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District I
P.O. Box 12102, Santa Fe, NM
District II
P.O. Box 12102, Santa Fe, NM
District III
1000 Rio Brazos Rd., Santa Fe, NM 87504

State of New Mexico
Energy, Minerals and Natural Resources Department
OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

SUBMIT 1 COPY TO
APPROPRIATE
DISTRICT OFFICE
AND 1 COPY TO
SANTA FE OFFICE

(Revised 3/9/94)

Approved

PIT REMEDIATION AND CLOSURE REPORT

RECEIVED
AUG 14 1998

Operator: COLT RESOURCES CORPORATION Telephone: (406) 248-2222

Address: PO BOX 7167, Billings, MT 59103

Facility Or: MILLER GAS COM B-1E

Well Name _____

Location: Unit or Qtr/Qtr sec NW/SW Sec 20 T 30N R 13W county San Juan

Pit Type: Separator ___ Dehydrator X Other _____

Land Type: BLM X, State ___, Fee X, Other _____

OIL CON. DIV.
DIST. 3

Pit Location: Pit dimensions: length 15, width 15, depth 4
(Attach diagram)

Reference: wellhead X, other _____

Footage from reference: 138 feet

Direction from reference: 0 Degrees X East North X
of
West South _____

Depth To Ground Water: (Vertical distance from contaminants to seasonal high water elevation of ground water)	Less than 50 feet (20 points)	
	50 feet to 99 feet (10 points)	
	Greater than 100 feet (0 Points)	<u>0</u>
Wellhead Protection Area: (Less than 200 feet from a private domestic water source, or; less than 1000 feet from all other water sources)	Yes (20 points)	
	No (0 points)	<u>0</u>
Distance To Surface Water: (Horizontal distance to perennial lakes, ponds, rivers, streams, creeks, irrigation canals and ditches)	Less than 200 feet (20 points)	
	200 feet to 1000 feet (10 points)	
	Greater than 1000 feet (0 points)	<u>0</u>
	RANKING SCORE (TOTAL POINTS):	<u>0</u>

Date Remediation Started: _____ Date Completed: _____

Remediation Method: Excavation _____ Approx. cubic yards _____
(Check all appropriate sections) Landfarmed _____ Insitu Bioremediation _____

Other _____

Remediation Location: Onsite _____ Offsite _____
(ie. landfarmed onsite, name and location of offsite facility)

General Description Of Remedial Action: _____

Approval to backfill the Miller Gas Com B-1E Dehydration pit was obtained from the OCD, Santa Fe office via certified letter return receipt #: Z-235-437-274 dated May 27, 1998.

Ground Water Encountered: No Yes _____ Depth _____

Final Pit: Sample location _____ Center of Pit _____

Closure Sampling: _____
(if multiple samples, attach sample results and diagram of sample locations and depths)

Sample depth _____ 3 feet below pit bottom

Sample date _____ 3/27/98 Sample time _____ 3:35 pm

Sample Results

Benzene (ppm) _____ 0.290 ppm

Total BTEX (ppm) _____ 32.970 ppm

Field headspace (ppm) _____ N/A

TPH _____ 548 ppm

Ground Water Sample: Yes _____ No (If yes, attach sample results)

I HEREBY CERTIFY THAT THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF

DATE 8/4/98

SIGNATURE *Duane Zimmerman*

PRINTED NAME DUANE ZIMMERMAN
AND TITLE OPERATIONS ENGINEER

Miller Gas Com B#1E
NW/NW Section 20, T30N-R13W
San Juan County, New Mexico

