 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 	State of New Mexico Energy Minerals and Natural Resources	Form C-144 July 21, 2008
1301 W. Grand Ave., Artesia, NM 88210 District III	Department Oil Conservation Division 1220 South St. Francis Dr.	For temporary pits, closed-loop sytems, and below-grade tanks, submit to the appropriate NMOCD District Office.
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa Fe, NM 87505	For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.
1220 3. 5t. Francis 17., Santa T., 1414 - 6750-	Pit, Closed-Loop System, Below-Grad	le Tank, or
Prov	posed Alternative Method Permit or Close	
Type of action:	Permit of a pit, closed-loop system, below-grade ta	ank or proposed alternative method
	X Closure of a pit, closed-loop system, below-grade	
	Modification to an existing permit	
	Closure plan only submitted for an existing permit below-grade tank, or proposed alternative method	tted or non-permitted pit, closed-loop system,
Instructions: Please submit one	application (Form C-144) per individual pit, closed-loo	p system, below-grade tank or alternative request
	I of this request does not relieve the operator of liability should operations r relieve the operator of its responsibility to comply with any other applicable	
Decrator: Burlington Resources C	Dil & Gas Company, LP	OGRID#: 14538
Address: PO Box 4289, Farming	iton, NM 87499	· · · · · · · · · · · · · · · · · · ·
Facility or well name: San Juan 3	0-6 Unit 452S	
API Number:	30-039-27666 OCD Permit Number	er:
U/L or Qtr/Qtr: <u>E(SW/NW)</u> Sec	tion: <u>8</u> Township: <u>30N</u> Range:	6W County: Rio Arriba
Center of Proposed Design: Latitud	de:36.827487	107.492333 NAD: 🔀 1927 1983
Surface Owner: X Federal	State Private Tribal Trust or India	
Pit: Subsection F or G of 19.15.	17.11 NMAC	RCVD DEC 12 '12
Permanent Emergency Lincd Unlined String-Reinforced	orkover Cavitation P&A Liner type: Thickness mil LLDPE Factory Other Volume:	OIL CONS. DIV. DIST. 3 HDPE PVC Other
Permanent Emergency Lined Unlined String-Reinforced Liner Seams: Welded	Cavitation P&A Liner type: Thickness mil LLDPE Factory Other Volume:	DIST. 3
Permanent Emergency Lined Unlined String-Reinforced Liner Seams: Welded Welded <u>X</u> <u>Closed-loop System</u> : Subse Type of Operation: X P&A Drying Pad X Above Gro Lined Unlined Lin	Cavitation P&A Liner type: Thickness mil LLDPE Factory Other Volume:	DIST. 3 HDPE PVC Other bbl Dimensions L x W x D activities which require prior approval of a permit or
Permanent Emergency Lined Unlined String-Reinforced Liner Seams: Velded Velded X Closed-loop System: Subse Type of Operation: X P&A Drying Pad X Above Gro Lined Liner Seams: Welded Liner Seams: Welded Melded Liner Seams: Volume: Tank Construction material:	Cavitation P&A Liner type: Thickness mil LLDPE Factory Other Volume:	DIST. 3 HDPE PVC Other bbl Dimensions L x W x D activities which require prior approval of a permit or HDPE PVD Other
Permanent Emergency Lined Unlined String-Reinforced Liner Seams: Velded Velded X Closed-loop System: Subse Type of Operation: X P&A Drying Pad X Above Gro Lined Liner Seams: Welded Liner Seams: Welded	Cavitation P&A Liner type: Thickness mil LLDPE Factory Other Volume:	DIST. 3 HDPE PVC Other bbl Dimensions L x W x D activities which require prior approval of a permit or HDPE PVD Other

Fencing: Subsection D of 19.15.17.11 NMAC (Applies to permanent pit, 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 <u>Netting:</u> 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 X Signed in compliance with 19.15.3.103 NMAC		
9 <u>Administrative Approvals and Exceptions:</u> Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance. <i>Please check a bax if one or more of the following is requested, if not leave blank:</i> Administrative approval(s): Requests must be submitted to the appropriate division district of the Santa Fe Environmental Bureau office for cons (Fencing/BGT Liner) Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.	ideration of ap	proval.
¹⁰ <u>Siting Criteria (regarding permitting)</u> : 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. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	Yes	No
 Within 300 feet of a continuously flowing watercourse, or 200 feet of any other watercourse, 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 fect from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to temporary, emergency, or cavitation pits and below-grade tanks)	☐ Yes ☐NA	No
- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image		
Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applied to permanent pits)	Yes NA	No
- Visual inspection (certification) of the proposed site; Aerial photo; Satellite image Within 500 horizonal 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.	Yes	No
- NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site.		
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	Ycs	No

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Temporary Pits, Emergency Pits and Below-grade Tanks Permit Application Attachment Checklist: Su	bsection 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 bo	x, that the documents are attached.	
Hydrogcologic 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		
Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 N	MAC	
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 requirer 19.15.17.9 NMAC and 19.15.17.13 NMAC	nents of Subsection C of	
	Permit	
12		
<u>Closed-loop Systems Permit Application Attachment Checklist:</u> 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		
Siting Criteria Compliance Demonstrations (only for on-site closure) - based upon the appropriate require		
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 requirer NMAC and 19.15.17.13 NMAC	nents of Subsection C of 19.15.17.9	
Previously Approved Design (attach copy of design) API		
Previously Approved Operating and Maintenance Plan API		
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 (I) of Subsection B of 19.15.17.9 NN		
Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 N		
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 N	IMAC	
Nuisance or Hazardous Odors, including H2S, 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 19.1	5.17.13 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-gra	de Tank Closed-loop System	
Alternative Proposed Closure Method: Waste Evenuation and Removal		
Proposed Closure Method: Waste Excavation and Removal		
Waste Removal (Closed-loop systems only)		
In-place Burial On-site Trench		
Alternative Closure Method (Exceptions must be submitted to the Santa Fe Envir	onmental Bureau for consideration)	
15 Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the follow	ino items must be attached to the closure abou	
<u>Please indicate, by a check mark in the box, that the documents are attached.</u>	ing news must be underted to the closure plan.	
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	f 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 NMAG	2	
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16 Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Stee		
Instructions: Please identify the facility or facilities for the disposal of liquids, drilling facilities are required.	g fluids and drift cuttings. Use alfachment if more than two	
Disposal Facility Name:	Disposal Facility Permit #:	
Disposal Facility Name:	Disposal Facility Permit #:	
Will any of the proposed closed-loop system operations and associated activiti Yes (If yes, please provide the information No	es occur on or in areas that will not be used for future	service and
Required for impacted areas which will not be used for future service and operations. Soil Backfill and Cover Design Specification - based upon the appropriate requirements of Subset Re-vegetation Plan - based upon the appropriate requirements of Subset Site Reclamation Plan - based upon the appropriate requirements of Subset	ate requirements of Subsection H of 19.15.17.13 NM/ ction I of 19.15.17.13 NMAC	AC
17 <u>Siting Criteria (Regarding on-site closure methods only:</u> 19.15.17.10 NMA Instructions: Each siting criteria requires a demonstration of compliance in the closure plan certain siting criteria may require administrative approval from the appropriate district office office for consideration of approval. Justifications and/or demonstrations of equivalency are	Recommendations of acceptable source material are provided e or may be considered an exception which must be submitted to	
Ground water is less than 50 feet below the bottom of the buried waste.		Yes No
- NM Office of the State Engineer - iWATERS database search; USGS: Data obt	ained from nearby wells	N/A
Ground water is between 50 and 100 feet below the bottom of the buried wast	•	Yes No
- NM Office of the State Engineer - iWATERS database search; USGS; Data obta	ined from nearby wells	N/A
Ground water is more than 100 feet below the bottom of the buried waste.		Yes No
- NM Office of the State Engineer - iWATERS database search; USGS; Data obta	ined from nearby wells	N/A
Within 300 feet of a continuously flowing watercourse, or 200 feet of any other signific (measured from the ordinary high-water mark).	cant watercourse or lakebed, sinkhole, or playa lake	Yes No
- Topographic map; Visual inspection (certification) of the proposed site		
Within 300 feet from a permanent residence, school, hospital, institution, or church in ' - Visual inspection (certification) of the proposed site; Aerial photo; satellite image	•.•	Yes No
		Yes No
 Within 500 horizontal feet of a private, domestic fresh water well or spring that less th purposes, or within 1000 horizontal fee of any other fresh water well or spring, in exist NM Office of the State Engineer - iWATERS database; Visual inspection (certifi Within incorporated municipal boundaries or within a defined municipal fresh water w pursuant to NMSA 1978, Section 3-27-3, as amended. 	ence at the time of the initial application. cation) of the proposed site	Yes No
 Written confirmation or verification from the municipality; Written approval obta 	ined from the municipality	
Within 500 feet of a wetland - US Fish and Wildlife Wetland Identification map; Topographic map; Visual insp	ection (certification) of the proposed site	Yes No
Within the area overlying a subsurface mine.		Yes No
- Written confirantion or verification or map from the NM EMNRD-Mining and N	fineral Division	
Within an unstable area. - Engineering measures incorporated into the design; NM Bureau of Geology & M	ineral Resources; USGS; NM Geological Society;	Yes No
Topographic map Within a 100-year floodplain. - FEMA map		Yes No
¹⁸ On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each by a check mark in the box, that the documents are attached.	of the following items must bee attached to the closu	ire plan. Please indicate,
Siting Criteria Compliance Demonstrations - based upon the appropria	re 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 I 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	n is true, accurate and complete to the best of my knowledge and belief.
Name (Print):	Title:
Signature:	Date:
e-mail address:	Telephone:
20	
OCD Approval: Permit Application (including closure	entan) X. Cløsure Rlan (only). OCD Conditions (see attachment)
	HOT Valle introduce
OCD Representative Signature:	1. V. Kluy Approval Date: 12/12/2012
Title: [GMDlianCe] Off:	OCD Permit Number:
21	
Closure Report (required within 60 days of closure comp	Dietion): Subsection K of 19.15.17.13 NMAC
Instructions: Operators are required to obtain an approved closur	re plan prior to implementing any closure activities and submitting the closure report. The closure
	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 activitie	
	X Closure Completion Date: 11/28/2012
22	
Closure Method:	
Waste Excavation and Removal	re Method Alternative Closure Method X Waste Removal (Closed-loop systems only)
If different from approved plan, please explain.	
23	
	I-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:
instructions: rease taentify the facinity or facilities for where the were utilized.	e liquids, drilling fluids and dritl cuttings were disposed. Use attachment if more than two facilities
Disposal Facility Name: Envirotech / JFJ Landfarm %	6 IEI Disposal Facility Permit Number: NM-01-0011 / NM-01-0010B
Disposal Facility Name: Basin Disposal Facility	Disposal Facility Permit Number: <u>NM-01-005</u>
	es performed on or in areas that will not be used for future service and opeartions?
Yes (If yes, please demonstrate compliane to the items be	low) X 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	
24	
	nch 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 applical	blc)
Waste Material Sampling Analytical Results (if applied	cable)
Disposal Facility Name and Permit Number	
Soil Backfilling and Cover Installation	
Re-vegetation Application Rates and Seeding Technic	que
Site Reclamation (Photo Documentation)	
On-site Closure Location: Latitude:	Longitude: NAD 1927 1983
26	
25 Operator Closure Certification:	
	th this closure report is ture, accurate and complete to the best of my knowledge and belief. I also certify that
the closure complies with all applicable closure requirements and	
Name (Print): Dollie L. Busse	7 Title: Staff Regulatory Technician
Signature:	Use Date: 12/12/12
c-mail address: dollie.l.busse@conocophillips	s.com Telephone: (505) 324-6104