

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural
Resources Department
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-141
Revised August 24, 2018
Submit to appropriate OCD District office

Incident ID	NMAP1825459428
District RP	2RP-4967
Facility ID	N/A
Application ID	pMAP1825459097

Release Notification

Responsible Party

Responsible Party XTO Energy	OGRID 5380
Contact Name Kyle Littrell	Contact Telephone 432-221-7331
Contact email Kyle_Littrell@xtoenergy.com	Incident # (assigned by OCD)
Contact mailing address 522 W. Mermod, Suite 704 Carlsbad, NM 88220	

Location of Release Source

Latitude 32.151330 Longitude -103.96267
(NAD 83 in decimal degrees to 5 decimal places)

Site Name Elk Wallow 11 State #001H Battery	Site Type Tank Battery
Date Release Discovered 8/27/18 at 2pm	API# 30-015-37588

Unit Letter	Section	Township	Range	County
D	11	25S	29E	Eddy

Surface Owner: ☒ State ☐ Federal ☐ Tribal ☐ Private (Name:)

Nature and Volume of Release

Material(s) Released (Select all that apply and attach calculations or specific justification for the volumes provided below)

<input checked="" type="checkbox"/> Crude Oil	Volume Released (bbls) 33.12	Volume Recovered (bbls) 21.56
<input checked="" type="checkbox"/> Produced Water	Volume Released (bbls) 723.13	Volume Recovered (bbls) 468.44
	Is the concentration of dissolved chloride in the produced water >10,000 mg/l?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Condensate	Volume Released (bbls)	Volume Recovered (bbls)
<input type="checkbox"/> Natural Gas	Volume Released (Mcf)	Volume Recovered (Mcf)
<input type="checkbox"/> Other (describe)	Volume/Weight Released (provide units)	Volume/Weight Recovered (provide units)

Cause of Release

Battery was struck by lightning which caused a fire that spread to all the tanks in the west tank battery containment. All the associated wells had already been shut at the time of the event. The fire department extinguished the fire.

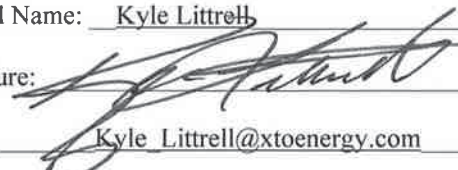

State of New Mexico
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Was this a major release as defined by 19.15.29.7(A) NMAC? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If YES, for what reason(s) does the responsible party consider this a major release? An unauthorized release of a volume, excluding gases, of 25 barrels or more
If YES, was immediate notice given to the OCD? By whom? To whom? When and by what means (phone, email, etc)? Yes, Amy Ruth, contacted Mike Bratcher (NMOCD), Maria Pruett (NMOCD), Ryan Mann (SLO), By email on August 28, 2018 at 8:57 am	

Initial Response

The responsible party must undertake the following actions immediately unless they could create a safety hazard that would result in injury

<input checked="" type="checkbox"/> The source of the release has been stopped. <input checked="" type="checkbox"/> The impacted area has been secured to protect human health and the environment. <input checked="" type="checkbox"/> Released materials have been contained via the use of berms or dikes, absorbent pads, or other containment devices. <input checked="" type="checkbox"/> All free liquids and recoverable materials have been removed and managed appropriately.	
If all the actions described above have <u>not</u> been undertaken, explain why:	
Per 19.15.29.8 B. (4) NMAC the responsible party may commence remediation immediately after discovery of a release. If remediation has begun, please attach a narrative of actions to date. If remedial efforts have been successfully completed or if the release occurred within a lined containment area (see 19.15.29.11(A)(5)(a) NMAC), please attach all information needed for closure evaluation.	
I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to OCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the OCD does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to groundwater, surface water, human health or the environment. In addition, OCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.	
Printed Name: <u>Kyle Littrell</u> Signature:  email: <u>Kyle.Littrell@xtoenergy.com</u>	Title: <u>SH&E Coordinator</u> Date: <u>9/11/2018</u> Telephone: <u>432-221-7331</u>
<u>OCD Only</u> Received by:  Date: <u>09/11/18</u>	

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Site Assessment/Characterization

This information must be provided to the appropriate district office no later than 90 days after the release discovery date.

What is the shallowest depth to groundwater beneath the area affected by the release?	<u>40</u> (ft bgs)
Did this release impact groundwater or surface water?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are the lateral extents of the release within 300 feet of a continuously flowing watercourse or any other significant watercourse?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are the lateral extents of the release within 200 feet of any lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are the lateral extents of the release within 300 feet of an occupied permanent residence, school, hospital, institution, or church?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are the lateral extents of the release within 500 horizontal feet of a spring or a private domestic fresh water well used by less than five households for domestic or stock watering purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are the lateral extents of the release within 1000 feet of any other fresh water well or spring?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are the lateral extents of the release within incorporated municipal boundaries or within a defined municipal fresh water well field?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are the lateral extents of the release within 300 feet of a wetland?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are the lateral extents of the release overlying a subsurface mine?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are the lateral extents of the release overlying an unstable area such as karst geology?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Are the lateral extents of the release within a 100-year floodplain?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Did the release impact areas not on an exploration, development, production, or storage site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No


Attach a comprehensive report (electronic submittals in .pdf format are preferred) demonstrating the lateral and vertical extents of soil contamination associated with the release have been determined. Refer to 19.15.29.11 NMAC for specifics.

<p>Characterization Report Checklist: <i>Each of the following items must be included in the report.</i></p> <ul style="list-style-type: none"><input checked="" type="checkbox"/> Scaled site map showing impacted area, surface features, subsurface features, delineation points, and monitoring wells.<input checked="" type="checkbox"/> Field data<input checked="" type="checkbox"/> Data table of soil contaminant concentration data<input checked="" type="checkbox"/> Depth to water determination<input checked="" type="checkbox"/> Determination of water sources and significant watercourses within ½-mile of the lateral extents of the release<input checked="" type="checkbox"/> Boring or excavation logs<input checked="" type="checkbox"/> Photographs including date and GIS information<input checked="" type="checkbox"/> Topographic/Aerial mapsLaboratory data including chain of custody

If the site characterization report does not include completed efforts at remediation of the release, the report must include a proposed remediation plan. That plan must include the estimated volume of material to be remediated, the proposed remediation technique, proposed sampling plan and methods, anticipated timelines for beginning and completing the remediation. The closure criteria for a release are contained in Table 1 of 19.15.29.12 NMAC, however, use of the table is modified by site- and release-specific parameters.

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Printed Name: Kyle Littrell Title: SH&E Coordinator
Signature:  Date: 9/11/2018
email: Kyle_Littrell@xtoenery.com Telephone: 432-221-7331

OCD Only

Received by: _____ Date: _____

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Remediation Plan

Remediation Plan Checklist: *Each of the following items must be included in the plan.*

- ☒ Detailed description of proposed remediation technique
- ☒ Scaled sitemap with GPS coordinates showing delineation points
- ☒ Estimated volume of material to be remediated
- ☒ Closure criteria is to Table 1 specifications subject to 19.15.29.12(C)(4) NMAC
- ☒ Proposed schedule for remediation (note if remediation plan timeline is more than 90 days OCD approval is required)

Deferral Requests Only: *Each of the following items must be confirmed as part of any request for deferral of remediation.*

- ☐ Contamination must be in areas immediately under or around production equipment where remediation could cause a major facility deconstruction.
- ☐ Extents of contamination must be fully delineated.
- ☐ Contamination does not cause an imminent risk to human health, the environment, or groundwater.

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Printed Name: Kyle Littrell Title: SH&E Coordinator

Signature:  Date: 4/26/2019

email: Kyle_Littrell@xtoenery.com Telephone: 432-221-7331

OCD Only

Received by: _____ Date: _____

☐ Approved ☐ Approved with Attached Conditions of Approval ☐ Denied ☐ Deferral Approved

Signature: _____ Date: _____