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

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Incident ID	
District RP	
Facility ID	
Application ID	

# **Release Notification**

### **Responsible Party**

Responsible Party	OGRID
Contact Name	Contact Telephone
Contact email	Incident # (assigned by OCD)
Contact mailing address	

### **Location of Release Source**

Latitude	Longitude
	(NAD 83 in decimal degrees to 5 decimal places)
Site Name	Site Type

Site Name	Site Type
Date Release Discovered	API# (if applicable)

Unit Letter	Section	Township	Range	County

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)

Crude Oil	Volume Released (bbls)	Volume Recovered (bbls)
Produced Water	Volume Released (bbls)	Volume Recovered (bbls)
	Is the concentration of dissolved chloride in the produced water >10,000 mg/l?	Yes No
Condensate	Volume Released (bbls)	Volume Recovered (bbls)
Natural Gas	Volume Released (Mcf)	Volume Recovered (Mcf)
Other (describe)	Volume/Weight Released (provide units)	Volume/Weight Recovered (provide units)
Cause of Release		

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#### State of New Mexico Oil Conservation Division

Incident ID	
District RP	
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Was this a major release as defined by 19.15.29.7(A) NMAC?	If YES, for what reason(s) does the responsible party consider this a major release?
Yes No	
If YES, was immediate ne	otice given to the OCD? By whom? To whom? When and by what means (phone, email, etc)?

### **Initial Response**

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

The source of the release has been stopped.

The impacted area has been secured to protect human health and the environment.

Released materials have been contained via the use of berms or dikes, absorbent pads, or other containment devices.

All free liquids and recoverable materials have been removed and managed appropriately.

If all the actions described above have not 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	Title:
Signature:	Date:
email:	Telephone:
OCD Only	
Received by:	Date:

			*****	LIQUIE	SPILLS	- VOLU	IME CALCULATION	VS *****			
Locati	on of spill	: COG	- Gunner 8	Federal Co	om 006H		Date of Spill:	17-Feb-202	20		
		If th	e leak/spi	II is asso	ciated with	productior	equipment, i.e wellhead	, stuffing box,			
		flowline	e, tank bat	tery, prod	uction vesse	l, transfer p	ump, or storage tank place	an "X" here: X			
						Input I	Data:				
If spill vol	lumes from	measureme	ent, i.e. me	etering, tar	nk volumes, e	etc. are kno	wn enter the volumes here:	OIL: 0.0 BBL	WATER: 0.0 BBL		
lf "known"	spill volu	mes are give	en, input c	data for th	he following	j "Area Cal	culations" is optional. The	e above will override	e the calculated	volumes.	
	Total A	Area Calcu	lations		wet coil			Standing Liquid	Calculations	i	
Total Surface Area	width		length		wet soil depth	oil (%)	Standing Liquid Area	width	length	liquid depth	oil (%
Rectangle Area #1 Rectangle Area #2	0 ft 0 ft	x	0 ft 0 ft	X X	0.00 in 0.00 in	100% 0%	Rectangle Area #1 Rectangle Area #2	20 ft X 0 ft X		X 0.50 in X 0 in	30' 0'
Rectangle Area #3	0 ft	X	0 ft	x	0.00 in 0.0 in	0%	Rectangle Area #3	0 ft X		X 0 in	0
Rectangle Area #4	0 ft	Х	0 ft	Х	0.0 in	0%	Rectangle Area #4	0 ft X	<mark>0</mark> ft 2	X 0 in	0
Rectangle Area #5	0 ft	Х	0 ft	Х	0.0 in	0%	Rectangle Area #5	0 ft X	<mark>0</mark> ft 2		0
Rectangle Area #6	0 ft	X	0 ft 0 ft	X	0 in 0 in	0% 0%	Rectangle Area #6	0 ft X 0 ft X		X 0 in X 0 in	0
Rectangle Area #7 Rectangle Area #8	0 ft 0 ft		0 ft	X X	0 in	0%	Rectangle Area #7 Rectangle Area #8	0 ft X	0 ft 2 0 ft 2		0
id leak occur before the sepa	arator?:	YES		N/A	(place an "X	")	H2S Content in P	roduced Gas: 0	PPM		
Amount of Free Liquid Recovered: Liquid holding factor *:	0 BE	3L I per gal	* Sano * Grav * Sano	d = <b>0.08</b> gal velly (caliche dy clay loam	when the spill w Ilon (gal.) liquid e) loam = <b>0.14</b> gal 6 gal. liquid per	per gal. volum al. liquid per g liquid per gal.	e of soil. al. volume of soil. volume of soil.		ked soil is contained b uid per gal. volume of • 0.25 gal. liquid per g	by barriers, natural (or no f soil. gal. volume of soil.	
Recovered:	0.00 ga		* Sano * Grav * Sano	the following th	llon (gal.) liquid e) loam = <b>0.14</b> g n soil = <b>0.14</b> gal	per gal. volum al. liquid per g liquid per gal. gal. volume of	Percentage of Oil i of the soil. al. volume of soil. volume of soil.	In Free Liquid Recovered: Use the following when the Occurs when the spill soak * Clay loam = 0.20 gal. liqu * Gravelly (caliche) loam =	(percentage) e liquid completely fill ked soil is contained b uid per gal. volume of e 0.25 gal. liquid per g	by barriers, natural (or no f soil. gal. volume of soil. of soil.	ot).
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State of New Mexico Oil Conservation Division

Incident ID	
District RP	
Facility ID	
Application ID	

# Closure

The responsible party must attach information demonstrating they have complied with all applicable closure requirements and any conditions or directives of the OCD. This demonstration should be in the form of a comprehensive report (electronic submittals in .pdf format are preferred) including a scaled site map, sampling diagrams, relevant field notes, photographs of any excavation prior to backfilling, laboratory data including chain of custody documents of final sampling, and a narrative of the remedial activities. Refer to 19.15.29.12 NMAC.

<b><u>Closure Report Attachment Checklist</u>: Each of the following</b>	ng items must be included in the closure report.			
A scaled site and sampling diagram as described in 19.15.29.11 NMAC				
Photographs of the remediated site prior to backfill or photos of the liner integrity if applicable (Note: appropriate OCD District office must be notified 2 days prior to liner inspection)				
Laboratory analyses of final sampling (Note: appropriate ODC District office must be notified 2 days prior to final sampling)				
Description of remediation activities				
and regulations all operators are required to report and/or file ce may endanger public health or the environment. The acceptance should their operations have failed to adequately investigate and human health or the environment. In addition, OCD acceptance compliance with any other federal, state, or local laws and/or re- restore, reclaim, and re-vegetate the impacted surface area to the accordance with 19.15.29.13 NMAC including notification to the	Tid			
Printed Name:	Title:			
Signature:	Date:			
email:	Telephone:			
OCD Only				
Received by:	Date:			
	arty of liability should their operations have failed to adequately investigate and ace water, human health, or the environment nor does not relieve the responsible and/or regulations.			
Closure Approved by:	Date:			
Printed Name:	Title:			