

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	
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
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)

<input type="checkbox"/> Crude Oil	Volume Released (bbls)	Volume Recovered (bbls)
<input type="checkbox"/> Produced Water	Volume Released (bbls)	Volume Recovered (bbls)
	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

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Was this a major release as defined by 19.15.29.7(A) NMAC? <input type="checkbox"/> Yes <input type="checkbox"/> No	If YES, for what reason(s) does the responsible party consider this a major release?
If YES, was immediate notice 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

<input type="checkbox"/> The source of the release has been stopped.	
<input type="checkbox"/> The impacted area has been secured to protect human health and the environment.	
<input type="checkbox"/> Released materials have been contained via the use of berms or dikes, absorbent pads, or other containment devices.	
<input 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: _____	Title: _____
Signature: <u>Patricia Espinoza</u>	Date: _____
email: _____	Telephone: _____
<u>OCD Only</u>	
Received by: _____	Date: _____

***** LIQUID SPILLS - VOLUME CALCULATIONS *****

Location of spill: Mastiff Federal 3H

Date of Spill: 19-Jun-2020

If the leak/spill is associated with production equipment, i.e. - wellhead, stuffing box, flowline, tank battery, production vessel, transfer pump, or storage tank place an "X" here: ☒

Input Data:

If spill volumes from measurement, i.e. metering, tank volumes, etc. are known enter the volumes here: OIL: 0.0 BBL WATER: 0.0 BBL

If "known" spill volumes are given, input data for the following "Area Calculations" is optional. The above will override the calculated volumes.

Total Area Calculations

Total Surface Area	width	length		wet soil depth	oil (%)
Rectangle Area #1	0 ft	0 ft	X	0.00 in	0%
Rectangle Area #2	0 ft	X	0 ft	X	0.00 in 0%
Rectangle Area #3	0 ft	X	0 ft	X	0 in 0%
Rectangle Area #4	0 ft	X	0 ft	X	0 in 0%
Rectangle Area #5	0 ft	X	0 ft	X	0 in 0%
Rectangle Area #6	0 ft	X	0 ft	X	0 in 0%
Rectangle Area #7	0 ft	X	0 ft	X	0 in 0%
Rectangle Area #8	0 ft	X	0 ft	X	0 in 0%

Standing Liquid Calculations

Standing Liquid Area	width	length	liquid depth	oil (%)		
Rectangle Area #1	100 ft	X	40 ft	X	2.5 in	100%
Rectangle Area #2	0 ft	X	0 ft	X	0 in	0%
Rectangle Area #3	0 ft	X	0 ft	X	0 in	0%
Rectangle Area #4	0 ft	X	0 ft	X	0 in	0%
Rectangle Area #5	0 ft	X	0 ft	X	0 in	0%
Rectangle Area #6	0 ft	X	0 ft	X	0 in	0%
Rectangle Area #7	0 ft	X	0 ft	X	0 in	0%
Rectangle Area #8	0 ft	X	0 ft	X	0 in	0%

ERROR - Standing Liquid Area larger than Total Area, Review Data Input

FALSE

Average Daily Production: Oil 0 BBL Water 0 BBL 0 Gas (MCFD)

1

Total Hydrocarbon Content in gas: 0% (percentage)

Did leak occur before the separator?: ☒ YES ☒ N/A (place an "X")

H2S Content in Produced Gas: 0 PPM

H2S Content in Tank Vapors: 0 PPM

Amount of Free Liquid Recovered: 0 BBL okay

Percentage of Oil in Free Liquid Recovered: 0% (percentage)

Liquid holding factor *: 0.00 gal per gal

Use the following when the spill wets the grains of the soil.

* Sand = 0.08 gallon (gal.) liquid per gal. volume of soil.

* Gravelly (caliche) loam = 0.14 gal. liquid per gal. volume of soil.

* Sandy clay loam soil = 0.14 gal liquid per gal. volume of soil.

* Clay loam = 0.16 gal. liquid per gal. volume of soil.

Use the following when the liquid completely fills the pore space of the soil:

Occurs when the spill soaked soil is contained by barriers, natural (or not).

* Clay loam = 0.20 gal. liquid per gal. volume of soil.

* Gravelly (caliche) loam = 0.25 gal. liquid per gal. volume of soil.

* Sandy loam = 0.5 gal. liquid per gal. volume of soil.

Total Solid/Liquid Volume: sq. ft. cu. ft. cu. ft.

Total Free Liquid Volume: 4,000 sq. ft. cu. ft. 833 cu. ft.

Estimated Volumes Spilled

	H2O	OIL
Liquid in Soil:	0.0 BBL	0.0 BBL
Free Liquid:	0.0 BBL	148.4 BBL
Totals:	0.0 BBL	148.4 BBL

Estimated Production Volumes Lost

	H2O	OIL
Estimated Production Spilled:	0.0 BBL	0.0 BBL

Estimated Surface Damage

Surface Area:	4,000 sq. ft.
Surface Area:	.0918 acre

Recovered Volumes

Estimated oil recovered:	BBL	check - okay
Estimated water recovered:	BBL	check - okay

Estimated Weights, and Volumes

Saturated Soil =	lbs	cu. ft.	cu. yds.
Total Liquid =	148 BBL	6,233 gallon	51,861 lbs

Air Emission from flowline leaks:

Volume of oil spill:	-	BBL
Separator gas calculated:	-	MCF
Separator gas released:	-	MCF
Gas released from oil:	-	lb
H2S released:	-	lb
Total HC gas released:	-	lb
Total HC gas released:	-	MCF

Air Emission of Reporting Requirements:

	New Mexico	Texas
HC gas release reportable?	NO	NO
H2S release reportable?	NO	NO



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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.

Closure Report Attachment Checklist: *Each of the following 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

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. The responsible party acknowledges they must substantially restore, reclaim, and re-vegetate the impacted surface area to the conditions that existed prior to the release or their final land use in accordance with 19.15.29.13 NMAC including notification to the OCD when reclamation and re-vegetation are complete.

Printed Name: _____ Title: _____
Signature:  Date: _____
email: _____ Telephone: _____

OCD Only

Received by: _____ Date: _____

Closure approval by the OCD does not relieve the responsible party of liability should their operations have failed to adequately investigate and remediate contamination that poses a threat to groundwater, surface water, human health, or the environment nor does not relieve the responsible party of compliance with any other federal, state, or local laws and/or regulations.

Closure Approved by: _____ Date: _____

Printed Name: _____ Title: _____