

NEPA COMPLIANCE SURVEY

303

Project Information			
Project Title:	ThruBit LWT	Date:	7/6/2010
DOE Code:	6730.020.71060	Contractor Code:	8067-526
Project Lead:	Brian Black		
Project Overview 1. Brief project description [include anything that could impact the environment] 2. Legal location 3. Duration of the project 4. Major equipment to be used		Trip in hole to TD, circulate hole while rotating, test latching mechanism with wireline running tool, trip out of hole. No environmental impact is suspected. 45-3-X-21, 2315 FSL & 2323 FWL, NE/4 SW/4 Sec 21, T39N, R78W Up to 2 days Drilling rig, wireline truck	

The table below is to be completed by the Project Lead and reviewed by the Environmental Specialist and the DOE NEPA Compliance Officer. NOTE: If Change of Scope occurs, Project Lead must submit a new NEPA Compliance Survey and contact the Technical Assurance Department.

	Impacts Anticipated?			If YES, then complete below
	Yes	No	NA	If the anticipated impact might be unacceptable, recommend mitigation measures:
Water Quality				
Does the proposed project present potential for impacts on water resources or water quality?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Does the project affect surface water quantity or quality under both normal operations and accident conditions?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Does the proposed project affect groundwater quantity or quality under both normal operations and accident conditions?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Will the project area include "Waters of the State?"	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Will the project area require a Corps of Engineers permit?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

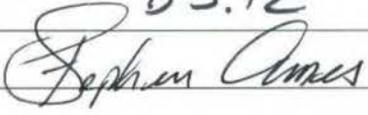
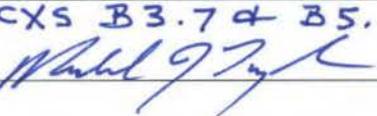
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	Impacts Anticipated?			If YES, then complete below.
	Yes	No	NA	If the anticipated impact might be unacceptable, recommend mitigation measures:
Geology & Soils				
Does the proposed project present potential for impacts related to geology or soils?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Does the proposed project alter, excavate or otherwise disturb land area consistent with other land use and habitat area?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Is the proposed project likely to impact local seismicity?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If the project involved disturbance of surface soils, are erosion and storm water control measures addressed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Air Quality				
Does the proposed action present potential for impacts on ambient air quality under both normal and accident conditions?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Are potential emissions (gases and/or airborne particulates including dust) outside of the normal scope for oil field operations?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Does the project present risk to human health and the environment from exposure to radiation and hazardous chemicals in emissions?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Is the project subject to New Source Performance Standards?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Is the project subject to National Emissions Standards for Hazardous Air Pollutants?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Is the project subject to emissions limitations in an Air Quality Control Region?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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	Impacts Anticipated?			If YES, then complete below.
Wildlife and Habitat	Yes	No	NA	If the anticipated impact might be unacceptable, recommend mitigation measures:
Does the proposed action present potential for impacts on wildlife or habitat?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Does the project impact state or federally listed threatened and endangered species?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Human Health Effects	Yes	No	NA	If the anticipated impact might be unacceptable, recommend mitigation measures:
Does the proposed project present potential for effects on human health? e.g.: Hanta virus, radiological exposure, or chemical exposure (must provide MSDS)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Transportation	Yes	No	NA	If the anticipated impact might be unacceptable, recommend mitigation measures:
Does the proposed project involve transportation of radiological sources or hazardous materials (including explosives)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Waste Management and Waste Minimization	Yes	No	NA	If the anticipated impact might be unacceptable, recommend mitigation measures:
Are pollution prevention and waste minimization practices needed in the proposed project?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Does project plan establish procedures in compliance with local, state and/or federal laws and guidelines affecting the generation, transportation, treatment, storage or disposal of hazardous and other wastes?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

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			Impacts Anticipated?			If YES, then complete below.	
Cultural Impact			Yes	No	NA	If the anticipated impact might be unacceptable, recommend mitigation measures:	
Is there potential for impact on cultural (historic) resources?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Community Impact			Yes	No	NA	If the anticipated impact might be unacceptable, recommend mitigation measures:	
Will the proposed project introduce significantly adverse auditory, visual, or other impact?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Will the proposed project adversely affect the community's use of public land/resources?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Will the proposed project adversely affect the community's access to private land?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
NOTE: Topography Map and Wetlands Map are required to be attached. Attach applicable SOPs for Risk Assessment Level 2 & 3 and specific test procedures.							
Are environmental permits required? If YES, list below:						Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Section below to be reviewed by Environmental Specialist and DOE NCO.							
Adequate Mitigation Measures Provided?						Adequate Mitigation Measures Provided?	
	Yes	No		Yes	No		
Water Quality Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Transportation Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Air Quality Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Waste Management Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
*Wildlife and Habitat Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cultural Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Geology and Soils Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Community Impact	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
Human Health Impacts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Categorical Exclusion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	N/A	
Approvals							
Comments and Conditions:	This project is on a developed site and utilizes an existing well. No environmental impact is anticipated.						
	B3.7 B5.12						
Contractor ESS&H						Date 7-13-10	
Comments and Conditions:							
	Based on my review of information conveyed to me and in my possession (or attached) concerning the proposed action, as NEPA Compliance Officer (as authorized under DOE Order 451.1A), I have determined that the proposed action fits within the specified class of actions, the other regulatory requirements set forth above are met, and the proposed action is hereby categorically excluded from further NEPA review.						
DOE NEPA Compliance Officer	CXS B3.7 & B5.12 					Date 7/13/10	

45-3-X-21 Test Well



Lat: 43.3342607'
 Long: 106.2226785'
 Elevation: 4994.6 GR

T.39 N., R. 78 W.
 Section 21

45-3-X-21

45-X-21

45-1-X-21

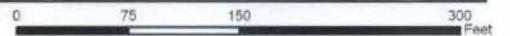
45-4-X-21

301-A-21

46-AX-21

			
45-3-X-21 Test Well		Project Manager:	
Author: J Buelt	Date:		
GIS-NEPA-Test Well		Rev Date:	
WY State Plane / East Central Zone / NAD27		Scale = 1:1,500	

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