

State of New Mexico Energy Minerals and Natural Resources Department Oil Conservation Division 1220 South St. Francis Dr.

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.

Closed-Loop System Permit or Closure Plan Application

Santa Fe, NM 87505

(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 environment. Nor does approval relieve the operator of its responsibility to comply with any		
Operator: Cimarex Energy Co. of Colorado	OGRID#: 162683	
	OGKID #	
Address: 600 N. Marienfeld St., Ste. 600; Midland, TX 79701		
Facility or well name: West Shugart 31 Federal Com No. 2		
API Number: 30-015-31821 (OCD Permit Number:		
U/L or Qtr/Qtr F Section 31 Township 18S Range 31E Co	-	
Center of Proposed Design: Latitude Longitude NAD: □1927 ☑ 1983		
Surface Owner: Federal State Private Tribal Trust or Indian Allotment		
2. ☑ Closed-loop System: Subsection H of 19.15.17.11 NMAC Operation: ☑ Ďrilling 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		
3. Signs: Subsection C of 19.15.17.11 NMAC	RECEIVED	
12"x 24", 2" lettering, providing Operator's name, site location, and emergency tel	lephone numbers FEB 1 3 2013	
Signed in compliance with 19.15.3.103 NMAC	TED 10 ZUIS	
4	NMOCD ARTESIA	
Closed-loop Systems Permit Application Attachment Checklist: Subsection B of Instructions: Each of the following items must be attached to the application. Plea	19.15.17.9 NMAC	
 □ 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) 		
☐ Previously Approved Design (attach copy of design) API Number: ☐ Previously Approved Operating and Maintenance Plan API 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.		
-	sposal Facility Permit Number: R-9166	
•	sposal 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? 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):	itle:	
Signature:		
e-mail address: Te	elephone:	

- *		
7. OCD Approval: Permit Application (including closure plan) Closure Plan (only)		
OCD Representative Signature:	Approvat Partied for recon-	
Title:	OCD Permit Number:	
8. Closure Report (required within 60 days of closure completion): 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: 12/8/12	
Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: 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: R360 Disposal Facility Permit Number: R-9166 Disposal Facility Name: Disposal Facility Permit Number: Number: Nere the closed-loop system operations and associated activities performed on or in areas that will not 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 	Accepted for record NMOCD	
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): Paula Brunson Title: Regulatory Analyst		
Signature: Paula Brunson		
e-mail address:pbrunson@cimarex.com	Telephone: 432-571-7848	
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