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 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

Revised August 1, 2011

Form C-144 CLEZ

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.

## Closed-Loop System Permit or Closure Plan Application

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

Type of action: X Permit Closure

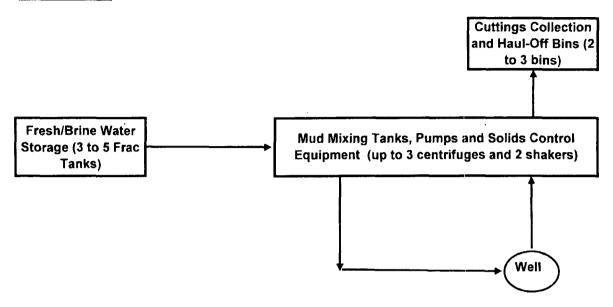
Instructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144.

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.				
Operator: SM ENERGY COMPANY	OGRID#: 15	4903		
Address: 3300 N "A" ST BLDG 7-200 MIDLAND, TX 79705				
Facility or well name: ESDU 26				
API Number: 30-015 - 40848 OCD Permit	Number:	21363	2	
U/L or Qtr/Qtr A Section 24 Township 18S Ra		_		
Center of Proposed Design: Latitude Longitude			NAD: 🔲 1927 🔲 1983	
Surface Owner: X Federal  State  Private Tribal Trust or Indian Allotment				
2.  X Closed-loop System: Subsection H of 19.15.17.11 NMAC  Operation: X Drilling a new well Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) P&A  X Above Ground Steel Tanks or X Haul-off Bins				
3. Signs: Subsection C of 19.15.17.11 NMAC			Alica	
X 12"x 24", 2" lettering, providing Operator's name, site location, and emergency tele	nhone numbers	- 1	AUG 23 2012	
Signed in compliance with 19.15.16.8 NMAC	phone namoers	<u>[</u>	AUG 2 3 2012 NMOCD ARTESIA	
Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.  \[ \begin{array}{c} \text{Design Plan} - based upon the appropriate requirements of 19.15.17.11 NMAC \\ \begin{array}{c} \text{Operating and Maintenance Plan} - based upon the appropriate requirements of 19.15.17.12 NMAC \\ \begin{array}{c} \text{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 \\ \begin{array}{c} \text{Previously Approved Design (attach copy of design)}  API Number:  \text{Plan Number:  \text{Previously Approved Operating and Maintenance Plan}  API Number:  Plan Number:  \text{Plan Number: \qu				
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 indentify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than two facilities are required.				
•	posal Facility Permi	t Number: N	M-01-0019	
Disposal Facility Name: CRI Dis	posal Facility Permi	t Number: <u>N</u>	M-01-0006	
Will any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and operations?  Yes (If yes, please provide the information below)  No				
Required for impacted areas which will not be used for future service and operations:  Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC  Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC  Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC				
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): VICKIE MARTINEZ Title: ENGINEER TECH II				
Signature:				
-mail address: VMARTINEZ@SM-ENERGY.COM Telephone: (432)688-1709				

OCD Approval: Permit Application (including closure plan) Closure P	lan (only)		
OCD Representative Signature:	Approval Date: ///26/12		
Title: DIST & Spenisor	Approval Date: 11/36/12  OCD Permit Number: 2/3637		
Subsection K of 19.15.17.13 NMAC  Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed.  Closure Completion Date:			
9. Closure Report Regarding Waste Removal Closure For Closed-loop Systems Instructions: Please indentify the facility or facilities for where the liquids, driv two facilities were utilized.			
Disposal Facility Name:	Disposal Facility Permit Number:		
Disposal Facility Name:	Disposal Facility Permit Number:		
Were the closed-loop system operations and associated activities performed on or Yes (If yes, please demonstrate compliance to the items below) No	in areas that will not be used for future service and operations?		
Required for impacted areas which will not be used for future service and operated Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique	ions:		
Operator Closure Certification:  I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.			
Name (Print): VICKIE MARTINEZ	Title: ENGINEER TECH II		
Signature:	Date:		
e-mail address: VMARTINEZ@SM-ENERGY.COM	Telephone: (432)688-1709		

# **CLOSED-LOOP SYSTEM**

#### Design Plan:



#### **Operating and Maintenance Plan:**

During drilling operations, third party service companies will utilize solids control equipment to remove cuttings from the drilling fluid and collect it in haul-off bins. Equipment will be closely monitored at all times while drilling by the derrick man and the service company employees.

#### Closure Plan:

During drilling operations, third party service companies will haul-off drill solids and fluids to an approved disposal facility as noted on the C-144 form. At the end of the well, all closed loop equipment will be removed from the location.