District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., 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

NOV 14 2013

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Form C-141 Revised August 8, 2011

Oil Conservation Division

NMOCED MAR Copyrigate District Office in accordance with 19.15.29 NMAC.

1220 South St. Francis Dr. Santa Fe, NM 87505

| Release Notification and Corrective Action  |                              |                                |   |  |  |   |  |                                   |                |                             |                         |            |  |
|---|------------------------------|--------------------------------|---|--|--|---|--|-----------------------------------|----------------|-----------------------------|-------------------------|------------|--|
| MIN   | 11332                        | 35241                          |   | 0  | <b>OPERATOR</b> x☐ Initial Report x☐ Final Report    |   |  |                                   |                |                             |                         |            |  |
| Name of Co  | mpany; C                     | IMAREX E                       |   | Contact; JAMES TINNEY                    |  |   |  |                                   |                |                             |                         |            |  |
| Address C   | <u>000 N</u>                 | 1. Marien                      | ) [                                       | Telephone No. (575) 706-0095             |  |   |  |                                   |                |                             |                         |            |  |
| Facility Name: BARBWIRE 9 STATE I Facility Type: BATTERY  |                              |                                |   |  |  |   |  |                                   |                |                             |                         |            |  |
| Surface Ow  | ner                          | :                              |   | Mineral O                                | API No.30-015-36134-00-00                            |   |  |                                   |                |                             |                         |            |  |
|   |                              |                                |   | LOCA                                     |  | OF REI                                  | LEASE  |                                   |                |                             |                         |            |  |
| ,   |                              |                                |   |  | North/<br>NORT                                       | South Line<br>H                         | Feet from the 660  | East/West Line<br>WEST            |                | County: EDDY                |                         |            |  |
| Latitude32-1', 3.19"N Longitude -104-5', 11.12"W  |                              |                                |   |  |  |   |  |                                   |                |                             |                         |            |  |
| NATURE OF RELEASE   |                              |                                |   |  |  |   |  |                                   |                |                             |                         |            |  |
|   |                              | UCED WATE                      | R   |  | Volume of Release; 12 BBLS Volume Recovered; 10 BBLS |   |  |                                   |                |                             |                         |            |  |
| Source of Release   |                              |                                |   |  |  |   | Date and Hour of Occurrence; 10/22/13, Date and Hour of Discovery 10/22/13, 0600 HRS |                                   |                |                             |                         |            |  |
| Was Immediate Notice Given?  X☐ Yes ☐ No ☐ Not  |                              |                                |   |  |  |   | If YES, To Whom?   |                                   |                |                             |                         |            |  |
| Required  |                              | ٨٢                             | res                                       |  |  | MIKE BRATCHER, NMOCD                    |  |                                   |                |                             |                         |            |  |
| By Whom? JAMES TINNEY   |                              |                                |   |  |  |   | Date and Hour 10/23/130830 HR  |                                   |                |                             |                         |            |  |
| Was a Watero  | course Reac                  | hed?                           | If YES, Volume Impacting the Watercourse. |  |  |   |  |                                   |                |                             |                         |            |  |
| If a Watercourse was Impacted, Describe Fully.*   |                              |                                |   |  |  |   |  |                                   |                |                             |                         |            |  |
|   |                              |                                |   |  |  |   |  |                                   |                |                             |                         |            |  |
|   | •                            |                                |   |  |  |   |  |                                   |                | •                           |                         |            |  |
|   |                              |                                |   |  |  |   |  |                                   |                |                             |                         |            |  |
| Describe Cause of Problem and Remedial Action Taken.* HOLE IN FILL LINE GOING TO PW TANK, PICKED UP STANDING FLUID. |                              |                                |   |  |  |   |  |                                   |                |                             |                         |            |  |
| HODE IN THE BINE COINCITOT WITHIN, FICKED OF STANDING FEOID.  |                              |                                |   |  |  |   |  |                                   |                |                             |                         |            |  |
|   |                              |                                |   |  |  |   |  | •                                 |                |                             |                         |            |  |
| Describe Area   |                              |                                |   |  |  |   | <del></del>  |                                   |                |                             |                         |            |  |
|   |                              |                                |   | ENT, PICKED UP<br>ED GRAVEL INS          |  |   |  | INE WITH H                        | OLE            | , REMOVE                    | j                       |            |  |
| CONTAININ   | ALLEDGK                      | AVELAND                        | KEFLACI                                   | ED ORAVEL INS                            | IDE CC   | INTAINMET<br>-                          | N I .  |                                   |                |                             |                         |            |  |
|   |                              |                                |   |  |  |   |  |                                   |                |                             |                         |            |  |
|   |                              |                                |   | is true and comple                       |  |   |  |                                   |                |                             |                         |            |  |
| regulations all   | l operators                  | are required to                | report an                                 | d/or file certain re                     | lease no   | otifications ar                         | d perform correct  | tive actions fo                   | r rele         | ases which                  | may end                 | danger     |  |
| should their of   | or the envir<br>perations ha | onment. The<br>ave failed to a | acceptanc<br>dequately                    | e of a C-141 repor<br>investigate and re | τ by the<br>mediate                                  | contamination                           | arked as "Final Re   | eport" does no<br>eat to ground v | t ren<br>vater | eve the ope<br>, surface wa | rator of 1<br>iter, hun | nan health |  |
| or the environ  | ment. In ac                  | ldition, NMO                   | CD accept                                 | tance of a C-141 re                      |  |   |  |                                   |                |                             |                         |            |  |
| federal, state, or local laws and/or regulations.  OIL CONSERVATION DIVISION  |                              |                                |   |  |  |   |  |                                   |                |                             |                         |            |  |
| a   |                              |                                |   | OR CONSERVATION DIVISION                 |  |   |  |                                   |                |                             |                         |            |  |
| Signature: Jui  | mes Tinney                   | ·                              |   | —  |  |   |  |                                   | II "           | ,                           |                         |            |  |
| Printed Name  | : James TIn                  | ney                            |   | A  | Approved by Environmental Specialist By Mily Branche |   |  |                                   |                |                             |                         |            |  |
| The prope   | IOTEION FO                   | \D=1.4.1.1                     |   | 60V 19 2013                              |  |   |  |                                   |                |                             |                         |            |  |
| Title: PRODU  | CHONFO                       | KEMAN                          |   |  | A  | Approval Date                           | <u>:</u>   | Expirat                           | ton I          | Jate:                       |                         |            |  |
| E-mail Addres   | ss: jtinney@                 | cimarex.com                    |   |  | c  | Conditions of                           |  |                                   |                | Attached                    | П                       |            |  |
| Date: 10/23   | /13                          | :                              | (575) 706-0095                            |  |  | ation per OCE                           |  |                                   | Attached       | <b></b>                     |                         |            |  |
| Attach Additi   |                              | ts If Necessa                  |   | (212) 100-0073                           | (  | Guidelines. SUBMIT REMEDIATION 2RP-2070 |  |                                   |                |                             |                         |            |  |
|   |                              |                                |   |  | T  | PRUPU                                   | SALINU LATER   | 1 nan:<br>  りかへ                   |                |                             |                         |            |  |
|   |                              |                                |   |  |  | التحسات                                 | 1150   | ر السيميا                         | ,              |                             |                         |            |  |