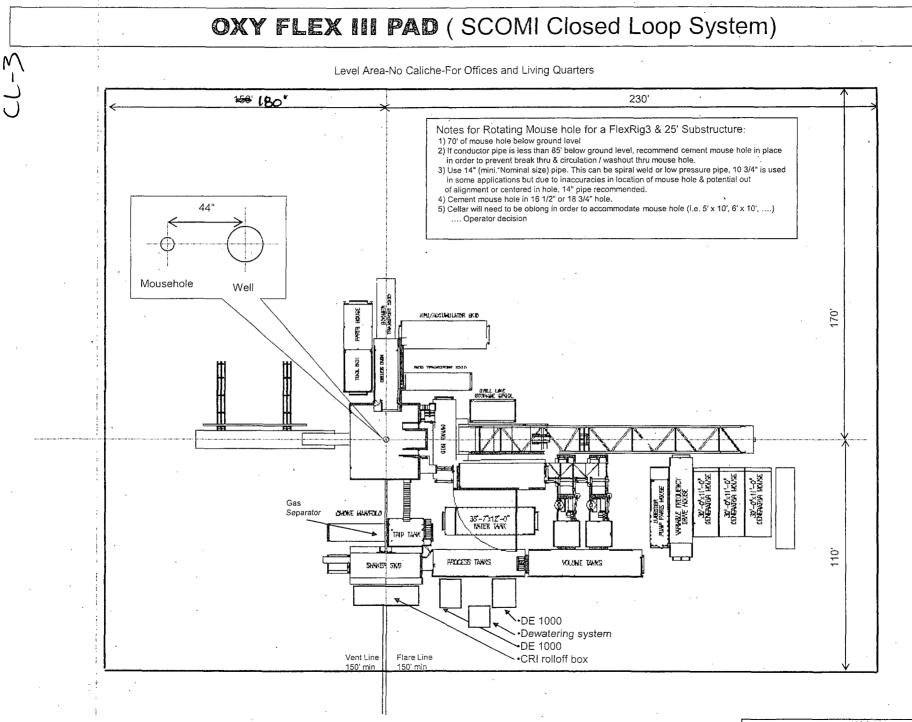
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District 1 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Road, Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	State of New Mexico Energy Minerals and Natural Resources Department Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM.87505	Form C-144 CLE July 21, 20 For closed-loop systems that only use above ground steel tanks or haul-off bins and propos to implement waste removal for closure, submit to the appropriate NMOCD District Office.
Closed-L	oop System Permit or Closure Plan. I steel tanks or haul-off bins and propose to implem	
Instructions: Please submit one application (For	Type of action: X Permit Closure rm C-144 CLEZ) per individual closed-loop system request rel tanks or haul-off bins and propose to implement waste	t. For any application request other than for a removal for closure, please submit a Form C-144.
Please be advised that approval of this request does n	tot relieve the operator of liability should operations result in of its responsibility to comply with any other applicable go	n pollution of surface water, ground water or the
1. Operator:OXY USA Inc	OGRID #:1669	6
Address:PO BOX 50250 - Midland, TX 79	9710	
Facility or well name:Cypress 28 Federal #7 API Number: $30 - 015 - 4/303$	B OCD Permit Number: N/	1A_214268
U/L or Qtr/Qtr _O Section _28	Township 23S Range 29E, NMPM	County: _Eddy
	3793° Longitude _103.9852320°	NAD: ⊠1927 □ 1983
Surface Owner: 🛛 Federal 🔲 State 🔲 Private [_] Iribal Irust or Indian Allotment	
 Above Ground Steel Tanks or ⊠ Haul-off B Signs: Subsection C of 19.15.17.11 NMAC ☑ 12"x 24", 2" lettering, providing Operator's r ☑ Signed in compliance with 19.15.3.103 NMA 	name, site location, and emergency telephone numbers	APR 3 0 2013
Instructions: Each of the following items must attached.	apon the appropriate requirements of 19.15.17.12 NMAG ased upon the appropriate requirements of Subsection C	heck mark in the box, that the documents are C
Previously Approved Operating and Mainter	nance Plan API Number:	
Instructions: Please indentify the facility or fac facilities are required. Disposal Facility Name: Control Recovery Disposal Facility Name: Sundance Landfi Will any of the proposed closed-loop system ope	ems That Utilize Above Ground Steel Tanks or Haul cilities for the disposal of liquids, drilling fluids and dr. Inc. Disposal Facility Per ill Disposal Facility Per crations and associated activities occur on or in areas that	ill cuttings. Use attachment if more than two rmit Number:
Re-vegetation Plan - based upon the appro		AC
5. Operator Application Certification:		
	with this application is true, accurate and complete to the	e best of my knowledge and belief.
Name (Print):Carlos Mercado	Title:Dr	illing Engineer
Signature:	Date:	7/11/12
e-mail address:carlos_mercado@oxy.com	Telephone:(7	13) 366-5418
Form C-144 CLEZ	Oil Conservation Division	Page 1 of 2

OCD Approval:	· · · · · · · · · · · · · · · · · · ·				
	Permit Application (includin	ıg closure plan) 🔲 Closu			
OCD Representative	e Signature: AU	bole	A	pproval Date: <u>5/1/13</u>	
Title: DIST	I Superiors	· <i>v</i>	OCD Permit Number:	214268	
Instructions: Operat The closure report is	ors are required to obtain an required to be submitted to th	approved closure plan pr the division within 60 days	tion K of 19.15.17.13 NMAC ior to implementing any closure of the completion of the closure the closure activities have been co	activities. Please do not con mpleted.	nplete this
	=		Closure Completion	Date:	
	indentify the facility or facili		ems That Utilize Above Groun drilling fluids and drill cuttings		
Disposal Facility Name:					
	ume:			umber:	
Were the closed-loop	system operations and associ- ase demonstrate compliance t	ated activities performed o	n or in areas that will not be used	for future service and operat	ions?
belief. I also certify th	e information and attachment		ure report is true, accurate and co		
Name (Print):	5-4-2-3-7-4-5-4-2-2-7-2-4-7-4-7-4-7-4-7-4-7-4		Title:		
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