

Closed-Loop System Permit or Closure Plan Application

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1501 W. Grand Avenue, 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-144 CLEZ
July 21, 2008

For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.

(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

Type of action: ☐ Permit ☒ Closure

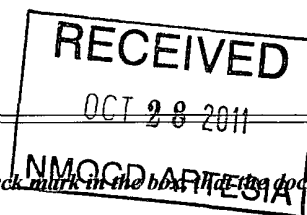
Instructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144.

Please be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface water, ground water or the environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances.

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| 1. | |
| Operator: <u>LIME ROCK RESOURCES A.L.P.</u> | OGRID #: <u>255333</u> |
| Address: <u>c/o Mike Pippin LLC, 3104 N. Sullivan, Farmington, NM 87401</u> | |
| Facility or well name: <u>CORRAL FLY FEDERAL #3-H</u> | |
| API Number: <u>30-015-35717</u> | OCD Permit Number: <u>211960</u> |
| U/L or Qtr/Qtr <u>F</u> | Section <u>10</u> Township <u>25-S</u> Range <u>29-E</u> County: <u>EDDY</u> |
| Center of Proposed Design: Latitude _____ Longitude _____ NAD: <input type="checkbox"/> 1927 <input type="checkbox"/> 1983 | |
| Surface Owner: <input checked="" type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Private <input type="checkbox"/> Tribal Trust or Indian Allotment | |

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| 2. |
| <input checked="" type="checkbox"/> Closed-loop System: Subsection H of 19.15.17.11 NMAC |
| Operation: <input type="checkbox"/> Drilling a new well <input checked="" type="checkbox"/> Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) <input type="checkbox"/> P&A |
| <input type="checkbox"/> Above Ground Steel Tanks or <input type="checkbox"/> Haul-off Bins |

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| 3. |
| Signs: Subsection C of 19.15.17.11 NMAC |
| <input type="checkbox"/> 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers |
| <input checked="" type="checkbox"/> Signed in compliance with 19.15.3.103 NMAC |



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| 4. |
| Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC |
| Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, if the documents are attached. |
| <input type="checkbox"/> Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC |
| <input type="checkbox"/> Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC |
| <input type="checkbox"/> Closure Plan (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC |
| <input type="checkbox"/> Previously Approved Design (attach copy of design) API Number: _____ |
| <input type="checkbox"/> Previously Approved Operating and Maintenance Plan API Number: _____ |

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| 5. |
| Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC) |
| Instructions: Please identify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two facilities are required. |
| Disposal Facility Name: _____ Disposal Facility Permit Number: _____ |
| Disposal Facility Name: _____ Disposal Facility Permit Number: _____ |
| Will any of the proposed closed-loop system operations and associated activities occur on or in areas that <i>will not</i> be used for future service and operations? |
| <input type="checkbox"/> Yes (If yes, please provide the information below) <input type="checkbox"/> No |
| Required for impacted areas which will not be used for future service and operations: |
| <input type="checkbox"/> Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC |
| <input type="checkbox"/> Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC |
| <input type="checkbox"/> Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC |

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| 6. |
| Operator Application Certification: |
| I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief. |
| Name (Print): _____ Title: _____ |
| Signature: _____ Date: _____ |
| e-mail address: _____ Telephone: _____ |

**POWER OF ATTORNEY
DESIGNATION OF AGENT**

LIME ROCK RESOURCES A, L.P. hereby names the following person as its agent:

Name of Agent: Mike Pippin, Pippin LLC

Agent's Address: 3104 N. Sullivan, Farmington, NM 87401-2017

Agent's Telephone Number: (505) 327-4573

GRANT OF SPECIAL AUTHORITY

LIME ROCK RESOURCES A, L.P. grants its agent the authority to act for it with respect to the following only:

1. Executing forms required to be filed with the Oil Conservation Division of the New Mexico Energy, Minerals and Natural Resources Department.
2. Executive forms required to be filed with the Bureau of Land management of the Department of Interior of the United States of America.

EFFECTIVE DATE

This power of attorney is effective immediately.

RELIANCE ON THIS POWER OF ATTORNEY

Any person, including the agent, may rely upon the validity of this power of attorney or a copy of it unless that person knows it has terminated or is invalid.

SIGNATURE AND ACKNOWLEDGMENT

LIME ROCK RESOURCES A, L.P.

By: 

Name: Charles Adcock

Title: Managing Director

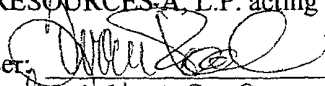
Date: February 9, 2009

Address: 1111 Bagby Street, Suite 4600, Houston, TX 77002

Telephone Number: (713) 292-9512

State of TEXAS
County of HARRIS

This instrument was acknowledged before me on 11th of February 2009 by Charles Adcock, Managing Director of LIME ROCK RESOURCES A, L.P. acting on behalf of said limited partnership.

Signature of Notarial Officer: 

My commission expires: August 5, 2012

