District I 1625 N. French Dr., Hobbs, NM 88240HOBBS OCE Energy Minerals and Natural Resources DepartmentDistrict II District III 1000 Rio Brazos Road, Aztec, NM 87410FEB 2 5 2013 FEB 2 5 2013State of New Mexico DepartmentDistrict IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 RECEIVEDOil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	Form C-144 CLEZ Revised August 1, 2011 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		
(that only use above ground steel tanks or haul-off bins and propose to implem	<u>ent waste removal for closure)</u>	
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: LINN Operating, Inc OGRID #: 269	0324	
Address: 600 Travis Street, Suite 5100 Houston, Texas 77002		
Facility or well name: <u>H E West B #022Y</u>	DECEN	
API Number: <u>30-015-05950</u> OCD Permit Number: 214332	RECEIVED	
U/L or Qtr/Qtr _O Section 09 Township 17S Range 31E County: Eddy	MAY 1 0 2013	
Center of Proposed Design: Latitude <u>32.8437</u> Longitude <u>-103.87198</u> NAD: $\Box 1927 \Box 1983$		
Surface Owner: Seleval State Private Tribal Trust or Indian Allotment	NMOCD ARTESIA	
□ 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 3.		
 4. 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 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.		
Disposal Facility Name: Sundance Disposal Facility Permit Num		
Disposal Facility Name: Gandy-Marley Disposal Disposal Facility Permit Number: NM01-0003 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)		
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): Terry B. Callahan		
Signature: May B. allakan Date: 2/22/2013		
e-mail address: <u>TCallahan@linnenergy.com</u> Telephone: <u>281-840-4272</u>		
Form C-144 CLEZ Oil Conservation Division	Page 1 of 2	

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OCD Approval: Permit Application (including closure plan) Closure Plan (only) OCD Representative Signature:	7. OCD Approval: Permit Application (including closure plan) Closure Plan (only)		
Title: UST_UST_UST_OPUSS OCD Permit Number: 214332 * Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Instructions: Operators are required to be submitted to the division within 60 days of the completion of the 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 prior to the closure activities have been completed. * Closure Completion Date: * 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, dritting 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: Disposal Facility Permit Number: Site Reclamation (Photo Documentation) No Required for impacted areas which will not be used for future service and operations: Site Reclamation (Photo Documentation) No Required for impacted areas and Seeding Technique The vegetation Application Rates and Seeding Technique 1b Operator Closure Certification: The ve	OCD Representative Signature:	Approval Date: <u>5/15/013</u>	
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:	Title: DIST P. Spewisn	· · ·	
9. Closure Report Regarding Waste Remioval 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: Disposal Facility Permit Number: Disposal Facility Name: Disposal Facility Permit Number: Were the closed-loop system operations and associated activities performed on or in areas that will not be used for future service and operations? Were the closed areas which will not be used for future service and operations:	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.		
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:	0		
Disposal Facility Name:	Instructions: Please indentify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than		
Were 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: No Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique 10. 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):	Disposal Facility Name:	Disposal Facility Permit Number:	
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 10. 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):	Disposal Facility Name:	Disposal Facility Permit Number:	
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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):			
Signature: Date:	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		
	Name (Print):	Title:	
e-mail address: Telephone:	Signature:	Date:	
	e-mail address:	Telephone:	

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LINN OPERATING, INC.

H E WEST B #22Y

UNIT O, SEC 09, T-17-S, R-31-E

EDDY COUNTY, NM

API#: 30-015-05950

Item #4 Form C-144 CLEZ Attachment

Equipment & Design:

LINN Operating, Inc. will use a closed loop system in the plugging and abandoning of this well. The following equipment will be on location:

(1) 250 bbl steel tank

Operations & Maintenance

During each day of operation, the rig's crew will inspect and closely monitor the fluids contained within the steel tank and visually monitor any release that may occur. Should a release, spill or leak occur, the NMOCD District 1 office Hobbs (575-393-6161) will be notified, as required in the NMOCD's rule 19.15.29.8.

<u>Closure</u>

After plugging and abandonment, fluids and solids will be hauled and disposed at Gandy-Marley Disposal's location, permit number NM 01-0019. Secondary site will be Sundance Disposal, permit number NM 01-0003.