District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

State of New Mexico Energy Minerals and Natural Resources

> Department Oil Conservation Division 1220 South St. Francis Dr.

July 21, 2008 For temporary pits, closed-loop sytems, and below-grade

Form C-144

tanks, submit to the appropriate NMOCD District Office.

| 1000 Rio Brazos Rd., District IV                                    | Aztec, NM 87410          | Santa Fe, N  |  | For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the   |
|---|--------------------------|--|--|--|
| 1220 S. St. Francis Dr.   | ., Santa Fe, NM 8750     |  |  | appropriate NMOCD District Office.   |
|   | 15                       | Pit, Closed-Loop Syste   |  |  |
|   | Prop                     | oosed Alternative Method   | d Permit or Cl                                   | osure Plan Application   |
| <b>'</b> た。   | Type of action:          | · ·  | -  | tank, or proposed alternative method   |
| ,   |                          | =  | · ·  | e tank, or proposed alternative method   |
|   |                          | Modification to an existing p                                      |  | sitted or non-nonwritted nit, alogad loop gretom   |
|   |                          | below-grade tank, or propose                                       |  | nitted or non-permitted pit, closed-loop system,<br>d  |
| Please I<br>environme   | be advised that approval | of this request does not relieve the operator of                   | of liability should operation                    | loop system, below-grade tank or alternative request in pollution of surface water, ground water or the ble governmental authority's rules, regulations or ordinances. |
| 1<br>Operator: Burlin   | gton Resources (         | Oil & Gas Company, LP  |  | OGRID#: 14538  |
| Address: PO Bo  | x 4289, Farming          | ton, NM 87499  |  |  |
| Facility or well na   | me: WM HANI              | LEY 1  |  |  |
| API Number:   | •                        | 30-045-08346   | OCD Permit Numb                                  | per:   |
| U/L or Qtr/Qtr:   | F(SE/NW) Sect            |  | N Range:   | 10W County: San Juan   |
| Center of Propose   |                          |  | Longitude:                                       | 107.9278 °W NAD: X 1927 1983   |
| Surface Owner:  | X Federal                | State Private  | Tribal Trust or Indi                             | an Allotment   |
| Pit: Subsect Temporary: Permanent Lined String-Reinfor Liner Seams: | Emergency Unlined        | orkover<br>Cavitation P&A  | nil LLDPE Volume:                                | RCVD JAN 28'14 OIL CONS. DIV. DIST. 3  HDPE PVC Other x D  |
| 3 X Closed-loo Type of Operation                                    |                          | ction H of 19.15.17.11 NMAC  Drilling a new well Workove notice of | •  | to activities which require prior approval of a permit or  |
| Drying Pad Lined Liner Seams:                                       | Unlined Lin              | ound Steel Tanks   |  | HDPE PVD Other   |
| Volume: Tank Constructio Secondary con Visible side                 |                          | Visible sidewalls only   | liner, 6-inch lift and au<br>]Other<br>VC ]Other | utomatic overflow shut-off   |
| 5 Alternative   |                          |  |  | ronmental Bureau office for consideration of approval.   |

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| 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  |                         |  |  |  |  |
|--|-------------------------|--|--|--|--|
| 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)   |                         |  |  |  |  |
| 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  |                         |  |  |  |  |
| 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 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.   | sideration 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. 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 feet 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 No                  |  |  |  |  |
| <ul> <li>Visual inspection (certification) of the proposed site; Aerial photo; Satellite image</li> <li>Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.</li> <li>(Applied to permanent pits)</li> <li>Visual inspection (certification) of the proposed site; Aerial photo; Satellite image</li> </ul>  | Yes No                  |  |  |  |  |
| 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                  |  |  |  |  |
| <ul> <li>NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site.</li> <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</li> <li>Written confirmation or verification from the municipality: Written approval obtained from the municipality</li> </ul>   | 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  Within an appetable area.   | Yes No                  |  |  |  |  |
| <ul> <li>Within an unstable area.</li> <li>Engineering measures incorporated into the design; NM Bureau of Geology &amp; Mineral Resources; USGS; NM Geological Society; Topographic map</li> <li>Within a 100-year floodplain</li> <li>FEMA map</li> </ul>  | Yes No                  |  |  |  |  |

| 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  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 NMAC  Design 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  or Permit   |
| 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  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 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 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 19.15.17.13 NMAC |
| 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 Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for consideration)   |
| 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 G of 19.15.17.13 NMAC   |

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| Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Ste Instructions: Please identify the facility or facilities for the disposal of liquids, drilling   | el Tanks or Haul-off Bins Only: (19.15.17.13.D NMA  | C)                 |  |  |  |  |
|--|---|--------------------|--|--|--|--|
| facilities are required.   | pulas and arm cultings. Ose andenment ij more man iw  | ·0                 |  |  |  |  |
|  | sposal Facility Permit #:   |                    |  |  |  |  |
| -  | sposal Facility Permit #:   |                    |  |  |  |  |
| 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  Yes (If yes, please provide the information No   |   |                    |  |  |  |  |
| Required for impacted areas which will not be used for future service and operations:  Soil Backfill and Cover Design Specification - based upon the appropriate Re-vegetation Plan - based upon the appropriate requirements of Subsect Site Reclamation Plan - based upon the appropriate requirements of Subsect  | ion I of 19.15.17.13 NMAC   | AC                 |  |  |  |  |
| 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. Receptain siting criteria may require administrative approval from the appropriate district office or the for consideration of approval. Justifications and/or demonstrations of equivalency are required. | ommendations of acceptable source material are provided belo<br>nay be considered an exception which must be submitted to the |                    |  |  |  |  |
| 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 obta   | ined from nearby wells  | N/A                |  |  |  |  |
| Ground water is between 50 and 100 feet below the bottom of the buried waste   |   | Yes No             |  |  |  |  |
| - NM Office of the State Engineer - iWATERS database search; USGS; Data obtain   | ned 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 obtain   | ned from nearby wells   | □N/A               |  |  |  |  |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other signific lake (measured from the ordinary high-water mark).  - Topographic map; Visual inspection (certification) of the proposed site   | ant watercourse or lakebed, sinkhole, or playa  | Yes No             |  |  |  |  |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in e<br>- 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 that watering purposes, or within 1000 horizontal fee of any other fresh water well or spring application.  | in five households use for domestic or stock  | Yes No             |  |  |  |  |
| - NM Office of the State Engineer - iWATERS database; Visual inspection (certific Within incorporated municipal boundaries or within a defined municipal fresh water wadopted pursuant to NMSA 1978, Section 3-27-3, as amended.   | ell field covered under a municipal ordinance   | Yes No             |  |  |  |  |
| <ul> <li>Written confirmation or verification from the municipality; Written approval obta</li> <li>Within 500 feet of a wetland</li> </ul>  | thee from the municipality  | Yes No             |  |  |  |  |
| - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site   |   |                    |  |  |  |  |
| Within the area overlying a subsurface mine.  - Written confirmation or verification or map from the NM EMNRD-Mining and M.  | Aineral Division  | ∐Yes ∐No           |  |  |  |  |
| Within an unstable area.   |   | Yes No             |  |  |  |  |
| <ul> <li>Engineering measures incorporated into the design; NM Bureau of Geology &amp; Mi<br/>Society; Topographic map</li> </ul>  | neral Resources; USGS; NM Geological  |                    |  |  |  |  |
| Within a 100-year floodplain FEMA map  |   | Yes No             |  |  |  |  |
| On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of indicate, by a check mark in the box, that the documents are attached.  | of the following items must bee attached to the clos  | sure plan. Please  |  |  |  |  |
| Siting Criteria Compliance Demonstrations - based upon the appropriate   | requirements of 19.15.17.10 NMAC  | ·                  |  |  |  |  |
| Proof of Surface Owner Notice - based upon the appropriate requiremen  | ts of Subsection F of 19.15.17.13 NMAC  |                    |  |  |  |  |
| Construction/Design Plan of Burial Trench (if applicable) based upon the   | e appropriate requirements of 19.15.17.11 NMAC  |                    |  |  |  |  |
| Construction/Design Plan of Temporary Pit (for in place burial of a drying Protocols and Procedures - based upon the appropriate requirements of 1   |   | f 19.15.17.11 NMAC |  |  |  |  |
| Confirmation Sampling Plan (if applicable) - based upon the appropriate  | requirements of Subsection F of 19.15.17.13 NMA   | С                  |  |  |  |  |
| Waste Material Sampling Plan - based upon the appropriate requirement  | s 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  |   |                    |  |  |  |  |

| 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:   |
| OCD Approval: Permit Application (including closure plan) Closure Plan (only) OCD Conditions (see attachment)  OCD Representative Signature: Approval Date: 1/3/2014  Title: OCD Permit Number:  |
| 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.  X Closure Completion Date: 1/16/2014   |
| Closure Method:  Waste Excavation and Removal On-site Closure Method Alternative Closure Method X Waste Removal (Closed-loop systems only)  If different from approved plan, please explain.   |
| 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: Envirotech / JFJ Landfarm % IEI Disposal Facility Permit Number: MM-01-0011 / NM-01-0010B  Disposal Facility Name: Basin Disposal Facility Disposal Facility Permit Number: NM-01-005  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 compliane to the items below) X No (Original Approved Drying Pad was not utilized for this location)  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 |
| 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 (if applicable)  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 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 conditions specified in the approved closure plan.  |
| Name (Print):  |
| Signature: Date: 1/27/2014   |
| e-mail address: Denise Journey@conoconbillins.com Telenhone: 505-326-9556  |