Closed-Loop System Permit or Closure Plan Application (Inter only use above ground steel tanks or huml-off bins and pratees to implient waster removal for closure) Type of action: Prove of the approach of the request observation of the respective of respectiv	District 1 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	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 granul steal tanks or huml-off bins and propose to implement waste removal for cleaver)         Type of action:       Permit    Closure         Instructions:       Please submit one application (Form C-144 CE2) point individual closel-loop system request. For any application request other than for a closel-loop system request. For any application express whether the operator of the reproved to its reguest obter than for a closel-loop system request. For any application express the system sequent provide the system of the reproved to its reguest obter than for a closel-loop system request. For any application express the system sequent provide the operator of the reproved to its reprovability to comply with any other applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulations or ordinances in the applicable governmental automy's rules, regulatinthe applicable governmentalicable governmental automy'	Closed-I	oop System Permit or Closure Plan	Application	
Type of action: Permit Closure Instructions: Please submit one application of prom C-144 CLE2) per infinitial dived-laws system request. For any application request other than for a closed-loop system that only use above grand steed times to above grand steed investor based to prove the implication stepsets bluin a Farm C-144. Please teakined that upperval of this request does not relieve the operator of its responsibility to comply with any other applicable governmental autority's rules, regulations or ordinances to does approval for the request does not relieve the operator of its responsibility to comply with any other applicable governmental autority's rules, regulations or ordinances to does approval for the request does not relieve the operator of its responsibility to comply with any other applicable governmental autority's rules, regulations or ordinances to does approval for the request does not rule to applicable governmental autority's rules, regulations or ordinances to does approval for a desting the does approval for a generation of the requires of the requires the does approval for the request of the rule of the does approval for a generation or approval of a permit or notice of intent) Center of Proposed Design: Latitude				
closed-loop system that only use above ground steet tanks or hand-off bins and propose in implement wate renoral for Closed-loop states early and the approval for there quests the order of biblity should approved to the requires requires the implement wate renoral for Closed-loop states early are possible governmental authority's rules, regulations or ordinances to the control memory. OGRID 4:_14744		Type of action: 🛛 Permit 🗌 Closure		
Please backied that approval of his regars does not relieve the operator of flability should operations result in pollutions of surface water, ground water or the environment. Nor dess approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances to operator. Mewbourne Oil CompanyOGRID #:_14744Address: _PO box 5270 Tobbs, NM 88241Facility or well name: Layla 35 NC #111API to some first order of the some first order of Period CompanyAddress: _PO box 5270 Tobbs, NM 88241Facility or well name: Layla 35 NC #111API to some first order of Period CompanyAddress: _PO box 5270 Tobbs, NM 88241Facility or well name: Layla 35 NC #111API to some first order of Period CompanyAPI to some first order of Period CompanyAPI to some first order of Period CompanyAPI to box 5270 Tobbs, NM 88241Facility or well name: Cayla 35 NC #111API to some first order of Period CompanyAPI to box 5270 Tobbs, NM 88241Facility or well name: Cayla 35 NC #111API to box 5270 Tobbs, NM 88241Facility or well name: Cayla 35 NC #111API to box 5270 Tobbs, NM 88241Facility or well name: Cayla 35 NC #111API to box 5270 Tobbs, NM 88241Facility or well name: Cayla 35 NC #111API to box 5270 Tobbs, NM 88241				
Operator: Mewbourne Oil CompanyOGRID 4:_14744	Please be advised that approval of this request does	not relieve the operator of liability should operations result i	n pollution of surface water, ground water or the	
Address:       PO Box 5270       Hobbs, NM 88241         Facility or well name:       Layla 35 NC #IH			4744	
Facility or well name: Layla 35 NC #III	Addresse DO Dec 5270 Ushka NM 88241	OGRID #:1	4744	
UL or QtrQtr NSection 35Township 23SLongitude				
UL or QtrQtr NSection 35Township 23SLongitude	Facility or well name: Layla 35 NC #1H		111000	
Center of Proposed Design: Latitude	API Number: <u>30-013-91/2C</u>	OCD Permit Number:	×19009	
Surface Owner: Closed-loop System: Subsection H of 19.15.17.11 NMAC Operation: Diribling 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 M Haul-off Bins  Signet: Subsection C of 19.15.17.11 NMAC Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC Compliance with 19.15.3.103 NMAC  Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC Compliance with 19.15.3.103 NMAC  Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC Compliance with 19.15.3.103 NMAC  Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.19 NMAC Complexed of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached. Closed-loop Systems Permit Application Attachment Checklist: Subsection C of 19.15.17.9 NMAC Complexed Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.11 NMAC Complexed Operating and Maintenance Plan - based upon the appropriate requirements of Subsection C of 19.15.17.13 NMAC and 19.15.17.13 NMAC Complexed Operating and Maintenance Plan API Number: Complexed Operating Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13.				
<sup>1</sup> / <sub>2</sub> Closed-loop System: Subsection H of 19.15.17.11 NMAC             Operation:			NAD: []1927 [] 1983	
Lossed-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       FEB 1 9 2013         Signed in compliance with 19.15.3.103 NMAC       NMACOD ARTESIA         Closed-loop Systems Permit Application Attachment Checklist:       Subsection B of 19.15.17.9 NMAC         Mathematications:       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.         M Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC       NMACOD PartTESIA         Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC       Costant acce Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 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)       API Number:         Maste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC)         Disposal Facility Name:       CRI         Disposal F	Surface Owner: 📋 Federal 🗌 State 🛛 Priv			
□       Previously Approved Operating and Maintenance Plan       AP1 Number:         5. <sup>5</sup> <sup>5</sup> <sup>8</sup> <sup>8</sup> <sup>8</sup> <sup>8</sup> <sup>8</sup> <sup>8</sup> <sup>8</sup> <sup>9</sup> <sup>8</sup> <sup>8</sup> <sup>8</sup> <sup>9</sup> <sup>8</sup> <sup>8</sup> <sup>9</sup> <sup>8</sup> <sup>8</sup> <sup>8</sup> <sup>9</sup> <sup>8</sup> <sup>8</sup> <sup>8</sup> <sup>9</sup> <sup>8</sup> <sup>8</sup> <sup>9</sup> <sup>8</sup> <sup>8</sup> <sup>8</sup> <sup>8</sup> <sup>9</sup> <sup>8</sup>	Image: Subsection C of 19.15.17.11 NMAC         Image: Steps: Subsection C of 19.15.17.11 NMAC         FEB 19 2013         Image: Signed in compliance with 19.15.3.103 NMAC         FEB 19 2013         Image: Signed in compliance with 19.15.3.103 NMAC         Image: Signed in compliance with 19.15.17.13 NMAC         Image: Signed in compliance with 19.15.17.11 NMAC         Image: Signe Plan - based upon the appropriate requirements of 19.15.17.11 NMAC         Image: Signe Plan - based upon the appropriate requirements of 19.15.17.12 NMAC			
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 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:CRIDisposal Facility Permit Number: NM 010006			-	
Disposal Facility Name:Lea Land       Disposal Facility Permit N umber:WM-1-035         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?	5. <u>Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only</u> : (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.			
<ul> <li>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?</li> <li>Yes (If yes, please provide the information below) No</li> <li><i>Required for impacted areas which will not be used for future service and operations:</i></li> <li>Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC</li> <li>Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC</li> <li>Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC</li> <li><i>Operator Application Certification:</i></li> <li>I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.</li> <li>Name (Print): Jackie Lathan</li></ul>	Disposal Facility Name:CRI	Disposal Facility Per		
<ul> <li>Yes (If yes, please provide the information below)  No</li> <li>Required for impacted areas which will not be used for future service and operations:         <ul> <li>Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC</li> <li>Re-vegetation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC</li> <li>Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC</li> <li>Ge</li> <li>Operator Application Certification:</li> <li>I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.</li> </ul> </li> <li>Name (Print): Jackie Lathan</li></ul>				
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 <b>Operator Application Certification:</b> 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): Jackie Lathan	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?			
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): Jackie Lathan       Title: _Hobbs Regulatory	<ul> <li>Soil Backfill and Cover Design Specifica</li> <li>Re-vegetation Plan - based upon the appr</li> <li>Site Reclamation Plan - based upon the appr</li> </ul>	tions based upon the appropriate requirements of Subsopriate requirements of Subsection 1 of 19.15.17.13 NMA	AC	
Name (Print): Jackie Lathan Title: _Hobbs Regulatory	<b>Operator Application Certification:</b>	with this application is true, accurate and complete to the	best of my knowledge and belief.	

Form C-144 CLEZ

Oil Conservation Division

e-mail address:jlathan@mewbourne.com	Telephone: _575-393-5905		
7. OCD Approval: X Permit Application (including closure plan) Closure Plan (only)			
	Approval Date: 2/20/2013		
Title: DIST PSUPEWISO	OCD Permit Number: <u>214009</u>		
<sup>8.</sup> <u>Closure Report (required within 60 days of closure completion)</u> : 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. <u>Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:</u> Instructions: Please indentify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than two facilities were utilized.			
Disposal Facility Name:	Disposal Facility Permit Number:		
Disposal Facility Name:			
Were the closed-loop system operations and associated activities performed on or in areas that <i>will not</i> be used for future service and operations? Yes (If yes, please demonstrate compliance to the items below) No			
Required for impacted areas which will not be used for future service and operations:         Site Reclamation (Photo Documentation)         Soil Backfilling and Cover Installation         Re-vegetation Application Rates and Seeding Technique			
<ul> <li><u>Operator Closure Certification</u>:</li> <li>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.</li> </ul>			
Name (Print):	Title:		
Signature:	Date:		
e-mail address:	Telephone:		

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## **OPERATING AND MAINTENANCE PLAN**

- 1. The operator will maintain all liquids and solids within the closed loop system. To prevent the contamination of fresh water and protect public health & environment. Rig personnel will inspect system each tour & report any leaks or spills as required. Leaks in system will be properly fixed immediately.
- 2. Solids and contaminated fluid will be hauled to the approved facility as required.

## **Closed** Loop System Design & Construction

