<u>District I</u> 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

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505

Revised October 10, 2003

Form C-141

Submit 2 Copies to appropriate District Office in accordance with Rule 116 on back side of form

## 30-015-30211 Release Notification and Corrective Action

|  |                                   | _               |                    |                       |             | OPER   | ATOR                            |                  | Initial Report         |           | Final Report    |  |
|--|-----------------------------------|-----------------|--------------------|-----------------------|-------------|--|---------------------------------|------------------|------------------------|-----------|-----------------|--|
| Name of Company: Merit Energy Company  |                                   |                 |                    |                       |             |  | Contact: Mike Self              |                  |                        |           |                 |  |
| Address: P.O. Box 69, Loco Hills N.M., 88255   |                                   |                 |                    |                       |             |  | Telephone No.: 505-677-2327     |                  |                        |           |                 |  |
| Facility Name: Turner B # 115  |                                   |                 |                    |                       |             | Facility Type: Oil producer                    |                                 |                  |                        |           |                 |  |
| Symfon Owner PIM   |                                   |                 |                    |                       |             | DIA  |                                 |                  | Lease No.: LC-029395-B |           |                 |  |
| Surface Owner: BLM Mineral Owner   |                                   |                 |                    |                       |             |  |                                 | Le               | Lease No LC-029393-B   |           |                 |  |
|  |                                   |                 |                    | LOCA                  | TIO         | N OF R   | ELEASE                          |                  |                        |           |                 |  |
| Unit Letter  | Section                           | Township        | Range              | Feet from the         |             |  |                                 |                  | est Line   County      |           |                 |  |
| A  | 20                                | 17S             | 31E                | 1050                  |             | North  | 25                              | West             |                        | Eddy      |                 |  |
|  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| Latitude <u>32.824450</u> Longitude <u>103.900403</u>  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| Datitude <u>52.027750</u> Dungitude 105.700705   |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| NATURE OF RELEASE  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| Type of Relea  | se: Crude                         | oil w/ produc   | ed water           |                       | <del></del> | Volume of Release: <5 bbls Volume Recovered: 0 |                                 |                  |                        |           |                 |  |
| Source of Release: Poly flow line / wellhead   |                                   |                 |                    |                       |             |  | d Hour of Occurrence            |                  | and Hour of Discovery: |           |                 |  |
|  |                                   |                 |                    |                       |             | unknow   |                                 |                  | 8/05                   |           |                 |  |
| Was Immediate Notice Given?  |                                   |                 |                    |                       |             |  | If YES, To Whom?                |                  |                        |           |                 |  |
| ☐ Yes ☐ No ☒ Not Required  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| By Whom?   |                                   |                 |                    |                       |             | Date and Hour:                                 |                                 |                  |                        |           |                 |  |
| Was a Watercourse Reached?   |                                   |                 |                    |                       |             | If YES, Volume Impacting the Watercourse.      |                                 |                  |                        |           |                 |  |
| ☐ Yes ⊠ No   |                                   |                 |                    |                       |             |  | N/A                             |                  |                        |           |                 |  |
| If a Watercourse was Impacted, Describe Fully.*  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| 1  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| N/A  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
|  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| Desire Constitution of Desire the Constitution o |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| Describe Cause of Problem and Remedial Action Taken.*  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| Poly flow line failure / wellhead failure.   |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
|  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
|  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
|  |                                   | and Cleanup A   |                    |                       |             | 1  |                                 |                  |                        |           |                 |  |
|  |                                   |                 |                    |                       |             |  | location, then off th           | ie location into | o the pasture ap       | proxim    | ately 100 feet. |  |
| The affected of  | irea was ro                       | to-tilled on 3/ | 28/ <b>06</b> to b | lend and aeriate t    | he soil.    | ,  |                                 |                  |                        |           |                 |  |
| ;  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
|  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| I hereby certi   | fy that the i                     | nformation gi   | ven above          | is true and compl     | ete to t    | he best of                                     | my knowledge and u              | inderstand that  | t pursuant to NN       | AOCD:     | rules and       |  |
| regulations al   | loperators                        | are required to | o report ar        | nd/or file certain re | elease n    | otification                                    | s and perform corre             | ctive actions fo | or releases whic       | h may e   | ndanger         |  |
| public health  | or the envi                       | ronment. The    | acceptano          | e of a C-141 repo     | rt by th    | e NMOCI  | marked as "Final R              | Report" does no  | ot relieve the op      | erator o  | f liability     |  |
| should their o   | perations h                       | ave failed to a | dequately          | investigate and re    | emediat     | e contami                                      | nation that pose a thi          | reat to ground   | water, surface v       | vater, h  | ıman health     |  |
| or the environment. In addition, NMOCD acceptance of a C-141 report does not relieve the operator of responsibility for compliance with any other federal, state, or local laws and/or regulations.  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| ieuerai, state,  | of local lav                      | ws and/or regu  | nations.           |                       |             | <del></del>                                    | OII CON                         | CEDVATI          | ONDRAG                 | ONT       |                 |  |
|  |                                   |                 |                    |                       |             |  | OIL CON                         | SERVAII          | <u>ON DIVISI</u>       | <u>UN</u> | }               |  |
| Signature: Milita Sell   |                                   |                 |                    |                       |             |  |                                 |                  | TIM G                  | JM        |                 |  |
|  | <del>/ / ( ~ / )</del>            |                 |                    |                       |             | Approved                                       | by District Supervis            | or.              | by N                   | B         | (B)             |  |
| Printed Name   | : Mike Selj                       | <u>f</u>        |                    |                       |             | ripproved                                      |                                 |                  |                        |           | -12             |  |
|  |                                   |                 |                    |                       |             |  | .11.3                           | 1                |                        |           |                 |  |
| Title: Area Foreman  |                                   |                 |                    |                       |             |  | Date: 4 [13]                    | O6 Expira        | tion Date:             |           |                 |  |
| E mail Address m self@manitane   |                                   |                 |                    |                       |             |  | one of Ammoust.                 |                  |                        |           |                 |  |
| E-mail Address: m.self@meritenergy.com   |                                   |                 |                    |                       |             | Condition                                      | Conditions of Approval: Attache |                  |                        | d 🔲       |                 |  |
| Date: 2/-  | Date: 4-10-06 Phone: 505-677-2327 |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |
| Attach Additional Sheets If Necessary  |                                   |                 |                    |                       |             |  |                                 |                  |                        |           |                 |  |