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

District II 1301 W. Grand Avenue, Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Road, Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Department Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	<ul> <li>For temporary pits, closed-loop systems, and below-grade tanks, submit to the appropriate NMOCD District Office.</li> <li>For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.</li> </ul>
Pit, Clo	osed-Loop System, Below-Gra	ide Tank, or
Proposed Alterr	native Method Permit or Closu	are Plan Application
Closure	f a pit, closed-loop system, below-grade ta of a pit, closed-loop system, below-grade ation to an existing permit plan only submitted for an existing permit al alternative method	
Instructions: Please submit one application	on (Form C-144) per individual pit, closed-loo	p system, below-grade tank or alternative request
Please be advised that approval of this request does not r environment. Nor does approval relieve the operator of	elieve the operator of liability should operations r its responsibility to comply with any other applica	result in pollution of surface water, ground water or the able governmental authority's rules, regulations or ordinances.
1. Operator: <u>WPX ENERGY PRODUCTION C</u>	OMPANY, LLC	OGRID #:120782
Address: PO Box 640	Aztec, NM 87410	
Facility or well name: ROS	SA UNIT #017B	
API Number: <u>3003926971</u>		
Section <u>20J</u> Township <u>31</u>		
Latitude: <u>36.8821</u> Longitude	<u>107.385</u> NAD: <u>1983</u> Surface C	Owner:FEDERAL
2.		
<b><u>Pit</u>:</b> Subsection F or G of 19.15.17.11 NMAC		RCVD APR 11'14
Temporary: Drilling Workover		OIL CONS. DIV.
Permanent Emergency Cavitation P&     Lined Unlined Liner type: Thickness		DIST. 3
String-Reinforced		
Liner Seams: Welded Factory Other	Volume:	bbl Dimensions: L x W x D
Closed-loop System: Subsection H of 19.15.1	7.11 NMAC	
Type of Operation: P&A Drilling a new wel intent)	1 🗌 Workover or Drilling (Applies to activitie	es which require prior approval of a permit or notice of
Drying Pad 🔲 Above Ground Steel Tanks 🗌	Haul-off Bins 🔲 Other	
Lined 🗌 Unlined Liner type: Thickness	mil 🔲 LLDPE 🛄 HDPE 🛄 PV	/C [] Other
Liner Seams: Welded Factory Other		
4. Solution 1, 510 1517 1	1 ND(4/)	
Below-grade tank: Subsection I of 19.15.17.1		ODUCED WATER
Tank Construction material:   FIBERG     Secondary containment with leak detection		
Liner type: Thickness mil [] HDF		
s. Alternative Method:		

Form C-144 WPX Closure Plan

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

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

Screen INetting Other

9

10.

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

Signs: Subsection C of 19.15.17.11 NMAC

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

Signed in compliance with 19.15.3.103 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 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.

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 accept	table source
material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the approp	oriate district
office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of ap	proval.
Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to dryin	ng pads or
above-grade tanks associated with a closed-loop system.	

<ul> <li>Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank.</li> <li>NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells</li> </ul>	Yes 🗍 No
<ul> <li>Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).</li> <li>Topographic map; Visual inspection (certification) of the proposed site</li> </ul>	Yes 🗌 No
<ul> <li>Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.</li> <li>(Applies to temporary, emergency, or cavitation pits and below-grade tanks)</li> <li>Visual inspection (certification) of the proposed site; Aerial photo; Satellite image</li> </ul>	Yes No
<ul> <li>Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to permanent pits)</li> <li>Visual inspection (certification) of the proposed site; Aerial photo; Satellite image</li> </ul>	Yes No
<ul> <li>Within 500 horizontal feet of a 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.</li> <li>NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site</li> </ul>	Yes 🗌 No
<ul> <li>Within 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
<ul> <li>Within 500 feet of a wetland.</li> <li>US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site</li> </ul>	🗌 Yes 🗌 No
<ul> <li>Within the area overlying a subsurface mine.</li> <li>Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division</li> </ul>	🗌 Yes 🗌 No
<ul> <li>Within an unstable area.</li> <li>Engineering measures incorporated into the design; NM Bureau of Geology &amp; Mineral Resources; USGS; NM Geological Society; Topographic map</li> </ul>	🗌 Yes 🗌 No
Within a 100-year floodplain. - FEMA map	🗌 Yes 🗌 No

<u>Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment C</u> Instructions: Each of the following items must be attached to the application. Please indicate, attached.	by a check mark in the box, that the documents are
<ul> <li>Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4</li> <li>Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (4</li> <li>Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19</li> <li>Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC</li> </ul>	ragraph (2) of Subsection B of 19,15,17,9 NMAC
<ul> <li>Design 1 and based upon the appropriate requirements of 19.15.17.11 NMAC</li> <li>Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12</li> <li>Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate 19.15.17.13 NMAC</li> </ul>	NMAC riate requirements of Subsection C of 19.15.17.9 NMAC
Previously Approved Design (attach copy of design) API Number:	or Permit Number:
12.	
<u>Closed-loop Systems Permit Application Attachment Checklist</u> : Subsection B of 19.15.17.9 Instructions: Each of the following items must be attached to the application. Please indicate, attached.	by a check mark in the box, that the documents are
Geologic and Hydrogeologic Data (only for on-site closure) - based upon the requirements Siting Criteria Compliance Demonstrations (only for on-site closure) - based upon the appr Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC	opriate requirements of 19.15.17.10 NMAC
Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the approp and 19.15.17.13 NMAC	
Previously Approved Design (attach copy of design) API Number:	
Previously Approved Operating and Maintenance Plan API Number:	
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, attached.         Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 1         Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19         Climatological Factors Assessment         Certified Engineering Design Plans - based upon the appropriate requirements of 19.15.17.1         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 requirement         Quality Control/Quality Assurance Construction and Installation Plan         Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12         Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 1         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 NM	9.15.17.9 NMAC 9.15.17.10 NMAC 11 NMAC of 19.15.17.11 NMAC nts of 19.15.17.11 NMAC NMAC 9.15.17.11 NMAC
<sup>14.</sup> Proposed Closure: 19.15.17.13 NMAC	
Instructions: Please complete the applicable boxes, Boxes 14 through 18, in regards to the prop	
Type: Drilling Workover Emergency Cavitation P&A Permanent Pit Alternative	Below-grade Tank 🔲 Closed-loop System
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 I On-site Trench Burial Alternative Closure Method (Exceptions must be submitted to the	Santa Fe Environmental Bureau for consideration)
<ul> <li><sup>15.</sup> Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: closure plan. Please indicate, by a check mark in the box, that the documents are attached.</li> <li>Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Supposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings)</li> <li>Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.1</li> <li>Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.</li> </ul>	Each of the following items must be attached to the ubsection F of 19.15.17.13 NMAC f Subsection H of 19.15.17.13 NMAC 3 NMAC

<sup>16.</sup> <u>Waste Removal Closure For Closed-loop Systems That Utilize Above Ground S</u> Instructions: Please indentify the facility or facilities for the disposal of liquids, a facilities are required.	Steel Tanks or Haul-off Bins Only: (19.15.17.13.1 rilling fluids and drill cuttings. Use attachment if	D NMAC) more than two
	Disposal Facility Permit Number:	
	Disposal Facility Permit Number:	
Will any of the proposed closed-loop system operations and associated activities occ Yes (If yes, please provide the information below) No		·
Required for impacted areas which will not be used for future service and operation Soil Backfill and Cover Design Specifications based upon the appropriate Re-vegetation Plan - based upon the appropriate requirements of Subsection P Site Reclamation Plan - based upon the appropriate requirements of Subsection	requirements of Subsection H of 19.15.17.13 NMA of 19.15.17.13 NMAC	2
<sup>17.</sup> Siting Criteria (regarding on-site closure methods only): 19.15.17.10 NMAC Instructions: Each siting criteria requires a demonstration of compliance in the c provided below. Requests regarding changes to certain siting criteria may require considered an exception which must be submitted to the Santa Fe Environmental demonstrations of equivalency are required. Please refer to 19.15.17.10 NMAC for	administrative approval from the appropriate dista Bureau office for consideration of approval. Justi	rict office or may be
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 sign lake (measured from the ordinary high-water mark). - Topographic map; Visual inspection (certification) of the proposed site	ificant watercourse or lakebed, sinkhole, or playa	🗌 Yes 🛛 No
Within 300 feet from a permanent residence, school, hospital, institution, or church i - Visual inspection (certification) of the proposed site; Aerial photo; Satellite		🗌 Yes 🛛 No
Within 500 horizontal feet of a private, domestic fresh water well or spring that less watering purposes, or within 1000 horizontal feet of any other fresh water well or sp - NM Office of the State Engineer - iWATERS database; Visual inspection (c	ring, in existence at the time of initial application.	🗌 Yes 🛛 No
<ul> <li>Within incorporated municipal boundaries or within a defined municipal fresh water adopted pursuant to NMSA 1978, Section 3-27-3, as amended.</li> <li>Written confirmation or verification from the municipality; Written approval</li> </ul>	-	🗌 Yes 🛛 No
<ul> <li>Within 500 feet of a wetland.</li> <li>US Fish and Wildlife Wetland Identification map; Topographic map; Visual</li> </ul>	inspection (certification) of the proposed site	🗌 Yes 🛛 No
<ul><li>Within the area overlying a subsurface mine.</li><li>Written confirmation or verification or map from the NM EMNRD-Mining a</li></ul>	and Mineral Division	🗌 Yes 🕅 No
<ul> <li>Within an unstable area.</li> <li>Engineering measures incorporated into the design; NM Bureau of Geology Society; Topographic map</li> </ul>	& Mineral Resources; USGS; NM Geological	🗋 Yes 🛛 No
Within a 100-year floodplain. - FEMA map		🗌 Yes 🛛 No
<ul> <li>18.</li> <li>On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the by a check mark in the box, that the documents are attached.</li> <li>Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of S</li> <li>Construction/Design Plan of Burial Trench (if applicable) based upon the appropriate requirements of a drying part Construction/Design Plan of Temporary Pit (for in-place burial of a drying part Protocols and Procedures - based upon the appropriate requirements of 19.15.</li> <li>Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of S</li> <li>Disposal Facility Name and Permit Number (for liquids, drilling fluids and driver for head of the provide the provide the provide of the provide thead the provide thead the provide the provide the provide the pr</li></ul>	rements of 19.15.17.10 NMAC Subsection F of 19.15.17.13 NMAC ropriate requirements of 19.15.17.11 NMAC d) - based upon the appropriate requirements of 19.1 17.13 NMAC rements of Subsection F of 19.15.17.13 NMAC ubsection F of 19.15.17.13 NMAC	5.17.11 NMAC

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

I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan. Name (Print): Title:	<b>Operator Application Certification:</b>	a accurate and comple	to to the best of your law		-6
Signiture:					.ei.
e-muil addres:       Vanesas Fields@wpxenergy.com       Telephone:       505-333-1880         ************************************					
<sup>10</sup> OD Approval:       Permit Application (including closure plant 2 Closure Plan (only)       OCD Conditions (see attachment)         OCD Representative Signature:					
QCD Apprendit       Permit Application (inclustify closure plant [2] Closure Plan (only)       OCD Conditions (see attachment)         Approval Date:	e-mail address: Vanessa.Fields@wpxenergy.com	Tele	phone:	505-333-1880	
THE:       OCD Permit Number:         """       Closure Report (required within 60 days of closure completion):       Subsection K of 19.15.17.13 NMAC         Instructions:       Openators are required to blatin 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.         """"""""""""""""""""""""""""""""""""		losure Plan (only)	OCD Conditions (see	attachment)	
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 must be an completed.	OCD Representative Signature:		Approval	Date: <u>576/</u> 2	2014
Closure Report (required within 60 days of closure completion):       Subscription:       Subscre:       Subscription: <t< td=""><td>Title: <u>Compliance</u> Office ()</td><td>OCD Permit</td><td>Number:</td><td></td><td></td></t<>	Title: <u>Compliance</u> Office ()	OCD Permit	Number:		
21       Closure Method:       On-Site Closure Method       Alternative Closure Method       Waste Removal (Closed-loop systems only)         16       If different from approved plan, please explain.         23       Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: Instructions: Please indentify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than two facilities were utilized.         20       Disposal Facility Name:	<u>Closure Report (required within 60 days of closure completion)</u> : Sub Instructions: Operators are required to obtain an approved closure plan The closure report is required to be submitted to the division within 60 d	n prior to implementing lays of the completion of the closure activities	g any closure activities of the closure activitie have been completed.	s. Please do not	the closure report. complete this
□ Maste Excavation and Removal       □ On-Site Closure Method       □ Alternative Closure Method       □ Waste Removal (Closed-loop systems only)         □ If different from approved plan, please explain.       □         □ Maste Excavation and Removal       □ On-Site Closure For Closed-loop Systems That Ufilize Above Ground Steel Tanks or Haul-off Bins Only:         □ Instructions:       □	22.		·		
Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Alowe Ground Steel Tanks or Haul-off Bins Only:         Instructions: Plause indentify 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:	Waste Excavation and Removal On-Site Closure Method	Alternative Closure M	ethod 🗌 Waste Ren	noval (Closed-lo	op systems only)
Disposal Facility Name:	<u>Closure Report Regarding Waste Removal Closure For Closed-loop S</u> Instructions: Please indentify the facility or facilities for where the liqu	Systems That Utilize A ids, drilling fluids and	bove Ground Steel T drill cuttings were dis	anks or Haul-of posed. Use attac	<u>f Bins Only</u> : hment if more than
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:       No         Site Reclamation (Photo Documentation)       Soil Backfilling and Cover Installation         Re-vegetation Application Rates and Seeding Technique					
□ 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         24.         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 Complex with all applicable closure requirements and conditions specified in the approved closure plan.         Name (Print):					
Site Reclamation (Photo Documentation)         Soil Backfilling and Cover Installation         Re-vegetation Application Rates and Seeding Technique         24.         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 (required for on-site closure)         Disposal Facility Name and Permit Number         Site Reclamation (Photo Documentation)         On-site Closure Location:         Latitude       Longitude         NAD:       [1927]         9         Perior Closure Certification:         Intereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief.         1 also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.         Name (Print):			<i>ll not</i> be used for futur	e service and ope	erations?
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         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. 1 also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.         Name (Print):	<ul> <li>Site Reclamation (Photo Documentation)</li> <li>Soil Backfilling and Cover Installation</li> </ul>	operations:			
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): Title: Signature: Date:	Closure Report Attachment Checklist: Instructions: Each of the follo 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) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation)	losure)		-	
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):					
Signature: Date:	Operator Closure Certification: I hereby certify that the information and attachments submitted with this c	closure report is true, acc requirements and condit	curate and complete to ions specified in the ap	the best of my k pproved closure p	nowledge and Ian.
	Name (Print):	Title:			
e-mail address: Telephone:	Signature:	Date:			
	e-mail address:	Telephon	e:		

### WPX Energy Production Co., LLC San Juan Basin: New Mexico Assets

Below-Grade Tank Removal Closure Plan

In accordance with Rule 19.15.17.13 NMAC, the following plan describes the general closure requirements of below-grade tanks (BGT) on WPX Production Co, LLC (WPX) locations in the San Juan Basin of New Mexico. This is WPX's standard closure procedure for all BGTs regulated under Rule 19.15.17 NMAC and operated by WPX. For those closures which do not conform to this standard closure plan, a separate well/pit specific closure plan will be developed and utilized.

# **Closure Conditions and Timing:**

Pursuant to 19.15.17.13 (A) NMAC, WPX will initiate closure of any BGT should any one of these conditions occur:

- The Division requires closure because of imminent danger to fresh water, public health or the environment.
- The integrity of the BGT fails. Notification will be within 48 hours to the Division and closure will be schedule as specified in 19.15.17.12 (A)(5) NMAC.
- WPX chooses to take the BGT out-of-service due to operational needs. Closure under these conditions will be closed within 60 days of cessation of the BGT's operation.
- BGTs installed prior to June 16, 2008 that do not meet the requirements under 19.15.17.11.1(6) NMAC and WPX chooses not to retrofit or upgrade. Closure under these conditions will be completed within five years (by June 16, 2013).

## General Plan Requirements:

- 1. Prior to initiating any BGT Closure except in the case of an emergency, WPX will review County Tax Records for the current surface owner of record. The surface owner of record will be notified of the intent to closure the BGT by certified mail and a copy of this notification will be included in the closure report. In the case of an emergency, the surface owner of record will be notified as soon as practical.
- 2. Notice of Closure will be given to the Aztec District office between 72 hours and one week of the scheduled closure via email or phone. The notification of closure will include the following:
  - a. Operators Name (WPX)
  - b. Well Name and API Number
  - c. Location (USTR)
- 3. All piping will be rerouted to an alternative produced water storage/disposal location (e.g. surface tanks, temporary frac tank,). The well will be temporarily shutin until the rerouting is completed.
- 4. All produced water will be removed from the BGT following discharge-pipe rerouting. Produced water will be disposed at one of the following NMOCD approved facilities depending on the proximity of the BGT site: Rosa Unit SWD #1 (Order: SWD-916, API: 30-039-27055), Rosa Unit #94 (Order: SWD-3RP-1003-0, API: 30-039-23035), Jillson Fed. SWD #001 (Order: R10168/R10168A, API: 30-039-25465), Middle Mesa SWD #001 (Order: SWD-350-0, API: 30-045-27004) and/or Basin Disposal (Permit: NM-01-0005).
- 5. Solids and sludge's will be shoveled and /or vacuumed out for disposal at Envirotech (Permit Number NM-01-0011).
- 6. WPX will obtain prior approval from NMOCD to dispose, recycle, reuse, or reclaim the BGT and provide documentation of the disposition of the BGT in the closure report. Steel materials will be recycled or reused as approved by the Division. Fiberglass tanks will be empty, cut up or shredded, and EPA cleaned for disposal as solid waste. Liners materials will be cleaned without soils or contaminated material for disposal as

solid waste. Fiberglass tanks and liner materials will meet the conditions of paragraph 1 subsection D of 19.15.9.712 NMAC. Disposal will be at a licensed disposal facility, presently San Juan Regional Landfill operated by Waste Management under NMED Permit SWM-052426.

- 7. Any equipment associated with the BGT that is no longer required for some other purpose, following the closure will be removed from the location.
- 8. Following removal of the tank and any liner material, a five-point composite sample will be taken of the excavation and tested per 19.15.17.13(E)(4) NMAC as identified in Table 1. Grab samples will be collected from any area that is wet, discolored or showing other evidence of a release. Results will be report to the Division following receipt from the lab on Form C-141.

Components	Testing Methods	Closure Limits (mg/Kg)	
Benzene	EPA SW-846 Method 8021B or 8260B	0.2	
BTEX	EPA SW-846 Method 8021B or 8260B	50	
TPH	EPA SW-846 Method 418.1(1)	100	
Chlorides	EPA SW-846 Method 300.1(1)	250(2)	

### Table 1: Closure Criteria for BGTs

<sup>(1)</sup> Method modified for solid waste.

<sup>(2)</sup> If background concentration of Chlorides greater than 250 mg/Kg, then higher concentration will be used for closure.

- 9. If the Division and/or WPX determine there is a release, WPX will comply with 19.15.3.116 NMAC and 19.15.1.19 NMAC.
- 10. Upon completion of the tank removal, the excavation will be backfilled with nonwaste earthen material compacted and covered with a minimum of one foot of top soil or background thickness whichever is greater and to existing grade. The surface will be recontoured to match the native grade and prevent ponding.
- 11. For those portions of the former pit area no longer required for production activities, WPX will seed the disturbed areas the first growing season after the pit is covered. Seeding will be accomplished via drilling on the contour whenever practical, or by other Division-approved methods. Vegetative cover will equal 70% of the native perennial vegetative cover (un-impacted) consisting of at least three native plant species, including at least one grass, but not including noxious weeds, and maintained that cover through two successive growing seasons. Repeat seeding or planting will be continued until successful vegetative growth occurs. Note: If a surface owner agreement requires reseeding or other surface restoration that do not meet the revegetation requirements of 19.15.17.13.1 NMAC then WPX will submit the proposed alternative with written documentation that the surface owner agrees to the alternative, for Division approval.
- 12. For those portions of the former pit area required for production activities, reseeding will be done at well abandonment, and following the procedure noted above.

## Closure Report:

All closure activities will include proper documentation and will be submitted to OCD within 60 days of the BGT closure on a Closure Report using Division Form C-144. The Report will include the following:

- Proof of Closure Notice (surface owner & NMOCD)
- Backfilling & Cover Installation
- Site Diagram with coordinates
- Available Inspection reports

- Confirmation Sampling Analytical Results
- Disposal Facility Name(s) and Permit Number(s)
- Application Rate & Seeding techniques
- Photo Documentation of Reclamation