

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

Form C-144  
July 21, 2008

For temporary pits, closed-loop systems, and below-grade tanks, submit to the appropriate NMOCD District Office.  
For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

Pit, Closed-Loop System, Below-Grade Tank, or  
Proposed Alternative Method Permit or Closure Plan Application

8717

- Type of action: ☐ Permit of a pit, closed-loop system, below-grade tank, or proposed alternative method  
☒ Closure of a pit, closed-loop system, below-grade tank, or proposed alternative method  
☐ Modification to an existing permit  
☐ Closure plan only submitted for an existing permitted or non-permitted pit, closed-loop system, below-grade tank, or proposed alternative method

**Instructions: Please submit one application (Form C-144) per individual pit, closed-loop system, below-grade tank or alternative request**

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

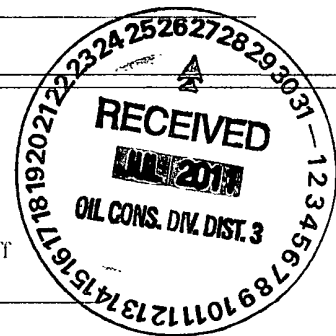
1.  
Operator: Energen Resources OGRID #: 162928  
Address 2010 Afton Place, Farmington, New Mexico 87401  
Facility or well name: Federal 1  
API Number: 3003921504 OCD Permit Number: \_\_\_\_\_  
U/L or Qtr/Qtr A Section 31 Township 24N Range 03W County: Rio Arriba  
Center of Proposed Design: Latitude 36.27187 Longitude -107.19091 NAD: ☐ 1927 ☒ 1983  
Surface Owner: ☒ Federal ☐ State ☐ Private ☐ Tribal Trust or Indian Allotment

2.  
☐ **Pit:** Subsection F or G of 19.15.17.11 NMAC  
Temporary: ☐ Drilling ☐ Workover  
☐ Permanent ☐ Emergency ☐ Cavitation ☐ P&A  
☐ Lined ☐ Unlined Liner type: Thickness \_\_\_\_\_ mil ☐ LLDPE ☐ HDPE ☐ PVC ☐ Other \_\_\_\_\_  
☐ String-Reinforced  
Liner Seams ☐ Welded ☐ Factory ☐ Other \_\_\_\_\_ Volume: \_\_\_\_\_ bbl Dimensions: L \_\_\_\_\_ x W \_\_\_\_\_ x D \_\_\_\_\_

3.  
☐ **Closed-loop System:** Subsection H of 19.15.17.11 NMAC  
Type of Operation ☐ P&A ☐ Drilling a new well ☐ Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent)  
☐ Drying Pad ☐ Above Ground Steel Tanks ☐ Haul-off Bins ☐ Other \_\_\_\_\_  
☐ Lined ☐ Unlined Liner type: Thickness \_\_\_\_\_ mil ☐ LLDPE ☐ HDPE ☐ PVC ☐ Other \_\_\_\_\_  
Liner Seams: ☐ Welded ☐ Factory ☐ Other \_\_\_\_\_

4.  
☒ **Below-grade tank:** Subsection I of 19.15.17.11 NMAC  
Volume: \_\_\_\_\_ bbl Type of fluid: Produced Water  
Tank Construction material: \_\_\_\_\_  
☐ 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: Thickness \_\_\_\_\_ mil ☐ HDPE ☐ PVC ☐ Other \_\_\_\_\_

5.  
☐ **Alternative Method:**  
Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.



6.

**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, institution or church*)
- ☐ Four foot height, four strands of barbed wire evenly spaced between one and four feet
- ☐ Alternate. Please specify \_\_\_\_\_

7.

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

- ☐ Screen ☐ Netting ☐ Other \_\_\_\_\_
- ☐ Monthly inspections (If netting or screening is not physically feasible)

8.

**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 19.15.3.103 NMAC

9.

**Administrative Approvals 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:**

- ☐ Administrative approval(s) Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for consideration of approval.
- ☐ Exception(s) Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

10.

**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. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to drying pads or above-grade tanks associated with a closed-loop system.

|                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank.<br>- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells                                                                                                                                                                                       | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| 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).<br>- Topographic map; Visual inspection (certification) of the proposed site                                                                                                                                   | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.<br>(Applies to temporary, emergency, or cavitation pits and below-grade tanks)<br>- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image                                                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> NA |
| Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.<br>(Applies to permanent pits)<br>- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image                                                                                                                                         | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> NA |
| Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application.<br>- NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| 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.<br>- Written confirmation or verification from the municipality; Written approval obtained from the municipality                                                                                            | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| Within 500 feet of a wetland.<br>- US Fish and Wildlife Wetland Identification map, Topographic map; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| Within the area overlying a subsurface mine.<br>- Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division                                                                                                                                                                                                                                                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| Within an unstable area.<br>- Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map                                                                                                                                                                                                                                  | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| Within a 100-year floodplain.<br>- FEMA map                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |

11.

**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 19.15.17.11 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 and 19.15.17.13 NMAC

☐ Previously Approved Design (attach copy of design) API Number: \_\_\_\_\_ or Permit Number: \_\_\_\_\_

12.

**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.

- ☐ Geologic and Hydrogeologic Data (only for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9
- ☐ Siting Criteria Compliance Demonstrations (only for on-site closure) - based upon the appropriate requirements of 19.15.17.10 NMAC
- ☐ 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 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

☐ Previously Approved Design (attach copy of design) API Number: \_\_\_\_\_

☐ Previously Approved Operating and Maintenance Plan API Number: \_\_\_\_\_ (Applies only to closed-loop system that use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

13.

**Permanent Pits Permit Application 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 - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 NMAC
- ☐ Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC
- ☐ Climatological Factors Assessment
- ☐ Certified Engineering Design Plans - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Dike Protection and Structural Integrity Design - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Leak Detection Design - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Liner Specifications and Compatibility Assessment - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Quality Control/Quality Assurance Construction and Installation Plan
- ☐ Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC
- ☐ Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17.11 NMAC
- ☐ Nuisance or Hazardous Odors, including H<sub>2</sub>S, Prevention Plan
- ☐ Emergency Response Plan
- ☐ Oil Field Waste Stream Characterization
- ☐ Monitoring and Inspection Plan
- ☐ Erosion Control Plan
- ☐ Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC

14.

**Proposed Closure:** 19.15.17.13 NMAC**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 ☐ Closed-loop System

☐ Alternative

Proposed Closure Method: ☒ Waste Excavation and Removal

- ☐ Waste Removal (Closed-loop systems only)
- ☐ On-site Closure Method (Only for temporary pits and closed-loop systems)
- ☐ In-place Burial ☐ On-site Trench Burial
- ☐ Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for consideration)

15.

**Waste Excavation and Removal 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.

- ☐ 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 Subsection F of 19.15.17.13 NMAC
- ☐ Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings)
- ☐ 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

16.

**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 identify 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: \_\_\_\_\_ Disposal Facility Permit Number: \_\_\_\_\_

Disposal Facility Name: \_\_\_\_\_ Disposal Facility Permit Number: \_\_\_\_\_

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) ☐ No

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

17.

**Siting Criteria (regarding on-site closure methods only):** 19.15.17.10 NMAC

**Instructions:** Each siting criteria requires a demonstration of compliance in the closure plan. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17.10 NMAC for guidance.

Ground water is less than 50 feet below the bottom of the buried waste.

- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells

☐ Yes ☐ No

☐ NA

Ground water is between 50 and 100 feet below the bottom of the buried waste

- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells

☐ Yes ☐ No

☐ NA

Ground water is more than 100 feet below the bottom of the buried waste.

- NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells

☐ Yes ☐ No

☐ NA

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).

- Topographic map, Visual inspection (certification) of the proposed site

☐ Yes ☐ No

Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.

- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image

☐ Yes ☐ No

Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application.

- NM Office of the State Engineer - iWATERS database; 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 adopted pursuant to NMSA 1978, Section 3-27-3, as amended.

- Written confirmation or verification from the municipality, Written approval obtained from the municipality

☐ Yes ☐ No

Within 500 feet of a wetland

- US Fish and Wildlife Wetland Identification map, Topographic map; Visual inspection (certification) of the proposed site

☐ Yes ☐ No

Within the area overlying a subsurface mine.

- Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division

☐ Yes ☐ No

Within an unstable area.

- Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map

☐ Yes ☐ No

Within a 100-year floodplain.

- FEMA map

☐ Yes ☐ No

18.

**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 F of 19.15.17.13 NMAC

☐ Construction/Design Plan of Burial Trench (if applicable) based upon the appropriate requirements 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 19.15.17.11 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 Subsection F of 19.15.17.13 NMAC

☐ Waste Material Sampling Plan - based upon the appropriate requirements of Subsection F 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 I of 19.15.17.13 NMAC

☐ Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

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**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): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

e-mail address: \_\_\_\_\_ Telephone: \_\_\_\_\_

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**OCD Approval:** ☐ Permit Application (including closure plan) ☒ Closure Plan (only) ☐ OCD Conditions (see attachment)

OCD Representative Signature: Jonathan D. Kelly Approval Date: 8/15/2011

Title: Compliance Officer OCD Permit Number: \_\_\_\_\_

21.

**Closure Report (required within 60 days of closure completion):** Subsection K of 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 Completion Date: 6/1/11

22.

**Closure Method:**

☒ Waste Excavation and Removal ☐ On-Site Closure Method ☐ Alternative Closure Method ☐ Waste Removal (Closed-loop systems only)  
☐ If different from approved plan, please explain.

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**Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:**

**Instructions:** Please identify 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?

☐ 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

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**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)  
☐ 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)

On-site Closure Location. Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ NAD: ☐ 1927 ☐ 1983

25.

**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): Ed Hasely Title: Sr Environmental Engineer

Signature: [Signature] Date: 7/27/11

e-mail address: ed.hasely@energen.com Telephone: (505) 324-4131

# **BELOW-GRADE TANK CLOSURE REPORT**

ENERGEN RESOURCES  
Federal #1

## **CLOSURE STEPS:** (Closure Report information is in **bold**)

(1) Notify the surface owner by certified mail, return receipt requested, of the plans to close the below-grade tank.

**Attached**

(2) Notify the Aztec OCD office (Brandon Powell – 334-6178, Ext 15) verbally or by other means at least 72 hours, but not more than one week, prior to the planned closure operation.

**Attached**

(3) Remove liquids from the below-grade tank. Dispose of the liquids and sludge in a division-approved facility.

**No disposal of liquids was required.**

(4) Remove the below-grade tank for re-use in an above-ground setup or for disposal in a division-approved manner.

**Tank removed.**

(5) Unless the equipment is required for some other purpose, remove any on-site equipment associated with the below-grade tank.

**All remaining equipment is required for operations.**

(6) Test the soils beneath the below-grade tank to determine whether a release has occurred.

- Collect, at a minimum, a five point, composite sample;  
**Composite sample was collected.**
- Collect individual grab samples from any area that is wet, discolored or showing other evidence of a release;  
**No additional sampling was necessary.**

Analyze for BTEX, TPH and chlorides to demonstrate:

- Benzene concentration does not exceed 0.2 mg/kg, as determined by EPA SW-846 methods 8021B or 8260B
- Total BTEX concentration does not exceed 50 mg/kg, as determined by EPA SW-846 methods 8021B or 8260B
- TPH concentration does not exceed 100 mg/kg, as determined by EPA method 418.1
- Chloride concentration does not exceed 250 mg/kg, as determined by EPA method 300.1 or the background concentration, whichever is greater.

| Constituent | Limit (mg/kg) | Actual Results (mg/kg) |
|-------------|---------------|------------------------|
| Benzene     | 0.2           | ND                     |
| Total BTEX  | 50.0          | 0.0017                 |
| TPH (418.1) | 100           | 34.8                   |
| Chlorides   | 250           | 140                    |

(7) IF the soil analyses show that the soils meet the concentrations specified in (6) above, backfill the excavation with compacted, non-waste containing, earthen material in a manner that will prevent ponding or erosion. If the area will not be needed for operations, reclaim the area as described in the "RECLAMATION" section.

**Excavation was backfilled w/ non-waste containing, earthen material in a manner that will prevent ponding and erosion, including one foot on top soil.**

(8) IF the soil analyses show that the soils exceed one or more of the concentrations specified in (6) above, notify the Aztec OCD office (Brandon Powell – 334-6178, Ext 15) and proceed per 19.15.3.116 NMAC.

**Not applicable.**

NOTE: If groundwater is encountered at any time during the closure process, the OCD office will be notified and a specific closure plan will be submitted to the Aztec and Santa Fe OCD offices for approval.

**Not applicable.**

#### **FINAL CLOSURE REPORT:**

Within 60 days of closure completion, submit a closure report on form C-144, with necessary attachments to document all closure activities including sampling results.

**This submittal is the closure report.**

#### **RECLAMATION:**

If the area is not needed for operations, reclaim the area to a safe and stable condition that blends with the surrounding undisturbed area. Restore the impacted surface area to the condition that existed prior to oil and gas operations by placement of the soil cover, recontour the location and associated areas to a contour that approximates the original contour and blends with the surrounding topography and re-vegetate.

(A) Construct the soil cover to the site's existing grade and prevent ponding of water and erosion of the cover material. The soil cover shall consist of the background thickness of topsoil or one foot of suitable material to establish vegetation at the site, whichever is greater.

(B) Seed or plant the disturbed areas the first growing season after closing the below-grade tank. Drill on the contour whenever practical or by other division-approved methods. The goal is to obtain vegetative cover that equals 70% of the native perennial vegetative cover (un-impacted by overgrazing, fire or other intrusion damaging to native vegetation) consisting of at least three native plant species, including at least one grass, but not including noxious weeds, and maintain that cover through two successive growing seasons. During the two successive growing seasons that prove viability, there shall be no artificial irrigation of the vegetation.

(C) Repeat seeding or planting until it successfully achieves the required vegetative cover.

(D) If conditions are not favorable for the establishment of vegetation, such as periods of drought, contact the Aztec OCD office to discuss possibly delaying seeding or planting until soil moisture conditions become favorable or using additional techniques such as mulching, fertilizing, irrigating, fencing or other practices.

(E) Notify the Aztec OCD office (Brandon Powell – 334-6178, Ext 15) when the area has been seeded or planted and when it successfully achieves re-vegetation.

**Area is needed for operations. Upon abandonment, seeding will be deferred to the BLM / Tribal requirements per the BLM / OCD MOU.**

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State of New Mexico  
Energy Minerals and Natural Resources

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

Form C-141  
Revised October 10, 2003

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

### Release Notification and Corrective Action

#### OPERATOR

☐ Initial Report ☒ Final Report

|                                                        |  |                                         |                  |
|--------------------------------------------------------|--|-----------------------------------------|------------------|
| <b>Name of Company:</b> Energen Resources, Inc.        |  | <b>Contact:</b> Ed Hasely               |                  |
| <b>Address:</b> 2010 Afton Place, Farmington, NM 87401 |  | <b>Telephone No:</b> 505-324-4131       |                  |
| <b>Facility Name:</b> Federal #1                       |  | <b>Facility Type:</b> Oil/Gas Well Site |                  |
| <b>Surface Owner:</b> Federal                          |  | <b>Mineral Owner:</b> Federal           | <b>Lease No.</b> |

#### LOCATION OF RELEASE

| Unit Letter | Section | Township | Range | Feet from the | North/South Line | Feet from the | East/West Line | County     |
|-------------|---------|----------|-------|---------------|------------------|---------------|----------------|------------|
| A           | 31      | 24N      | 3W    |               |                  |               |                | Rio Arriba |

Latitude 36.27187

Longitude -107.19091

#### NATURE OF RELEASE

|                                                                                                                                      |                                                  |                                    |
|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|------------------------------------|
| <b>Type of Release:</b> NO RELEASE                                                                                                   | <b>Volume of Release:</b>                        | <b>Volume Recovered:</b>           |
| <b>Source of Release:</b>                                                                                                            | <b>Date and Hour of Occurrence:</b>              | <b>Date and Hour of Discovery:</b> |
| <b>Was Immediate Notice Given?</b><br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Required | <b>If YES, To Whom?</b>                          |                                    |
| <b>By Whom?</b>                                                                                                                      | <b>Date and Hour:</b>                            |                                    |
| <b>Was a Watercourse Reached?</b><br><input type="checkbox"/> Yes <input type="checkbox"/> No                                        | <b>If YES, Volume Impacting the Watercourse.</b> |                                    |

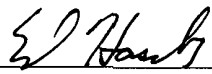
If a Watercourse was Impacted, Describe Fully.\*

Describe Cause of Problem and Remedial Action Taken.\*

THERE WAS NO PROBLEM OR REMEDIAL ACTION TAKEN THIS FORM IS FILLED OUT TO SERVE AS A COVER FOR LAB ANALYSES - ONLY TO SATISFY 19 15 17.13.E(4).

Describe Area Affected and Cleanup Action Taken.\*

I hereby certify that the information given above is true and complete to the best of my knowledge and understand that pursuant to NMOCD 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 NMOCD marked as "Final Report" does not relieve the operator of liability should their operations have failed to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human 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.

|                                                                                                       |                                                 |                                         |                                          |
|-------------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------------------------------------|------------------------------------------|
| <b>Signature:</b>  |                                                 | <b>OIL CONSERVATION DIVISION</b>        |                                          |
| <b>Printed Name:</b> Ed Hasely                                                                        |                                                 | <b>Approved by District Supervisor:</b> |                                          |
| <b>Title:</b> Sr Environmental Engineer                                                               | <b>Approval Date:</b>                           | <b>Expiration Date:</b>                 |                                          |
| <b>E-mail Address:</b> ed.hasely@energen.com                                                          | <b>Conditions of Approval</b>                   |                                         | <b>Attached</b> <input type="checkbox"/> |
| <b>Date:</b> 7/27/11                                                                                  | <b>Phone:</b> 505-324-4131 / 505-330-3584(cell) |                                         |                                          |

\* Attach Additional Sheets If Necessary



EPA METHOD 8021  
AROMATIC VOLATILE ORGANICS

|                    |              |                     |            |
|--------------------|--------------|---------------------|------------|
| Client:            | Energen Res. | Project #:          | 03022-0168 |
| Sample ID:         | Federal #1   | Date Reported:      | 05-20-11   |
| Laboratory Number: | 58257        | Date Sampled:       | 05-18-11   |
| Chain of Custody:  | 11772        | Date Received:      | 05-19-11   |
| Sample Matrix:     | Soil         | Date Analyzed:      | 05-19-11   |
| Preservative:      | Cool         | Date Extracted:     | 05-19-11   |
| Condition:         | Intact       | Analysis Requested: | BTEX       |
|                    |              | Dilution:           | 10         |

| Parameter    | Concentration<br>(ug/Kg) | Det.<br>Limit<br>(ug/Kg) |
|--------------|--------------------------|--------------------------|
| Benzene      | ND                       | 0.9                      |
| Toluene      | 1.7                      | 1.0                      |
| Ethylbenzene | ND                       | 1.0                      |
| p,m-Xylene   | ND                       | 1.2                      |
| o-Xylene     | ND                       | 0.9                      |
| Total BTEX   | 1.7                      |                          |

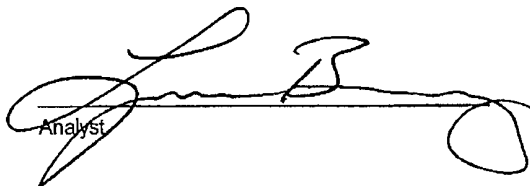
ND - Parameter not detected at the stated detection limit.

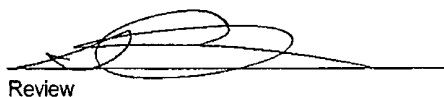
| Surrogate Recoveries: | Parameter           | Percent Recovery |
|-----------------------|---------------------|------------------|
|                       | Fluorobenzene       | 93.9 %           |
|                       | 1,4-difluorobenzene | 84.2 %           |
|                       | Bromochlorobenzene  | 97.9 %           |

References: Method 5030B, Purge-and-Trap, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Method 8021B, Aromatic Volatile Organics, Test Methods for Evaluating Solid Waste, SW-846, USEPA, December 1996.

Comments: BGT Closures

  
Analyst

  
Review



EPA METHOD 418.1  
TOTAL PETROLEUM HYDROCARBONS

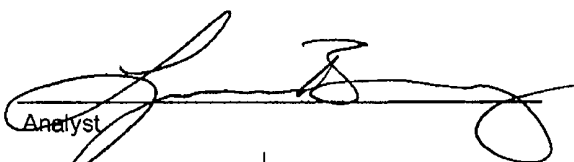
|                      |              |                  |            |
|----------------------|--------------|------------------|------------|
| Client:              | Energen Res. | Project #:       | 03022-0168 |
| Sample ID:           | Federal #1   | Date Reported:   | 05/19/11   |
| Laboratory Number:   | 58257        | Date Sampled:    | 05/18/11   |
| Chain of Custody No: | 11772        | Date Received:   | 05/19/11   |
| Sample Matrix:       | Soil         | Date Extracted:  | 05/19/11   |
| Preservative:        | Cool         | Date Analyzed:   | 05/19/11   |
| Condition:           | Intact       | Analysis Needed: | TPH-418.1  |

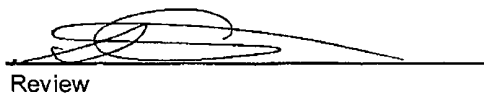
| Parameter                    | Concentration<br>(mg/kg) | Det.<br>Limit<br>(mg/kg) |
|------------------------------|--------------------------|--------------------------|
| Total Petroleum Hydrocarbons | 34.8                     | 9.7                      |

ND = Parameter not detected at the stated detection limit.

References: Method 418.1, Petroleum Hydrocarbons, Total Recoverable, Chemical Analysis of Water and Waste, USEPA Storet No. 4551, 1978.

Comments: BGT Closures

  
Analyst

  
Review



## Chloride

|                |              |                   |            |
|----------------|--------------|-------------------|------------|
| Client:        | Energen Res. | Project #:        | 03022-0168 |
| Sample ID:     | Federal #1   | Date Reported:    | 05/20/11   |
| Lab ID#:       | 58257        | Date Sampled:     | 05/18/11   |
| Sample Matrix: | Soil         | Date Received:    | 05/19/11   |
| Preservative:  | Cool         | Date Analyzed:    | 05/20/11   |
| Condition:     | Intact       | Chain of Custody: | 11772      |

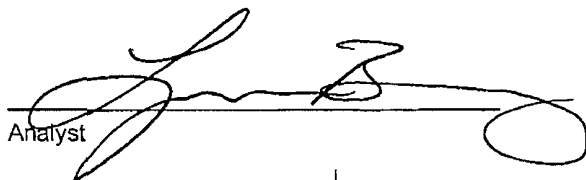
| Parameter | Concentration (mg/Kg) |
|-----------|-----------------------|
|-----------|-----------------------|

Total Chloride

140

Reference: U.S.E.P.A., 4500B, "Methods for Chemical Analysis of Water and Wastes", 1983.  
Standard Methods For The Examination of Water And Waste Water", 18th ed., 1992.

Comments: **BGT Closures**

Analyst 

Review 



April 28, 2011

Bureau of Land Management  
1235 La Plata Highway  
Farmington, New Mexico 87401  
Attn: Mr. Jim Lavoto

Re: Below Grade Tank Closure  
Federal #1

Dear Mr. Lavoto:

Energen Resources plans to close a below grade tank located on the subject well location. You are on record as the surface owner where this well is located. New Mexico Oil Conservation Division (NMOCD) rules require notification to the surface owner of our plans to close the below grade tank. NMOCD rules and guidelines will be followed. The well is located in Unit Letter A, Section 31, Township 24N, Range 3W in Rio Arriba County, New Mexico.

If there are any questions or concerns, please contact me at 505-330-3584.

Sincerely,

Ed Hasely  
Sr. Environmental Engineer  
Energen Resources

Cc: Well File  
Correspondence

| SENDER: COMPLETE THIS SECTION                                                                                                                                                                                                                                                                                          |  | COMPLETE THIS SECTION ON DELIVERY                                                                                                                                                                                                                                                   |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <ul style="list-style-type: none"><li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li><li>Print your name and address on the reverse so that we can return the card to you.</li><li>Attach this card to the back of the mailpiece, or on the front if space permits.</li></ul> |  | <p>A. Signature<br/>x </p> <p>B. Received by (Printed Name)<br/></p> <p>C. Date of Delivery<br/>4/29/11</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br/>If YES, enter delivery address below: <input type="checkbox"/> No</p>                 |  |
| 1. Article Addressed to:<br><br>BLM<br>1235 La Plata Hwy<br>Farmington NM 87401<br>Jim Lavoto                                                                                                                                                                                                                          |  | 3. Service Type<br><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail<br><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise<br><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. |  |
| 2. Article Number<br>(Transfer from service)                                                                                                                                                                                                                                                                           |  | 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes                                                                                                                                                                                                                    |  |
| 7009 2820 0000 5800 5910                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                                                                     |  |

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

Ce

7009 2820 0000 5800 5910

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City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

## Ed Hasely

---

**From:** Ed Hasely  
**Sent:** Thursday, April 28, 2011 9:06 AM  
**To:** 'Powell, Brandon, EMNRD'  
**Subject:** BGT Closure Notifications - Federal Wells

Brandon - This Email is to notify you that Energen plans to remove the below grade tanks on the following locations in the near future:

Federal ~~24~~ #1      Unit Letter A, Sec. 31 - T24N - R3W  
Federal ~~24~~ #2      Unit Letter I, Sec. 31 - T24N - R3W

Let me know if you have questions. Thanks.

**Ed Hasely**  
**Energen Resources Corporation**

Sr. Environmental Engineer

[ed.hasely@energen.com](mailto:ed.hasely@energen.com)

Office: (505) 324-4131

Cell. (505) 330-3584

