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 Department

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 Form C-141 Revised August 24, 2018 Submit to appropriate OCD District office

| Incident ID | |
|----------------|--|
| District RP | |
| Facility ID | |
| Application ID | |

Release Notification

Responsible Party

| | | | | | 1 | |
|---|----------------------------|------------------------------------|--|-------------------------|-------------------|--|
| Responsible Party: Harvest Midstream Company | | | OGRID | | | |
| Contact Name: Jim Foster | | | Contact Te | elephone: 979-324-2139 | | |
| Contact ema | il: jim@teaı | mtimberwolf.com | | | Incident # | (assigned by OCD): NVF190664907 |
| Contact mai | ling address | : 1920 W. Villa M | Iaria Ste. 205 Bry | an TX | | |
| | Location of Release Source | | | | | |
| Latitude 36.745074 Longitude -107.445908 (NAD 83 in decimal degrees to 5 decimal places) | | | | | | |
| Site Name 2 | 9-6-2 Comp | oressor Station | | | Site Type | Compressor Station |
| Date Release | Discovered | 02/18/19 | | | API# (if app | licable) |
| | | T | | | | |
| Unit Letter NW/NE | Section 10 | Township 29N | Range 6W | Die | Coun Arriba | ity |
| | 10 | 2911 | OW | Kio | AIIIUa | |
| (B) | | | | | | |
| Surface Owne | er: State | ☐ Federal ☐ T | Tribal Private | (Name: | |) |
| | | | Nature an | d Vo | luma of I | Qalasca |
| | | | | | | |
| Crude Oi | | Volume Released | | ch calcula | tions or specific | justification for the volumes provided below) Volume Recovered (bbls) |
| | | | | | | Volume Recovered (bbls) |
| Produced Water Volume Released (bbls) | | .1.1 | . : 41 | Yes No | | |
| Is the concentration of dissolved chlorid produced water >10,000 mg/l? | | cnioria | e in the | | | |
| Condensate Volume Released (bbls) | | | | Volume Recovered (bbls) | | |
| ☐ Natural Gas Volume Released (Mcf) | | | Volume Recovered (Mcf) | | | |
| Other (describe) Volume/Weight Released (provide units Wastewater / stormwater | |) | Volume/Weight Recovered (provide units) 80 bbls | | | |
| | r tank overf | lowed; approximant. Released fluid | • | | | er were released. Released fluids were contained within |
| | | | | | | |

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| Was this a major release as defined by 19.15.29.7(A) NMAC? | If YES, for what reason(s) does the respon | sible party consider this a major release? | |
|--|--|--|--|
| ⊠ Yes □ No | | | |
| | | | |
| If YES, was immediate no | otice given to the OCD? By whom? To wh | om? When and by what means (phone, email, etc)? | |
| Yes, Kijun Hong notified | Cory Smith and Vanessa Fields on February | / 18, 2019 via email. | |
| | Initial Re | sponse | |
| The responsible p | party must undertake the following actions immediately | unless they could create a safety hazard that would result in injury | |
| ☐ The source of the rele | ease has been stopped. | | |
| San 1992 | is been secured to protect human health and | he environment. | |
| | | kes, absorbent pads, or other containment devices. | |
| | ecoverable materials have been removed and | managed appropriately. | |
| If all the actions described | d above have <u>not</u> been undertaken, explain v | hy: | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Per 19.15.29.8 B. (4) NMAC the responsible party may commence remediation immediately after discovery of a release. If remediation has begun, please attach a narrative of actions to date. If remedial efforts have been successfully completed or if the release occurred within a lined containment area (see 19.15.29.11(A)(5)(a) NMAC), please attach all information needed for closure evaluation. | | | |
| I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to OCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the OCD does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to groundwater, surface water, human health or the environment. In addition, OCD 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. | | | |
| Printed Name:Jim Fos | ter | Title: Consultant | |
| Signature: | hat | Date: <u>01/23/2020</u> | |
| email: jim@teamtimber | wolf.com_ | Telephone: 979-324-2139 | |
| OCD Only | 0 5 | | |
| Received by: | Lui D | Date: 3/30/2020 | |

Received by OCD: 1/23/2020 3:02:44 PM Form C-141 State of New Mexico Page 3 Oil Conservation Division

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Site Assessment/Characterization

This information must be provided to the appropriate district office no later than 90 days after the release discovery date.

| What is the shallowest depth to groundwater beneath the area affected by the release? | (ft bgs) | | |
|--|------------|--|--|
| Did this release impact groundwater or surface water? | ☐ Yes ⊠ No | | |
| Are the lateral extents of the release within 300 feet of a continuously flowing watercourse or any other significant watercourse? | ☐ Yes ⊠ No | | |
| Are the lateral extents of the release within 200 feet of any lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark)? | ☐ Yes ⊠ No | | |
| Are the lateral extents of the release within 300 feet of an occupied permanent residence, school, hospital, institution, or church? | ☐ Yes ⊠ No | | |
| Are the lateral extents of the release within 500 horizontal feet of a spring or a private domestic fresh water well used by less than five households for domestic or stock watering purposes? | ☐ Yes ⊠ No | | |
| Are the lateral extents of the release within 1000 feet of any other fresh water well or spring? | ☐ Yes ⊠ No | | |
| Are the lateral extents of the release within incorporated municipal boundaries or within a defined municipal fresh water well field? | ☐ Yes ⊠ No | | |
| Are the lateral extents of the release within 300 feet of a wetland? | ☐ Yes ⊠ No | | |
| Are the lateral extents of the release overlying a subsurface mine? | ☐ Yes ⊠ No | | |
| Are the lateral extents of the release overlying an unstable area such as karst geology? | ☐ Yes ⊠ No | | |
| Are the lateral extents of the release within a 100-year floodplain? | ☐ Yes ⊠ No | | |
| Did the release impact areas not on an exploration, development, production, or storage site? | ☐ Yes ⊠ No | | |
| Attach a comprehensive report (electronic submittals in .pdf format are preferred) demonstrating the lateral and vertical extents of soil contamination associated with the release have been determined. Refer to 19.15.29.11 NMAC for specifics. | | | |
| Characterization Report Checklist: Each of the following items must be included in the report. | | | |
| \infty Scaled site map showing impacted area, surface features, subsurface features, delineation points, and monitoring wells. \infty | | | |
| Data table of soil contaminant concentration data | | | |
| Depth to water determination | | | |
| Determination of water sources and significant watercourses within ½-mile of the lateral extents of the release Boring or excavation logs | | | |
| Photographs including date and GIS information | | | |
| ☐ Topographic/Aerial maps | | | |
| ☐ Laboratory data including chain of custody | | | |

If the site characterization report does not include completed efforts at remediation of the release, the report must include a proposed remediation plan. That plan must include the estimated volume of material to be remediated, the proposed remediation technique, proposed sampling plan and methods, anticipated timelines for beginning and completing the remediation. The closure criteria for a release are contained in Table 1 of 19.15.29.12 NMAC, however, use of the table is modified by site- and release-specific parameters.

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|--|-------------------------|--|--|
| Printed Name: | Title: Consultant | | |
| Signature: | Date: <u>01/23/2020</u> | | |
| email: jim@teamtimberwolf.com | Telephone:979-324-2139 | | |
| / | | | |
| OCD Only | | | |
| Received by: | Date: | | |

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Remediation Plan

| Remediation Plan Checklist: Each of the following items must be included in the plan. | | | |
|--|--|--|--|
| ☑ Detailed description of proposed remediation technique ☑ Scaled sitemap with GPS coordinates showing delineation points ☑ Estimated volume of material to be remediated ☑ Closure criteria is to Table 1 specifications subject to 19.15.29.12 ☑ Proposed schedule for remediation (note if remediation plan timel | | | |
| D. S I. D | | | |
| <u>Deferral Requests Only</u> : Each of the following items must be confi | rmea as part of any request for deferral of remediation. | | |
| Contamination must be in areas immediately under or around production. | luction equipment where remediation could cause a major facility | | |
| Extents of contamination must be fully delineated. | | | |
| Contamination does not cause an imminent risk to human health, | he environment, or groundwater. | | |
| | | | |
| I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to OCD rules and regulations all operators are required to report and/or file certain release notifications and perform corrective actions for releases which may endanger public health or the environment. The acceptance of a C-141 report by the OCD does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to groundwater, surface water, human health or the environment. In addition, OCD 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. | | | |
| Printed Name: Jim Foster | Title: Consultant | | |
| Signature: | Date: 01/23/2020 | | |
| email: jim@teamtimberwolf.com | Telephone: 979-324-2139 | | |
| OCD Only | | | |
| Received by: | Date: | | |
| ☐ Approved ☐ Approved with Attached Conditions of Approved | pproval Denied Deferral Approved | | |
| Signature: D | ate: | | |