For temporary pits, below-grade tanks, and multi-well fluid management pits, submit to the appropriate NMOCD District Office. For permanent pits submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

| Fit, Below-Orade Talik, of  | RECEIVED<br>By kcollins at 9:10 am, Jun 17, 2016  |  |  |
|---|---|--|--|
| Proposed Alternative Method Permit or Closure Plan Application  |   |  |  |
| 14996       Type of action:       Below grade tank registration         Permit of a pit or proposed alternative method       Closure of a pit, below-grade tank, or proposed alternative method         Modification to an existing permit/or registration       Closure plan only submitted for an existing permitted or non-permitted pit, below-grade tank, or proposed alternative method |   |  |  |
| Instructions: Please submit one application (Form C-144) per individual pit, below-grade tank or alternativ   | ve request  |  |  |
| Please be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface wate<br>environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rul  | er, ground water or the les, regulations or ordinances.   |  |  |
| 1.<br>Operator: Burlington Resources Oil & Gas Company, LP OGRID # 14538  |   |  |  |
| Address: P.O. Box 4289, Farmington, New Mexico 87499  |   |  |  |
| Facility or well name:SAN JUAN 29-7 UNIT 139N / SAN JUAN 29-7 UNIT 69A  |   |  |  |
| API Number:   |   |  |  |
| U/L or Qtr/Qtr Section25 Township29N Range7W County: <u>Rio Arriba</u>  |   |  |  |
| Center of Proposed Design: Latitude <u>36.693754</u> $^{\circ}N$ Longitude <u>- 107.517315</u> $^{\circ}W$ NAD: 1927  | 1983 🕅  |  |  |
| Surface Owner: Sederal State Private Tribal Trust or Indian Allotment   |   |  |  |
| 2   |   |  |  |
| <b>Pit:</b> Subsection F, G or J of 19.15.17.11 NMAC  |   |  |  |
| Temporary: Drilling Workover  |   |  |  |
| Permanent Emergency Cavitation P&A Multi-Well Fluid Management Low Chloride Drilling Flu  | id 🗌 yes 🗌 no   |  |  |
| Lined Unlined Liner type: Thickness mil LLDPE HDPE PVC Other  | The second se |  |  |
| □ String-Reinforced   |   |  |  |
| Liner Seams: Welded Factory Other Volume: bbl Dimensions: L   | x Wx D  |  |  |
| 3,  |   |  |  |
| Below-grade tank: Subsection I of 19.15.17.11 NMAC  |   |  |  |
| Volume: <u>Max 120 bbl</u> Type of fluid: <u>Produced Water</u>   |   |  |  |
| Tank Construction material: Metal   |   |  |  |
| Secondary containment with leak detection 🗌 Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off   |   |  |  |
| Visible sidewalls and liner Visible sidewalls only Other  |   |  |  |
| Liner type: Thicknessmil _ HDPE PVC 		OtherUnspecified  |   |  |  |
| 4   |   |  |  |
| Alternative Method:   |   |  |  |
| Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for co  | nsideration of approval.  |  |  |
| 5.  |   |  |  |
| Fencing: Subsection D of 19.15.17.11 NMAC (Applies to permanent pits, temporary pits, and below-grade tanks)  |   |  |  |
| Chain link, six feet in height, two strands of barbed wire at top (Required if located within 1000 feet of a permanent residence, school, hospital,   |   |  |  |
| <i>institution or church)</i><br>Four foot height, four strands of barbed wire evenly spaced between one and four feet  |   |  |  |
| Alternate. Please specify   |   |  |  |
|   |   |  |  |

Netting: Subsection E of 19.15.17.11 NMAC (Applies to permanent pits and permanent open top tanks)

Screen Netting Other

6

7.

Monthly inspections (If netting or screening is not physically feasible)

### Signs: Subsection C of 19.15.17.11 NMAC

12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers

Signed in compliance with 19.15.16.8 NMAC

#### Variances and Exceptions:

Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance.

Please check a box if one or more of the following is requested, if not leave blank:

□ Variance(s): Requests must be submitted to the appropriate division district for consideration of approval.

Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

# Siting Criteria (regarding permitting): 19.15.17.10 NMAC

Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of acceptable source material are provided below. Siting criteria does not apply to drying pads or above-grade tanks.

| General siting   |                    |  |
|--|--------------------|--|
| Ground water is less than 25 feet below the bottom of a low chloride temporary pit or below-grade tank   | □ Yes □ No<br>□ NA |  |
| Ground water is less than 50 feet below the bottom of a Temporary pit, permanent pit, or Multi-Well Fluid Management pit.<br>NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells  |                    |  |
| <ul> <li>Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended. (Does not apply to below grade tanks)</li> <li>Written confirmation or verification from the municipality; Written approval obtained from the municipality</li> </ul>          | 🗌 Yes 🗌 No         |  |
| <ul> <li>Within the area overlying a subsurface mine. (Does not apply to below grade tanks)</li> <li>Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division</li> </ul>  | 🗌 Yes 🗌 No         |  |
| <ul> <li>Within an unstable area. (Does not apply to below grade tanks)</li> <li>Engineering measures incorporated into the design; NM Bureau of Geology &amp; Mineral Resources; USGS; NM Geological Society; Topographic map</li> </ul>  | 🗌 Yes 🗌 No         |  |
| Within a 100-year floodplain. (Does not apply to below grade tanks) - FEMA map   | 🗌 Yes 🗌 No         |  |
| Below Grade Tanks  |                    |  |
| <ul> <li>Within 100 feet of a continuously flowing watercourse, significant watercourse, lake bed, sinkhole, wetland or playa lake (measured from the ordinary high-water mark).</li> <li>Topographic map; Visual inspection (certification) of the proposed site</li> </ul>   | 🗌 Yes 🗌 No         |  |
| <ul> <li>Within 200 horizontal feet of a spring or a fresh water well used for public or livestock consumption;.</li> <li>NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site</li> </ul>   | 🗌 Yes 🗌 No         |  |
| Temporary Pit using Low Chloride Drilling Fluid (maximum chloride content 15,000 mg/liter)   |                    |  |
| <ul> <li>Within 100 feet of a continuously flowing watercourse, or any other significant watercourse or within 200 feet of any lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark). (Applies to low chloride temporary pits.)</li> <li>Topographic map; Visual inspection (certification) of the proposed site</li> </ul>                                  | 🗌 Yes 🗌 No         |  |
| Within 300 feet from a occupied permanent residence, school, hospital, institution, or church in existence at the time of initial application.   | 🗌 Yes 🗌 No         |  |
| <ul> <li>Visual inspection (certification) of the proposed site; Aerial photo; Satellite image</li> </ul>  |                    |  |
| Within 200 horizontal feet of a spring or a private, domestic fresh water well used by less than five households for domestic or stock watering purposes, or 300feet of any other fresh water well or spring, in existence at the time of the initial application. NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site | 🗌 Yes 🗌 No         |  |

| <ul> <li>Within 100 feet of a wetland.</li> <li>US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site</li> </ul>  | 🗌 Yes 🗌 No |  |
|--|------------|--|
| Temporary Pit Non-low chloride drilling fluid  |            |  |
| <ul> <li>Within 300 feet of a continuously flowing watercourse, or any other significant watercourse, or within 200 feet of any lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).</li> <li>Topographic map; Visual inspection (certification) of the proposed site</li> </ul>   | 🗌 Yes 🗌 No |  |
| <ul> <li>Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.</li> <li>Visual inspection (certification) of the proposed site; Aerial photo; Satellite image</li> </ul>   |            |  |
| <ul> <li>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, or 1000 feet of any other fresh water well or spring, in the existence at the time of the initial application;</li> <li>NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site</li> </ul>  |            |  |
| <ul> <li>Within 300 feet of a wetland.</li> <li>US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site</li> </ul>  |            |  |
| Permanent Pit or Multi-Well Fluid Management Pit   |            |  |
| <ul> <li>Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse, or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).</li> <li>Topographic map; Visual inspection (certification) of the proposed site</li> </ul>  | 🗌 Yes 🗌 No |  |
| <ul> <li>Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.</li> <li>Visual inspection (certification) of the proposed site; Aerial photo; Satellite image</li> </ul>  | 🗌 Yes 🗌 No |  |
| <ul> <li>Within 500 horizontal feet of a spring or a fresh water well used for domestic or stock watering purposes, in existence at the time of initial application.</li> <li>NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site</li> </ul>   | 🗌 Yes 🗌 No |  |
| <ul> <li>Within 500 feet of a wetland.</li> <li>US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site</li> </ul>  | 🗌 Yes 🗌 No |  |
| 10.         Temporary Pits, Emergency Pits, and Below-grade Tanks 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.         Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC         Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC         Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC         Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC         Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC         Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC         nut 19.15.17.13 NMAC         Previously Approved Design (attach copy of design) API Number:       or Permit Number: |            |  |
| 11.<br>Multi-Well Fluid Management Pit 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         A List of wells with approved application for permit to drill associated with the pit.         Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC         and 19.15.17.13 NMAC         Hydrogeologic Data - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC         Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC         Previously Approved Design (attach copy of design)       API Number: or Permit Number:   |            |  |
|  |            |  |

| <sup>12.</sup><br><u>Permanent Pits Permit Application Checklist</u> : Subsection B of 19.15.17.9 NMAC<br><i>Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the</i>  | documents are       |  |  |
|--|---------------------|--|--|
| <ul> <li>attached.</li> <li>Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 NMAC</li> <li>Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC</li> <li>Climatological Factors Assessment</li> </ul>  |                     |  |  |
| <ul> <li>Certified Engineering Design Plans - based upon the appropriate requirements of 19.15.17.11 NMAC</li> <li>Dike Protection and Structural Integrity Design - based upon the appropriate requirements of 19.15.17.11 NMAC</li> </ul>  |                     |  |  |
| <ul> <li>Leak Detection Design - based upon the appropriate requirements of 19.15.17.11 NMAC</li> <li>Liner Specifications and Compatibility Assessment - based upon the appropriate requirements of 19.15.17.11 NMAC</li> <li>Quality Control/Quality Assurance Construction and Installation Plan</li> </ul>   |                     |  |  |
| <ul> <li>Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC</li> <li>Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17.11 NMAC</li> </ul>  |                     |  |  |
| <ul> <li>Nuisance or Hazardous Odors, including H<sub>2</sub>S, Prevention Plan</li> <li>Emergency Response Plan</li> <li>Oil Field Waste Stream Characterization</li> </ul>   |                     |  |  |
| <ul> <li>Monitoring and Inspection Plan</li> <li>Erosion Control Plan</li> </ul>   |                     |  |  |
| Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC   |                     |  |  |
| Proposed Closure: 19.15.17.13 NMAC<br>Instructions: Please complete the applicable boxes, Boxes 14 through 18, in regards to the proposed closure plan.  |                     |  |  |
| Type: Drilling Workover Emergency Cavitation P&A Permanent Pit Below-grade Tank Multi-well F   | luid Management Pit |  |  |
| Proposed Closure Method: Waste Excavation and Removal<br>Waste Removal (Closed-loop systems only)  |                     |  |  |
| <ul> <li>On-site Closure Method (Only for temporary pits and closed-loop systems)</li> <li>In-place Burial</li> <li>On-site Trench Burial</li> <li>Alternative Closure Method</li> </ul>   |                     |  |  |
| 14.<br>Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the   |                     |  |  |
| <ul> <li>closure plan. Please indicate, by a check mark in the box, that the documents are attached.</li> <li>Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC</li> <li>Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.13 NMAC</li> </ul>  |                     |  |  |
| <ul> <li>Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings)</li> <li>Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC</li> </ul>  |                     |  |  |
| <ul> <li>Re-vegetation Plan - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC</li> <li>Site Reclamation Plan - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC</li> </ul>  |                     |  |  |
| 15.<br>Sitting Childrein (manualing an either branch de cale), 10.15.17.10.20.04.C   |                     |  |  |
| Siting Criteria (regarding on-site closure methods only): 19.15.17.10 NMAC<br>Instructions: Each siting criteria requires a demonstration of compliance in the closure plan. Recommendations of acceptable source material are<br>provided below. Requests regarding changes to certain siting criteria require justifications and/or demonstrations of equivalency. Please refer to<br>19.15.17.10 NMAC for guidance. |                     |  |  |
| Ground water is less than 25 feet below the bottom of the buried waste.<br>- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells  | □ Yes □ No<br>□ NA  |  |  |
| Ground water is between 25-50 feet below the bottom of the buried waste<br>- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells  | □ Yes □ No<br>□ NA  |  |  |
| <ul> <li>Ground water is more than 100 feet below the bottom of the buried waste.</li> <li>NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells</li> </ul>   | □ Yes □ No<br>□ NA  |  |  |
| <ul> <li>Within 100 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse, lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).</li> <li>Topographic map; Visual inspection (certification) of the proposed site</li> </ul>   | 🗌 Yes 🗌 No          |  |  |
| <ul> <li>Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.</li> <li>Visual inspection (certification) of the proposed site; Aerial photo; Satellite image</li> </ul>   | 🗌 Yes 🗌 No          |  |  |
| <ul> <li>Within 300 horizontal feet of a private, domestic fresh water well or spring used for domestic or stock watering purposes, in existence at the time of initial application.</li> <li>NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site</li> </ul>  | 🗌 Yes 🗌 No          |  |  |
| Written confirmation or verification from the municipality; Written approval obtained from the municipality  | 🗌 Yes 🗌 No          |  |  |
| Within 300 feet of a wetland.<br>US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site  | 🗌 Yes 🗌 No          |  |  |
| Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance  |                     |  |  |

Oil Conservation Division

| adopted pursuant to NMSA 1978, Section 3-27-3, as smended.       \Vertex continuation or vertification from the manifegality. Written approval obtained from the manifegality       \Vertex \u00e9 No         Within the creax vertification or map from the NM EMINRD-Mining and Mineral Division       \Vertex \u00e9 No         Within an unstable area.       No evertification or map from the NM EMINRD-Mining and Mineral Resources; USOS; NM Geological Society, Tepperprint map       \Vertex \u00e9 No         Within an unstable area.       No evertification or map from the NM EMINRD-Mining and Mineral Resources; USOS; NM Geological Society, Tepperprint map       \Vertex No         Within a 100-year fload data.       \Vertex No       \Vertex No         PEMAM map       \Vertex No       \Vertex No         No fload data.       \Vertex No       \Vertex No         State Classer Plan O Data?       \Vert  |   |  |  |  |
|--|---|--|--|--|
| Writen confirmation or verification or map from the NM EMNRD-Mining and Mineral Division     Write confirmation or verification or map from the NM EMNRD-Mining and Mineral Networks     Society: "Foogaphile map     Writin a 100-year floodplain.         TEMA map   | - written communication of vermeation from the municipanty, written approval obtained from the municipanty  | Yes No                                   |  |  |
| - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Solied; / Toggraphic map Within a 100-year floodplata TeBAA map - T |   |  |  |  |
| Within a 100-year floodplain.       It Rel No  | - Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological  |  |  |  |
| No. Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Pleuse indicate, by a check muck in the box, that the documents are attached.         Billing Check and the abox, that the documents are attached.       Billing Check and the appropriate requirements of 19.15.17.13 NMAC         ConstructionDesign Plan of Burial Trench (if applicable) based upon the appropriate requirements of 19.15.17.13 NMAC       Billing Check and the applicable plan of Burial Trench (if applicable) based upon the appropriate requirements of 19.15.17.13 NMAC         ConstructionDesign Plan of Burial Trench (if applicable) based upon the appropriate requirements of 19.15.17.13 NMAC       Billing Check and the appropriate requirements of 19.15.17.13 NMAC         Discost Facility Nume and Permix Number (for liquids, difting fulcies and drill outlings to in case on-site closure standards cannot be achieved)       Billing Check and the appropriate requirements of Subsection II of 19.15.17.13 NMAC         Serie Cave Design - based upon the appropriate requirements of Subsection II of 19.15.17.13 NMAC       Billing Check and the appropriate requirements of Subsection II of 19.15.17.13 NMAC         Serie Cave Design - based upon the appropriate requirements of Subsection II of 19.15.17.13 NMAC       Billing Check and the appropriate requirements of Subsection II of 19.15.17.13 NMAC         Sind Cever Design - based upon the appropriate requirements of Subsection II of 19.15.17.13 NMAC       Billing Check and the appropriate requirements of Subsection II of 19.15.17.13 NMAC         Sind Cever Design - based upon the appropriate requirements of Subsection II of 19.15.17.13 NMA   | Within a 100-year floodplain.   |  |  |  |
| On. Site Closure Plan Checklist: (19:15:17:13 NMAC) Instructions: Each of the following liens must be attached to the closure plan. Please Indicate, by a check must in the box, that the decaments are attached.  | •   |  |  |  |
| Operator Application Certification:         Thereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.         Name (Print):       Crystal Walker       Title:       Regulatory Coordinator         Signature:  | On-Site Closure Plan Checklist:       (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indicate,         by a check mark in the box, that the documents are attached.       Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC         Proof of Surface Owner Notice - based upon the appropriate requirements of Subsection E of 19.15.17.13 NMAC       Construction/Design Plan of Burial Trench (if applicable) based upon the appropriate requirements of Subsection K of 19.15.17.11 NMAC         Construction/Design Plan of Temporary Pit (for in-place burial of a drying pad) - based upon the appropriate requirements of 19.15.17.13 NMAC         Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC         Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of 19.15.17.13 NMAC         Waste Material Sampling Plan - based upon the appropriate requirements of 19.15.17.13 NMAC         Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings or in case on-site closure standards cannot be achieved)         Soil Cover Design - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC         Re-vegetation Plan - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC |  |  |  |
| Name (Print):       Crystal Walker       Title:       Regulatory Coordinator         Signature:       Other Construction       Date:       (4/4/1/4)         e-mail address:       crystal.walker@conocophillip.com       Telephone:       505-326-9837         **       OCD Approval:       Permit Application (including closure plan)       Closure Plan (only)       OCD Conditions (see attachment)         OCD Representative Signature:   | Operator Application Certification:   | l'is c                                   |  |  |
| Signature:   |   | lief.                                    |  |  |
| e-mail address:rystal.walker@conocophillip.comTelephone: _505326-9837  e-mail address:rystal.walker@conocophillip.comTelephone: _505326-9837  GCD Approval: A Permit Application (including closure plan)   Closure Plan (only)   OCD Conditions (see attachment) OCD Representative Signature:Approval Date:Approval Date:Approval Date:Approval Date:Approval Date:Approval Date:  Title:CODPermit Number:   |   |  |  |  |
| OCD Approval:       A permit Application (including closure plan)       Closure Plan (only)       OCD Conditions (see attachment)         OCD Representative Signature:  |   |  |  |  |
| Title:       Compliance Officer       OCD Permit Number:         19.       Closure Report (required within 60 days of closure completion):       19.15.17.13 NMAC         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 Method:       Closure Completion Date:         20.       Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached.         Proof of Closure Notice (surface owner and division)       Proof of Closure Notice (surface owner and division)         Proof of Closure Sampling Analytical Results (if applicable)       Maste Result (if applicable)         Waste Material Sampling Analytical Results (if cequired for on-site closure)       Disposal Facility Name and Permit Number         Soil Backfilling and Cover Installation       Re-vegetation Application Rates and Seeding Technique         Site Reclamation (Photo Documentation)       Kite Reclamation (Photo Documentation)  |   |  |  |  |
| 19.         Closure Report (required within 60 days of closure completion):       19.15.17.13 NMAC         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 Method:       Closure Completion Date:         20.       Closure Method:         Waste Excavation and Removal       On-Site Closure Method       Alternative Closure Method         1f different from approved plan, please explain.       21.         21.       Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached.         Proof of Closure Notice (surface owner and division)       Proof of Deed Notice (required for on-site closure for private land only)         Plot Plan (for on-site closures and temporary pits)       Confirmation Sampling Analytical Results (required for on-site closure)         Disposal Facility Name and Permit Number       Soil Backfilling and Cover Installation         Re-vegetation Application Rates and Seeding Technique       Site Reclamation (Photo Documentation)  | 18.<br>OCD Approval: X Permit Application (including closure plan) Closure Plan (only) OCD Conditions (see attachment)  |  |  |  |
| Closure Report (required within 60 days of closure completion):       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 has been obtained and the closure activities have been completed.         20.       Closure Method:         Waste Excavation and Removal       On-Site Closure Method       Alternative Closure Method         1f different from approved plan, please explain.       21.         21.       Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the bax, that the documents are attached.         Proof of Closure Notice (surface owner and division)       Proof of Deed Notice (required for on-site closure for private land only)         Plot Plan (for on-site closures and temporary pits)       Confirmation Sampling Analytical Results (if applicable)         Waste Material Sampling Analytical Results (required for on-site closure)       Disposal Facility Name and Permit Number         Soil Backfilling and Cover Installation       Re-vegetation Application Rates and Seeding Technique         Site Reclamation (Photo Documentation)       Site Reclamation (Photo Documentation)  | <b><u>OCD Approval</u>:</b> $\square$ Permit Application (including closure plan) $\square$ Closure Plan (only) $\square$ OCD Conditions (see attachment)   | 2016                                     |  |  |
| Closure Method:       On-Site Closure Method       Alternative Closure Method       Waste Removal (Closed-loop systems only)         If different from approved plan, please explain.         21.         Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached.         Proof of Closure Notice (surface owner and division)         Proof of Deed Notice (required for on-site closure for private land only)         Plot Plan (for on-site closures and temporary pits)         Confirmation Sampling Analytical Results (if applicable)         Waste Material Sampling Analytical Results (required for on-site closure)         Disposal Facility Name and Permit Number         Soil Backfilling and Cover Installation         Re-vegetation Application Rates and Seeding Technique         Site Reclamation (Photo Documentation)   | OCD Approval:       Permit Application (including closure plan)       Closure Plan (only)       OCD Conditions (see attachment)         OCD Representative Signature:   | 2016                                     |  |  |
| <ul> <li>Waste Excavation and Removal On-Site Closure Method Alternative Closure Method Waste Removal (Closed-loop systems only)</li> <li>If different from approved plan, please explain.</li> <li>21.</li> <li>Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached.</li> <li>Proof of Closure Notice (surface owner and division)</li> <li>Proof of Deed Notice (required for on-site closure for private land only)</li> <li>Plot Plan (for on-site closures and temporary pits)</li> <li>Confirmation Sampling Analytical Results (if applicable)</li> <li>Waste Material Sampling Analytical Results (required for on-site closure)</li> <li>Disposal Facility Name and Permit Number</li> <li>Soil Backfilling and Cover Installation</li> <li>Re-vegetation Application Rates and Seeding Technique</li> <li>Site Reclamation (Photo Documentation)</li> </ul>  | OCD Approval:       Permit Application (including closure plan)       Closure Plan (only)       OCD Conditions (see attachment)         OCD Representative Signature:       Oct Permit Number:       Approval Date:       8/15/2         Title:       Compliance Officer       OCD Permit Number:       19.         Closure Report (required within 60 days of closure completion):       19.15.17.13 NMAC         Instructions:       Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting         The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not section of the form until an approved closure plan has been obtained and the closure activities have been completed.  | g the closure report.                    |  |  |
| Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check         mark in the box, that the documents are attached.         Proof of Closure Notice (surface owner and division)         Proof of Deed Notice (required for on-site closure for private land only)         Plot Plan (for on-site closures and temporary pits)         Confirmation Sampling Analytical Results (if applicable)         Waste Material Sampling Analytical Results (required for on-site closure)         Disposal Facility Name and Permit Number         Soil Backfilling and Cover Installation         Re-vegetation Application Rates and Seeding Technique         Site Reclamation (Photo Documentation)   | OCD Approval:       Permit Application (including closure plan)       Closure Plan (only)       OCD Conditions (see attachment)         OCD Representative Signature:   | g the closure report.                    |  |  |
| On-site Closure Location: Latitude Longitude NAD: 1927 1983  | OCD Approval:       Permit Application (including closure plan)       Closure Plan (only)       OCD Conditions (see attachment)         OCD Representative Signature:   | g the closure report.<br>t complete this |  |  |

### 22. 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):  | Title:     |  |
| Signature:   | Date:      |  |
| e-mail address:  | Telephone: |  |

## Burlington Resources Oil & Gas Company, LP BGT Modification

Burlington Resources is requesting to modify the below-grade tank permit for SAN JUAN 29-7 UNIT 139N.

Burlington Resources found that the SAN JUAN 29-7 UNIT 139N shares a BGT with the SAN JUAN 29-7 UNIT 69A and would like to modify the existing permit.