## Closed-Loop System Permit or Closure Plan Application

District I 1625 N. French Dr., Hobbs, NM 88240 District II 1301 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

**Operator Application Certification:** 

e-mail address:\_\_\_\_\_

Name (Print):

## 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. Operator: LIME ROCK RESOURCES II-A, L.P. OGRID #: 277558 Address: c/o Mike Pippin LLC, 3104 N. Sullivan, Farmington, NM 87401 Facility or well name: STIRLING 7 F #8 OCD Permit Number: 213653 API Number: <u>30-015-40860</u> U/L or Qtr/Qtr F Section 7 Township 18-S Range 27-E County: EDDY Longitude \_\_\_\_\_\_ NAD: [] 1927 [] 1983 Center of Proposed Design: Latitude Surface Owner: Federal State Private Tribal Trust or Indian Allotment Closed-loop System: Subsection H of 19.15.17.11 NMAC Operation: Drilling a new well Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) P&A ☐ Above Ground Steel Tanks or ☐ Haul-off Bins RECEIVED Signs: Subsection C of 19.15.17.11 NMAC JAN 14 2013 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers Signed in compliance with 19.15.3.103 NMAC NMOCD ARTESIA 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, that the documents are attached. Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC 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 Previously Approved Design (attach copy of design) API Number: Previously Approved Design (attach copy of design)

Art Number:

Art Number:

Art Number: 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. Disposal Facility Name:

Disposal Facility Name: Disposal Facility Permit Number: Disposal Facility Permit Number: 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 1 of 19.15.17.13 NMAC ☐ Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.

Telephone:

\_\_\_\_\_ Date: \_\_\_\_\_

OCD Representativ	e Signature:		Approval Date: 1 31 20 13	)
Γitle:	DISTALD	Pewiso	OCD Permit Number: 213653	
Instructions: Opera The closure report i	ators are required to obta is required to be submitte	nin an approved closure pla ed to the division within 60	osection K of 19.15.17.13 NMAC  In prior to implementing any closure activities and submitting the closulays of the completion of the closure activities. Please do not complete at the closure activities.	
		•	☐ Closure Completion Date: 1/11/13	
Closure Report Re Instructions: Pleas wo facilities were u	e indentify the facility or	Closure For Closed-loop facilities for where the liqu	Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Or ids, drilling fluids and drill cuttings were disposed. Use attachment if	nly: more
Disposal Facility 1	Name: CRI (Contro	olled Recovery Inc.)	Disposal Facility Permit Number: R-9166	
Disposal Facility		o Hills Water Disposal		<del></del>
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Were the closed-loo Yes (If yes, p	lease demonstrate complia	ance to the items below)		
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## LIME ROCK RESOURCES II-A, L.P. PIT CLOSURE

**<u>DRILLING DESIGN</u>**: Closed Loop System – CLS (Closed Loop Systems) supplied roll-off steel bins (pits).

COMPLETION DESIGN: Closed Loop System – Flow tank during completion A ~100 bbl flow tank will be provided by Reliable Well Service, 512 W. Texas, Artesia, NM 88210, 575-748-1213. Contact person: Wille Morrison

## **CLOSURE**:

During drilling and completion operations, all solids and cuttings were hauled off by CLS to their disposal facility, Permit #R-9166.

All liquids were hauled to Westall Loco Hills Water Disposal. Permit #R-3221. The closed loop equipment was inspected daily by the rig crew during drilling and completion operations. There were no leaks or spills during drilling or completion operations.