLAN

This form shall be submitted to the Director for approval prior to the initiation of site investigation and remediation activities. Form 27 is intended to be used whenever possible. Additional documentation will be required when large volumes of soil and groundwater have been impacted or involve large facilities with multiple source areas. See Rule 910. Attach as many pages as needed to fully describe the proposed work.

Employee:
 Spill Complaint
 Inspection NOAV
Tracking No: ~~11-668~~
20052937

CAUSE OF CONDITION BEING INVESTIGATED AND REMEDIATED

Spill or Release Plug & Abandon Central Facility Closure Site/Facility Closure Other (describe): NOAV 263494

OGCC Operator Number: <u>24461</u>	Contact Name and Telephone: <u>T.J. Cammon</u>
Name of Operator: <u>Diversified Operating Corp</u>	No: <u>303-384-9611</u>
Address: <u>15000 West 6th Ave. Suite 102</u>	Fax: <u>303-384-9612</u>
City: <u>Golden</u> State: <u>CO</u> Zip: <u>80401</u>	
API Number: <u>05 123 20908 00</u> County: <u>Weld</u>	
Facility Name: <u>Tank Battery</u> Facility Number: <u>263494</u>	
Well Name: <u>State</u> Well Number: <u>36-16</u>	
Location: (QtrQtr, Sec, Twp, Rng, Meridian): <u>SESE Sec 36 T8N R60W</u> Latitude: _____ Longitude: _____	

TECHNICAL CONDITIONS

Type of Waste Causing Impact (crude oil, condensate, produced water, etc): oil soil

Site Conditions: Is location within a sensitive area (according to Rule 901e)? Y N If yes, attach evaluation.

Adjacent land use (cultivated, irrigated, dry land farming, industrial, residential, etc.): dry land (burned out from prairie fire)

Soil type, if not previously identified on Form 2A or Federal Surface Use Plan: Nunn loam

Potential receptors (water wells within 1/4 mi, surface waters, etc.): _____

Description of Impact (if previously provided, refer to that form or document):

Impacted Media (check):	Extent of Impact:	How Determined:
<input checked="" type="checkbox"/> Soils	<u>bottom of emergency/production pit</u>	<u>NOAV 1126684</u>
<input type="checkbox"/> Vegetation	_____	_____
<input type="checkbox"/> Groundwater	_____	_____
<input type="checkbox"/> Surface Water	_____	_____

REMEDIALTION WORKPLAN

Describe initial action taken (if previously provided, refer to that form or document):
DOC proposes the burning of the tumbleweeds in the bottom of the pit. Any free oil or oily weeds will be incinerated.

Describe how source is to be removed:
After burning remove any soil with a backhoe and place on the south pit berm.

Describe how remediation of existing impacts is to be accomplished, including removal and disposal at an injection well or licensed facility, land treatment on site, removal of impacted groundwater, insitu bioremediation, burning of oily vegetation, etc.:
Land treatment will be at the tank battery site with insitu bioremediation.

Submit Page 2 with Page 1





Tracking Number: _____ Name of Operator: _____ OGCC Operator No: _____ Received Date: _____ Well Name & No: _____ Facility Name & No: _____

Page 2 REMEDIATION WORKPLAN (Cont.)

OGCC Employee: _____

If groundwater has been impacted, describe proposed monitoring plan (# of wells or sample points, sampling schedule, analytical methods, etc.):

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. Use additional sheet for description if required. Pit layout should be self sufficient on plan of action.

Attach samples and analytical results taken to verify remediation of impacts. Show locations of samples on an onsite schematic or drawing.

Is further site investigation required? Y N If yes, describe:

Final disposition of E&P waste (landtreated and disposed onsite, name of licensed disposal facility, recycling, reuse, etc.): Will be treated insitu and not removed from tank battery location.

IMPLEMENTATION SCHEDULE

Date Site Investigation Began: _____ Date Site Investigation Completed: _____ Date Remediation Plan Submitted: 05/05/2004 Remediation Start Date: _____ Anticipated Completion Date: 07/01/2004 Actual Completion Date: _____

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

Print Name: R. J. Cameron Signed: [Signature] Title: Pur Date: 5/05/2004

OGCC Approved: Randall H. Taylor Title: EPS Date: 8/23/04

* Onsite land treat of oily soils must be conducted in accordance with Rule 907.e.(2). Additionally, land-treated oily waste incorporated in place shall not exceed the standards in Table 916-1. Therefore, remediated soils shall be analyzed prior to beneficial re-use.