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REPORTS

DATE:

1994

District I
O. Box 1980, Hobbs, NM
District II
O. Drawer DD, Artesia, NM 88211
District III
100 Rio Brazos Rd, Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

PIT REMEDIATION AND CLOSURE REPORT

Operator: Amoco Production Company Telephone: (505) - 326-9200

Address: 200 Amoco Court, Farmington, New Mexico 87401

Facility Or: BOYD GC IA
Well Name

Location: Unit or Qtr/Qtr Sec C Sec 8 T31N R 10W County SAN JUAN

Pit Type: Separator Dehydrator Other _____

Land Type: BLM _____, State _____, Fee , other COM. AGMT.

Pit Location: Pit dimensions: length 47', width 38', depth 24'
(Attach diagram)

Reference: wellhead , other _____

Footage from reference: 80'

Direction from reference: 15 Degrees East North _____
of
_____ West South

Depth To Ground Water: Less than 50 feet (20 points)
(Vertical distance from 50 feet to 99 feet (10 points)
contaminants to seasonal Greater than 100 feet (0 Points) 20
high water elevation of ground water)

Wellhead Protection Area: Yes (20 points)
(Less than 200 feet from a private No (0 points) 20
domestic water source, or; less than 1000 feet from all other water sources)

Distance To Surface Water: Less than 200 feet (20 points)
(Horizontal distance to perennial 200 feet to 1000 feet (10 points)
lakes, ponds, rivers, streams, creeks, Greater than 1000 feet (0 points) 10
irrigation canals and ditches)

RANKING SCORE (TOTAL POINTS): 50

Date Remediation Started: _____ Date Completed: 8/17/94

Remediation Method: Excavation Approx. cubic yards 1600
(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: _____

Excavation + CONTAMINATED WATER PUMPED + DISPOSED OF.

Ground Water Encountered: No _____ Yes Depth 24'

Final Pit: Sample location see Attached Documents

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

Sample depth 24'

Sample date 8-17-94 Sample time _____

Sample Results

Benzene (ppm) 3.7 PPB

Total BTEX (ppm) 97.3 PPB

Field headspace (ppm) _____

TPH _____

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 8/18/94

SIGNATURE B. Shaw

PRINTED NAME AND TITLE Buddy D. Shaw Environmental Coordinator



**ON SITE
TECHNOLOGIES, LTD.**
AROMATIC VOLATILE ORGANICS

Attn: *Nelson Velez*
 Company: *Blagg Engineering*
 Address: *P.O. Box 87*
 City, State: *Bloomfield, NM 87413*

Date: *8/9/94*
 Lab ID: *1687*
 Sample ID: *2419*
 Job No. *2-1000*

Project Name: *Boyd GC 1A*
 Project Location: *PW 1 @ GW (24') - Sep/Dehy Pit*
 Sampled by: *NV* Date: *8/9/94*
 Analyzed by: *DLA* Date: *8/10/94*
 Sample Matrix: *Liquid*

Time: *13:15*

Aromatic Volatile Organics

<i>Component</i>	<i>**Measured Concentration ug/L</i>
<i>Benzene</i>	<i>19.6</i>
<i>Toluene</i>	<i>52.8</i>
<i>Ethylbenzene</i>	<i>26.4</i>
<i>m,p-Xylene</i>	<i>325</i>
<i>o-Xylene</i>	<i>87</i>
<i>TOTAL</i>	<i>511 ug/L</i>

ND - Not Detectable

*** - Method Detection Limit, 2 ug/L*

***Method - SW-846 EPA Method 8020 Aromatic Volatile Organics by
Gas Chromatography***

Approved by: *Bill Vorhies, Ph.D.*
 Date: *8/10/94*



AROMATIC VOLATILE ORGANICS

Attn: *Nelson Velez*
Company: *Blagg Engineering*
Address: *P.O. Box 87*
City, State: *Bloomfield, NM 87413*

Date: *8/18/94*
Lab ID: *1829*
Sample ID: *2549*
Job No. *2-1000*

Project Name: *Boyd GC 1A*
Project Location: *PW 2 @ GW (24') - Sep/Dehy*
Sampled by: *NV* Date: *8/17/94*
Analyzed by: *DLA* Date: *8/18/94*
Sample Matrix: *Liquid*

Time: *16:45*

Aromatic Volatile Organics

Component	**Measured Concentration ug/L
<i>Benzene</i>	<i>3.7</i>
<i>Toluene</i>	<i>3.7</i>
<i>Ethylbenzene</i>	<i>1.2</i>
<i>m,p-Xylene</i>	<i>59.2</i>
<i>o-Xylene</i>	<i>29.4</i>
	TOTAL <i>97.3 ug/L</i>

ND - Not Detectable

*** - Method Detection Limit, 2 ug/L*

Method - SW-846 EPA Method 8020 Aromatic Volatile Organics by Gas Chromatography

Approved by: *[Signature]*
Date: *8/18/94*

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
 Amoco Production Company

3. Address and Telephone No.
 200 Amoco Court, Farmington, N.M. 87401 Tel: (505) 326-9200

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
 NE/4. NW/4. SEC. 08, T 31N, R10W. NMPM

5. Lease Designation and Serial No.

6. If Indian, Allottee or Tribe Name

7. If Unit or CA Agreement Designation
 14080011215

8. Well Name and No.
 BOYD G.C. #1A

9. API Well No.
 3004522132

10. Field and Pool, or Exploratory Area
 MESA VERDE

11. County or Parish, State
 SAN JUAN, N.M.

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Pit closure</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Pit closure verification - see attached documentation.

14. I hereby certify that the foregoing is true and correct

Signed B. Shaw Title Enviro. Coordinator Date 8/22/94
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.