District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., 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 Revised June 6, 2013

For temporary pits, below-grade tanks, and multi-well fluid management pits, submit to the appropriate NMOCD District Office.

For permanent pits submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

| Pit, Below-Grade Tank, or                                                                                                                                                                                                                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Pit, Below-Grade Tank, or  Proposed Alternative Method Permit or Closure Plan Application  Type of action: Below grade tank registration  Pit, Below-Grade Tank, or  Proposed Alternative Method Permit or Closure Plan Application  Type of action: Below grade tank registration                                                              |
| Permit of a pit or proposed alternative method                                                                                                                                                                                                                                                                                                  |
| US- 23871 ☐ Permit of a pit of proposed alternative method ☐ Closure of a pit, below-grade tank, or proposed alternative method ☐ Modification to an existing permit/or registration ☐ MAY 19 2015                                                                                                                                              |
| Closure plan only submitted for an existing permitted or non-permitted pit, below-grade tank, or proposed alternative method                                                                                                                                                                                                                    |
| Instructions: Please submit one application (Form C-144) per individual pit, below-grade tank or 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. |
| Operator: BP America Production CompanyOGRID #:778                                                                                                                                                                                                                                                                                              |
| Address:200 Energy Court, Farmington, NM 87401                                                                                                                                                                                                                                                                                                  |
| Facility or well name: Heaton LS 8A                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                 |
| API Number:3004523871 OCD Permit Number:                                                                                                                                                                                                                                                                                                        |
| U/L or Qtr/QtrJSection30Township31NRange11WCounty:San Juan                                                                                                                                                                                                                                                                                      |
| Center of Proposed Design: Latitude36.86777 Longitude108.028188 NAD: □1927 ☑ 1983                                                                                                                                                                                                                                                               |
| Surface Owner:  Federal  State  Private Tribal Trust or Indian Allotment                                                                                                                                                                                                                                                                        |
| 2.  Pit: Subsection F, G or J of 19.15.17.11 NMAC                                                                                                                                                                                                                                                                                               |
| Temporary: Drilling Workover                                                                                                                                                                                                                                                                                                                    |
| ☐ Permanent ☐ Emergency ☐ Cavitation ☐ P&A ☐ Multi-Well Fluid Management Low Chloride Drilling Fluid ☐ yes ☐ no                                                                                                                                                                                                                                 |
| Lined Unlined Liner type: Thicknessmil LLDPE HDPE PVC Other                                                                                                                                                                                                                                                                                     |
| ☐ String-Reinforced                                                                                                                                                                                                                                                                                                                             |
| Liner Seams: Welded Factory Other Volume: bbl Dimensions: L x W x D                                                                                                                                                                                                                                                                             |
| 3.                                                                                                                                                                                                                                                                                                                                              |
| ∑ Below-grade tank: Subsection I of 19.15.17.11 NMAC        Tank A                                                                                                                                                                                                                                                                              |
| Volume:95.0bbl Type of fluid:Produced water                                                                                                                                                                                                                                                                                                     |
| Tank Construction material:Steel                                                                                                                                                                                                                                                                                                                |
| ☐ Secondary containment with leak detection ☐ Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off                                                                                                                                                                                                                             |
| ☐ Visible sidewalls and liner ☐ Visible sidewalls only ☒ Other _Double walled/double bottomed; side walls not visible                                                                                                                                                                                                                           |
| Liner type: Thicknessmil                                                                                                                                                                                                                                                                                                                        |
| 4,                                                                                                                                                                                                                                                                                                                                              |

Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

Alternative Method:

| 5.  Fencing: Subsection D of 19.15.17.11 NMAC (Applies to permanent pits, temporary pits, and below-grade tanks)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |  |  |  |  |  |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--|--|--|--|--|--|--|
| Chain link, six feet in height, two strands of barbed wire at top (Required if located within 1000 feet of a permanent residence, school, hospital, institution or church)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |  |  |  |  |  |  |  |
| ☐ Four foot height, four strands of barbed wire evenly spaced between one and four feet                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |               |  |  |  |  |  |  |  |
| Alternate. Please specify                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |  |  |  |  |  |  |  |
| 6.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |  |  |  |  |  |  |  |
| 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)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |               |  |  |  |  |  |  |  |
| 7. Signs: Subsection C of 19.15.17.11 NMAC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |  |  |  |  |  |  |  |
| 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |               |  |  |  |  |  |  |  |
| ☐ Signed in compliance with 19.15.16.8 NMAC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               |  |  |  |  |  |  |  |
| 8.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |  |  |  |  |  |  |  |
| <u>Variances and Exceptions:</u> 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:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |  |  |  |  |  |  |  |
| <ul> <li>□ Variance(s): Requests must be submitted to the appropriate division district for consideration of approval.</li> <li>□ Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |  |  |  |  |  |  |  |
| Exception(o). Requests mast be submitted to the banka re Environmental Bureau office for consideration of approval.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |               |  |  |  |  |  |  |  |
| 9. Siting Critoria (recording normitting), 10.15.17.10.NMAC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               |  |  |  |  |  |  |  |
| 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 acceptance of the compliance of the complianc | ptable source |  |  |  |  |  |  |  |
| material are provided below. Siting criteria does not apply to drying pads or above-grade tanks.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |  |  |  |  |  |  |  |
| General siting                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |  |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |  |  |  |  |  |  |  |
| Ground water is less than 25 feet below the bottom of a low chloride temporary pit or below-grade tank.  - □ NM Office of the State Engineer - iWATERS database search; □ USGS; □ Data obtained from nearby wells                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Yes No        |  |  |  |  |  |  |  |
| <u>Ground water is less than 50 feet below the bottom of a Temporary pit, permanent pit, or Multi-Well Fluid Management pit.</u> NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Yes No        |  |  |  |  |  |  |  |
| Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ☐ Yes ☐ No    |  |  |  |  |  |  |  |
| <ul> <li>adopted pursuant to NMSA 1978, Section 3-27-3, as amended. (Does not apply to below grade tanks)</li> <li>Written confirmation or verification from the municipality; Written approval obtained from the municipality</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |  |  |  |  |  |  |  |
| Within the area overlying a subsurface mine. (Does not apply to below grade tanks)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ☐ Yes ☐ No    |  |  |  |  |  |  |  |
| - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | LI TES LI NO  |  |  |  |  |  |  |  |
| <ul> <li>Within an unstable area. (Does not apply to below grade tanks)</li> <li>Engineering measures incorporated into the design; NM Bureau of Geology &amp; Mineral Resources; USGS; NM Geological Society; Topographic map</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ☐ Yes ☐ No    |  |  |  |  |  |  |  |
| Within a 100-year floodplain. (Does not apply to below grade tanks) - FEMA map                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Yes No        |  |  |  |  |  |  |  |
| Below Grade Tanks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |               |  |  |  |  |  |  |  |
| Within 100 feet of a continuously flowing watercourse, significant watercourse, lake bed, sinkhole, wetland or playa lake (measured                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ☐ Yes ☐ No    |  |  |  |  |  |  |  |
| from the ordinary high-water mark).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | L res L No    |  |  |  |  |  |  |  |
| - Topographic map; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |  |  |  |  |  |  |  |
| Within 200 horizontal feet of a spring or a fresh water well used for public or livestock consumption;.  - NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Yes No        |  |  |  |  |  |  |  |
| Temporary Pit using Low Chloride Drilling Fluid (maximum chloride content 15,000 mg/liter)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |  |  |  |  |  |  |  |
| Within 100 feet of a continuously flowing watercourse, or any other significant watercourse or within 200 feet of any lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark). (Applies to low chloride temporary pits.)  - Topographic map; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | ☐ Yes ☐ No    |  |  |  |  |  |  |  |

| Within 300 feet from a occupied permanent residence, school, hospital, institution, or church in existence at the time of initial application.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Yes No        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |
| Within 200 horizontal feet of a spring or a private, domestic fresh water well used by less than five households for domestic or stock watering purposes, or 300feet of any other fresh water well or spring, in existence at the time of the initial application.  NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                                                                                            | ☐ Yes ☐ No    |
| Within 100 feet of a wetland.  - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ☐ Yes ☐ No    |
| Temporary Pit Non-low chloride drilling fluid                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               |
| Within 300 feet of a continuously flowing watercourse, or any other significant watercourse, or within 200 feet of any lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).  - 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 spring or a private, domestic fresh water well used by less than five households for domestic or stock watering purposes, or 1000 feet of any other fresh water well or spring, in the existence at the time of the initial application;  - NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                                                                                    | ☐ Yes ☐ No    |
| Within 300 feet of a wetland.  - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ☐ Yes ☐ No    |
| Permanent Pit or Multi-Well Fluid Management Pit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |
| 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    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | L Tes L No    |
| Within 1000 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 spring or a fresh water well used for domestic or stock watering purposes, in existence at the time of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |
| initial application NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ☐ 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    |
| Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment Checklist: Subsection B of 19.15.17.9 N<br>Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the docattached.                                                                                                                                                                                                                                                                                                                                                                                                                 |               |
| 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 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. and 19.15.17.13 NMAC |               |
| Previously Approved Design (attach copy of design) API Number: or Permit Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |
| Multi-Well Fluid Management Pit Checklist: Subsection B of 19.15.17.9 NMAC  Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the dot attached.                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | cuments are   |
| Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC A List of wells with approved application for permit to drill associated with the pit. Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19 and 19.15.17.13 NMAC Hydrogeologic Pata - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC                                                                                                                                                                        | .15.17.9 NMAC |
| Hydrogeologic Data - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |
| Previously Approved Design (attach copy of design) API Number: or Permit Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |

| 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 H₂S, Prevention Plan ☐ Emergency Response Plan ☐ Oil Field Waste Stream Characterization ☐ Monitoring and Inspection Plan ☐ Erosion Control 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 Multi-well F 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | luid Management Pit |
| 14. What Franchis and Barrond Character Black Charles (10.15.17.12.) NACO Later than Franchis Charles (10.15.17.12.) NACO Later than Franchis Charles (10.15.17.12.) NACO Later than Franchis Charles (10.15.17.12.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                     |
| Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be a 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 C 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 H of 19.15.17.13 NMAC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | anacnea 10 ine      |
| 15.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                     |
| 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 sour provided below. Requests regarding changes to certain siting criteria require justifications and/or demonstrations of equivalency. P 19.15.17.10 NMAC for guidance.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                     |
| Ground water is less than 25 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 25-50 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              |
| 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<br>☐ NA  |
| Within 100 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse, lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).  - 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 300 horizontal feet of a private, domestic fresh water well or spring used for domestic or stock watering purposes, in existence at the time of initial application.  - NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Yes No              |
| Written confirmation or verification from the municipality; Written approval obtained from the municipality                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | □ Vaa □ Na          |
| Within 300 feet of a wetland.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Yes No              |
| US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ☐ Yes ☐ No          |
| Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                     |

| adopted pursuant to NMSA 1978, Section 3-27-3, as amended.  - Written confirmation or verification from the municipality; Written approval obtained from the municipality                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| written community of verification from the mannerpainty, written approval obtained from the mannerpainty                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ☐ 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                           |
| <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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | □ Vas □ Na                           |
| Within a 100-year floodplain FEMA map                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ☐ Yes ☐ No                           |
| On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan a check mark in the box, that the documents are attached.  Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC  Proof of Surface Owner Notice - based upon the appropriate requirements of Subsection E of 19.15.17.13 NMAC  Construction/Design Plan of Burial Trench (if applicable) based upon the appropriate requirements of Subsection K of 19.15.17.  Construction/Design Plan of Temporary Pit (for in-place burial of a drying pad) - based upon the appropriate requirements of 19.  Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC  Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of 19.15.17.13 NMAC  Waste Material Sampling Plan - based upon the appropriate requirements of 19.15.17.13 NMAC  Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings or in case on-site closure standards cann Soil Cover Design - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC  Re-vegetation Plan - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC | .11 NMAC<br>15.17.11 NMAC            |
| 17. 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 beli                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ief.                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                      |
| Name (Print): Title:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                      |
| Signature: Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                      |
| e-mail address: Telephone:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                      |
| 18.  OCD Approval: Permit Application (including closure plan) Closure Plan (only) OCD Conditions (see attachment)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                      |
| OCD Representative Signature: Approval Date: 6/1/2  Title: Compliance OCD Permit Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 2015                                 |
| Title: Compliance Office OCD Permit Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2015                                 |
| 19.  Closure Report (required within 60 days of closure completion): 19.15.17.13 NMAC  Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not section of the form until an approved closure plan has been obtained and the closure activities have been completed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | the closure report.                  |
| 19. Closure Report (required within 60 days of closure completion): 19.15.17.13 NMAC Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | the closure report.                  |
| 19.  Closure Report (required within 60 days of closure completion): 19.15.17.13 NMAC  Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not section of the form until an approved closure plan has been obtained and the closure activities have been completed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | the closure report.<br>complete this |

| Operator Closure Certification:                                                                                                                                       |                                                                                                                                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| I hereby certify that the information and attachments submitted with this could belief. I also certify that the closure complies with all applicable closure results. | closure report is true, accurate and complete to the best of my knowledge and requirements and conditions specified in the approved closure plan. |
| Name (Print):Jeff Peace                                                                                                                                               | Title: Field Environmental Coordinator                                                                                                            |
| Signature: Seff Poace                                                                                                                                                 | Date: _May 19, 2015                                                                                                                               |
| e-mail address:peace.jeffrey@bp.com                                                                                                                                   | Telephone:(505) 326-9479                                                                                                                          |
|                                                                                                                                                                       |                                                                                                                                                   |

#### BP AMERICA PRODUCTION COMPANY

SAN JUAN BASIN, NORTHWEST NEW MEXICO

#### BELOW-GRADE TANK CLOSURE PLAN

#### Heaton LS 8A API No. 3004523871 Unit Letter J, Section 30, T31N, R11W

This plan will address the standard protocols and procedures for closure of below-grade tanks (BGTs) on BP America Production Company (BP) well sites. As stipulated in Paragraph A of 19.15.17.13 NMAC, BP shall close a BGT within the time periods provided in 19.15.17.13 NMAC, or by an earlier date that the New Mexico Oil Conservation Division (NMOCD) requires because of imminent danger to fresh water, public health, safety or the environment. If deviations from this plan are necessary, any specific changes will be included on form C-144 and approved by the NMOCD. BP shall close an existing BGT that does not meet the requirements of Paragraphs (1) through (4) of Subsection I of 19.15.17.11 NMAC or is not included in Paragraph (5) of Subsection I of 19.15.17.11 NMAC within five years after June 16, 2008, if not retrofit with a BGT that complies with the BP NMOCD approved BGT design attached to the BP Design and Construction Plan. BP shall close an existing BGT that does not meet the requirements of Paragraphs (1) through (4) of Subsection I of 19.15.17.11 NMAC, if not previously retrofitted to comply with the BP NMOCD approve BGT Design attached to the BP Design and Construction Plan, prior to any sale or change in operator pursuant to 19.15.9.9 NMAC. BP shall close the permitted BGT within 60 days of cessation of the BGTs operation or as required by the transitional provisions of Subsection B, D, or E of 19.15.17.17 NMAC.

#### General Closure Plan

- 1. BP shall notify the surface owner by certified mail that it plans to close a BGT. Evidence of mailing of the notice to the address of the surface owner shown in the county tax records demonstrates compliance with this requirement.
  - No notice was made due to misunderstanding of the BGT notice requirements at that time.
- 2. BP shall notify the division District III office verbally or by other means at least 72 hours, but not more than one (1) week, prior to any closure operation. The notice shall include the operator's name, and the location to be closed by unit letter, section, township and range. If the BGT closure is associated with a particular well, then the notice shall also include the well's name, number and API number.
  - No notice was made due to misunderstanding of the BGT notice requirements at that time.
- 3. BP shall remove liquids and sludge from the BGT prior to implementing a closure method and dispose of the liquids and sludge in a NMOCD's division-approved facility. The facilities to be used are:
  - a. BP Crouch Mesa Landfarm, Permit NM-02-003 (Solids)
  - b. JFJ Landfarm, Permit NM-01-010(B) (Solids and Sludge)
  - c. Basin Disposal, Permit NM-01-0005 (Liquids)

- d. Envirotech Inc Soil Remediation Facility, Permit NM-01-0011 (Solids and Sludge)
- e. BP Operated E.E. Elliott SWD #1, API 30-045-27799 (Liquids)
- f. BP Operated 13 GCU SWD #1, API 30-045-28601 (Liquids)
- g. BP Operated GCU 259 SWD, API 30-045-20006 (Liquids)
- h. BP Operated GCU 306 SWD, API 30-045-24286 (Liquids)
- i. BP Operated GCU 307 SWD, API 30-045-24248 (Liquids)
- j. BP Operated GCU 328 SWD, API 30-045-24735 (Liquids)
- k. BP Operated Pritchard SWD #1, API 30-045-28351 (Liquids)

All liquids and sludge in the BGT were removed and sent to one of the above NMOCD approved facilities for disposal.

4. BP shall remove the BGT and dispose of it in a NMOCD approved facility or recycle, reuse, or reclaim it in a manner that the NMOCD approves. If a liner is present and must be disposed of it will be cleaned by scraping any soils or other attached materials on the liner to a de minimus amount and disposed at a permitted solid waste facility, pursuant to Subparagraph (m) of Paragraph (1) of Subsection C of 19.15.35.8 NMAC. Documentation as to the final disposition of the removed BGT will be provided in the final closure report.

The BGT was transported to a storage area for sale and re-use.

5. BP shall remove any on-site equipment associated with a BGT unless the equipment is required for well production.

All equipment associated with the BGT has been removed.

6. BP shall test the soils beneath the BGT to determine whether a release has occurred. BP shall collect at a minimum: a five (5) point composite sample and individual grab samples from any area that is wet, discolored or showing other evidence of a release and analyze for BTEX, TPH and chlorides. The testing methods for those constituents are as follows;

| Constituents | Testing Method                      | Release Verification | Sample  |
|--------------|-------------------------------------|----------------------|---------|
|              | 95 bbl BGT                          | (mg/Kg)              | results |
| Benzene      | US EPA Method SW-846 8021B or 8260B | 0.2                  | ND      |
| Total BTEX   | US EPA Method SW-846 8021B or 8260B | 50                   | ND      |
| TPH          | US EPA Method SW-846 418.1          | 100                  | ND      |
| Chlorides    | US EPA Method 300.0 or 4500B        | 250 or background    | ND      |

Notes: mg/Kg = milligram per kilogram, BTEX = benzene, toluene, ethylbenzene, and total xylenes, TPH = total petroleum hydrocarbons. Other EPA methods that the division approves may be applied to all constituents listed. Chloride closure standards will be determined by which ever concentration level is greatest.

Soil under the BGT was sampled and TPH, BTEX and chloride levels were below the stated limits. Sampling data is attached.

- 7. BP shall notify the division District III office of its results on form C-141. **C-141 is attached.**
- If it is determined that a release has occurred, then BP will comply with 19.15.30 NMAC and 19.15.29 NMAC, as appropriate.
   Sampling results indicate no release occurred.
- 9. If the sampling demonstrates that a release has not occurred or that any release does not exceed the concentrations specified above, then BP shall backfill the excavation, with compacted, non-waste containing, earthen material; construct a division-prescribed soil cover, re-contour and re-vegetate the location. The location will be reclaimed if it is not with in the active process area

The area under the BGT was backfilled with clean soil and is still within the active well area.

10. BP shall reclaim the BGT location and all areas associated with the BGT including associated access roads to a safe and stable condition that blends with the surrounding undisturbed area. BP shall substantially restore the impacted surface area to the condition that existed prior to oil and gas operations by placement of the soil cover as provided in Subsection H of 19.15.17.13 NMAC, re-contour the location and associated areas to a contour that approximates the original contour and blends with the surrounding topography and re-vegetate according to Subsection I of 19.15.17.13 NMAC.

The area over the BGT is still within the active well area. This area will be reclaimed when the well is plugged and abandoned as part of final reclamation.

11. The soil cover for closures where the BGT has been removed or remediated to the NMOCD's satisfaction shall consist of the background thickness of topsoil or one foot of suitable material to establish vegetation at the site, whichever is greater. The soil cover will be constructed to the site's existing grade and all practicable efforts will be made to prevent ponding of water and erosion of the cover material.

The area over the BGT is still within the active well area. This area will be reclaimed when the well is plugged and abandoned as part of final reclamation.

12. BP shall seed the disturbed area the first growing season after closure of the BGT. Seeding will be accomplished by drilling on the contour whenever practical or by other division-approved methods. Vegetative cover will be, at a minimum, 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 maintenance of that cover through two successive growing seasons. During the two growing seasons that prove viability, there shall be no artificial irrigation of the vegetation.

The area over the BGT is still within the active well area. This area will be reclaimed when the well is plugged and abandoned as part of final reclamation.

13. BP shall seed, plant and re-seed pursuant to Paragraph (3) of Subsection I of 19.15.17.13 NMAC, until the location successfully achieves the required vegetative cover.

BP will seed the area when the well is plugged and abandoned as part of final reclamation.

14. Pursuant to Paragraph (5) of Subsection I of 19.15.17.13 NMAC, BP shall notify the NMOCD when it has seeded or planted and when it successfully achieves revegetation.

BP will notify NMOCD when re-vegetation is successful.

- 15. Within 60 days of closure completion, BP shall submit a closure report on NMOCD's form C-144, and will include the following;
  - a. proof of closure notification (surface owner and NMOCD)
  - b. sampling analytical reports; information required by 19.15.17 NMAC;
  - c. disposal facility name and permit number
  - d. details on back-filling, capping, covering, and where applicable re-vegetation application rates and seeding techniques and
  - e. site reclamation, photo documentation.

    Closure report on C-144 form is included.
- 16. BP shall certify that all information in the report and attachments is accurate, truthful, and compliant with all applicable closure requirements and conditions specified in the approved closure plan.

Certification section of C-144 has been completed.

• District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., 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

Form C-141
Revised August 8, 2011
Submit 1 Copy to appropriate District Office in

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505 Submit 1 Copy to appropriate District Office in accordance with 19.15.29 NMAC.

| Release Notification and Corrective Action                                                                                                                                                                   |                                                        |                                                     |                                                    |                                                               |                                     |                                           |                                                                                           |                                        |                                             |                                             |                               |                                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|-----------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------|-------------------------------------|-------------------------------------------|-------------------------------------------------------------------------------------------|----------------------------------------|---------------------------------------------|---------------------------------------------|-------------------------------|-----------------------------------|
|                                                                                                                                                                                                              |                                                        |                                                     |                                                    |                                                               |                                     | OPERATOR                                  |                                                                                           |                                        |                                             |                                             |                               | Final Report                      |
| Name of Co                                                                                                                                                                                                   |                                                        |                                                     |                                                    |                                                               |                                     | Contact: Jeff Peace                       |                                                                                           |                                        |                                             |                                             |                               |                                   |
|                                                                                                                                                                                                              |                                                        | Court, Farm                                         | ngton, N                                           | M 87401                                                       |                                     | Telephone No.: 505-326-9479               |                                                                                           |                                        |                                             |                                             |                               |                                   |
| Facility Nar                                                                                                                                                                                                 | me: Heato                                              | n LS 8A                                             |                                                    |                                                               |                                     | Facility Type: Natural gas well           |                                                                                           |                                        |                                             |                                             |                               |                                   |
| Surface Ow                                                                                                                                                                                                   | ner: Feder                                             | al                                                  |                                                    | Mineral (                                                     | Owner:                              | Federal                                   |                                                                                           |                                        | API No                                      | . 30045238                                  | 371                           |                                   |
|                                                                                                                                                                                                              |                                                        |                                                     |                                                    | LOCA                                                          | ATIO                                | N OF REI                                  | LEASE                                                                                     |                                        |                                             |                                             |                               |                                   |
| Unit Letter                                                                                                                                                                                                  | Section                                                | Township                                            | Range                                              | Feet from the                                                 |                                     | South Line                                | Feet from the                                                                             | East/W                                 | est Line                                    | County: Sa                                  | an Juan                       | l'                                |
| J                                                                                                                                                                                                            | 30                                                     | 31N                                                 | 11W                                                | 1,790                                                         | South                               |                                           | 1,570                                                                                     | East                                   |                                             |                                             |                               |                                   |
|                                                                                                                                                                                                              |                                                        | Lati                                                | tude 36                                            | .86777                                                        |                                     | Longitude                                 | 108.028188                                                                                |                                        |                                             |                                             |                               |                                   |
|                                                                                                                                                                                                              |                                                        |                                                     |                                                    | NAT                                                           | TIRE                                | OF RELI                                   | FASE                                                                                      |                                        |                                             |                                             |                               |                                   |
| Type of Rele                                                                                                                                                                                                 | ase: none                                              |                                                     |                                                    | IIAI                                                          | CICE                                | _                                         | Release: N/A                                                                              |                                        | Volume R                                    | lecovered: N                                | J/A                           |                                   |
|                                                                                                                                                                                                              |                                                        | w grade tank -                                      | 95 bbl                                             |                                                               |                                     |                                           | our of Occurrenc                                                                          | e:                                     |                                             | Hour of Dis                                 |                               | :                                 |
| Was Immedia                                                                                                                                                                                                  | ate Notice (                                           |                                                     |                                                    |                                                               |                                     | If YES, To                                | Whom?                                                                                     | ,                                      |                                             |                                             |                               |                                   |
|                                                                                                                                                                                                              |                                                        |                                                     | Yes                                                | No Not R                                                      | equired                             |                                           |                                                                                           |                                        |                                             |                                             |                               |                                   |
| By Whom?                                                                                                                                                                                                     |                                                        |                                                     |                                                    |                                                               |                                     | Date and H                                |                                                                                           |                                        |                                             |                                             |                               |                                   |
| Was a Water                                                                                                                                                                                                  | course Read                                            |                                                     | v V                                                | N.                                                            |                                     | If YES, Vo                                | lume Impacting t                                                                          | the Water                              | rcourse.                                    |                                             |                               |                                   |
|                                                                                                                                                                                                              |                                                        |                                                     | Yes 🛚                                              | No                                                            |                                     |                                           |                                                                                           |                                        |                                             |                                             |                               |                                   |
| If a Watercou                                                                                                                                                                                                | ırse was Im                                            | pacted, Descr                                       | ibe Fully.*                                        |                                                               |                                     |                                           |                                                                                           |                                        |                                             |                                             |                               |                                   |
|                                                                                                                                                                                                              |                                                        |                                                     |                                                    |                                                               |                                     |                                           |                                                                                           |                                        |                                             |                                             |                               |                                   |
|                                                                                                                                                                                                              |                                                        |                                                     |                                                    |                                                               |                                     |                                           | the BGT was dor<br>s results are attac                                                    |                                        | g removal t                                 | o ensure no                                 | soil im                       | pacts from                        |
| Describe Area Affected and Cleanup Action Taken.* BGT was removed and the area underneath the BGT was sampled. The area under the BGT was backfilled and compacted and is still within the active well area. |                                                        |                                                     |                                                    |                                                               |                                     |                                           |                                                                                           | GT was                                 |                                             |                                             |                               |                                   |
| regulations al<br>public health<br>should their cor the environ                                                                                                                                              | I operators<br>or the envir<br>operations hament. In a | are required to<br>ronment. The<br>lave failed to a | acceptance<br>acceptance<br>dequately<br>CD accept | d/or file certain r<br>e of a C-141 repo<br>investigate and r | elease no<br>ort by the<br>emediate | otifications are NMOCD made contamination | knowledge and und perform correctarked as "Final Roon that pose a three the operator of r | tive action<br>eport" do<br>eat to gro | ons for rele<br>bes not reli-<br>ound water | eases which<br>eve the oper<br>, surface wa | may en<br>ator of<br>ter, hur | danger<br>liability<br>nan health |
| 0                                                                                                                                                                                                            | - 0                                                    | 0                                                   |                                                    |                                                               |                                     |                                           | OIL CONS                                                                                  | SERV                                   | ATION                                       | DIVISIO                                     | N                             |                                   |
| Signature:                                                                                                                                                                                                   | all l                                                  | eace                                                |                                                    |                                                               |                                     |                                           |                                                                                           |                                        |                                             |                                             |                               |                                   |
| Printed Name: Jeff Peace                                                                                                                                                                                     |                                                        |                                                     |                                                    |                                                               |                                     | Approved by Environmental Specialist:     |                                                                                           |                                        |                                             |                                             |                               |                                   |
| Title: Field E                                                                                                                                                                                               | nvironment                                             | tal Coordinato                                      | r                                                  |                                                               |                                     | Approval Dat                              | e:                                                                                        | Е                                      | Expiration Date:                            |                                             |                               |                                   |
| E-mail Addre                                                                                                                                                                                                 | ess: peace.je                                          | effrey@bp.cor                                       | n                                                  |                                                               |                                     | Conditions of                             | Approval:                                                                                 |                                        | Attached                                    |                                             |                               |                                   |
| Date: May 19                                                                                                                                                                                                 | 9, 2015                                                |                                                     | Phone: 50                                          | 5-326-9479                                                    |                                     |                                           |                                                                                           |                                        |                                             |                                             |                               |                                   |

<sup>\*</sup> Attach Additional Sheets If Necessary

| CLIENT: BP                                                                                                                                                                                                                                                                                                                                                     | BLAGG ENGI<br>P.O. BOX 87, BLO<br>(505) 6                                                    | 3                                                                          | API #: 3004523871 TANK ID (if applicble): A |                                                                                                           |                                                            |                |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------|----------------|--|--|
| FIELD REPORT:                                                                                                                                                                                                                                                                                                                                                  | (circle one): BGT CONFIRMATION RELE                                                          | ASE INVESTIGATION / OTHER:                                                 |                                             | PAGE #:                                                                                                   | <b>1</b> of                                                | 1              |  |  |
| SITE INFORMATION QUAD/UNIT: J SEC: 30 TWP: 1/4-1/4/FOOTAGE: 1,790' S / 1,57                                                                                                                                                                                                                                                                                    | DATE STARTED: DATE FINISHED: ENVIRONMENTAL SPECIALIST(S):                                    | 07/30<br>N.                                                                |                                             |                                                                                                           |                                                            |                |  |  |
|                                                                                                                                                                                                                                                                                                                                                                |                                                                                              | TRACTOR: MBF - B. SCHURM                                                   |                                             |                                                                                                           |                                                            |                |  |  |
| 95 BGT (DW/DB)  2)  3) 4)                                                                                                                                                                                                                                                                                                                                      | GPS COORD.: 36.867                                                                           | 77 X 108.028188 DIS                                                        | TANCE/BEA TANCE/BEA                         | GLELE  ARING FROM W.H.:  ARING FROM W.H.:  LARING FROM W.H.:                                              | 0.41 1                                                     | 5,856'<br>N77W |  |  |
| SAMPLING DATA:                                                                                                                                                                                                                                                                                                                                                 | CHAIN OF CUSTODY RECORD(S) # OR LAB                                                          | USED: HALL                                                                 |                                             |                                                                                                           |                                                            | OVM<br>READING |  |  |
| 1) SAMPLE ID: 5PC-TB @ 6' (95) 2) SAMPLE ID: 3) SAMPLE ID:                                                                                                                                                                                                                                                                                                     | SAMPLE DATE: 07/30/12  SAMPLE DATE: SAMPLE DATE: SAMPLE DATE: SAMPLE DATE:                   | SAMPLE TIME: 1510 LAB ANALYSIS: 4 SAMPLE TIME: LAB ANALYSIS: LAB ANALYSIS: |                                             |                                                                                                           | 10.0 (CI)                                                  | (mqq)          |  |  |
| SOIL DESCRIPTION                                                                                                                                                                                                                                                                                                                                               |                                                                                              | SILT / SILTY CLAY / CLAY / GRAV                                            |                                             |                                                                                                           |                                                            |                |  |  |
| SOIL COLOR: GRAYISH TO DARK YELLOWISH ORANGE  COHESION (ALL OTHERS): NON COHESIVE   SLIGHTLY COHESIVE / COHESIVE / COHESIVE / COHESIVE   HIGHLY COHESIVE    CONSISTENCY (NON COHESIVE SOILS): LOOSE   FIRM   DENSE / VERY DENSE    MOISTURE: DRY   SLIGHTLY MOIST   MOIST / WET / SATURATED / SUPER SATURATED    SAMPLE TYPE: GRAB   COMPOSITE   # OF PTS.   5 |                                                                                              |                                                                            |                                             |                                                                                                           |                                                            |                |  |  |
| ADDITIONAL COMMENTS:                                                                                                                                                                                                                                                                                                                                           |                                                                                              |                                                                            |                                             |                                                                                                           |                                                            |                |  |  |
| EXCAVATION DIMENSIONS (if applicable) DEPTH TO GROUNDWATER: <50' N                                                                                                                                                                                                                                                                                             |                                                                                              | X NA ft. cubic rest SURFACE WATER: <1,000                                  |                                             | cavated (if applicable):<br>D TPH CLOSURE STD                                                             |                                                            | NA PPM         |  |  |
| E                                                                                                                                                                                                                                                                                                                                                              | PBGTL T.B. ~ 6' B.G.  SOUND HARRIER WALLS  VATION DEPRESSION; B.G. = BELOW GRADE; B = B      | PRESSOR  X - S.P.I                                                         | WM PC PH PJ OC                              | MISCELL O: N1559836 O#: 79114 K: ZSCHWL J#: Z2-00690 Permit date(s): CD Appr. date(s): BGT Sidewalls Visi | A ppm DATE:  NOT 6  LBGT 0-C 06/14/1 02/28/1  ible: Y / (N | NA TES         |  |  |
| T.B. = TANK BOTTOM; PBGTL = PREVIOUS                                                                                                                                                                                                                                                                                                                           | BELOW-GRADE TANK LOCATION; SPD = SAMPLE F<br>E; SW - SINGLE WALL; DW - DOUBLE WALL; SB - SIN | POINT DESIGNATION; R.W. = RETAINING WA                                     | ALL; M                                      | agnetic declinati                                                                                         | on: 10                                                     | )°E            |  |  |

#### **Analytical Report**

### Lab Order **1208057**

Date Reported: 8/8/2012

### Hall Environmental Analysis Laboratory, Inc.

**CLIENT:** Blagg Engineering

Project: HEATON LS #8A

Lab ID: 1208057-001

Matrix: SOIL

Client Sample ID: 5PC-TB @ 6' (21BGT)

**Collection Date:** 7/30/2012 3:10:00 PM

Received Date: 8/1/2012 10:00:00 AM

| Analyses                      | Result      | RL Qu    | ial Units | DF | Date Analyzed        |
|-------------------------------|-------------|----------|-----------|----|----------------------|
| EPA METHOD 8015B: DIESEL RAN  | GE ORGANICS |          |           |    | Analyst: <b>JMP</b>  |
| Diesel Range Organics (DRO)   | ND          | 9.8      | mg/Kg     | 1  | 8/6/2012 9:12:34 AM  |
| Surr: DNOP                    | 99.8        | 77.6-140 | %REC      | 1  | 8/6/2012 9:12:34 AM  |
| EPA METHOD 8015B: GASOLINE R  | ANGE        |          |           |    | Analyst: NSB         |
| Gasoline Range Organics (GRO) | ND          | 4.8      | mg/Kg     | 1  | 8/4/2012 1:41:09 AM  |
| Surr: BFB                     | 96.6        | 84-116   | %REC      | 1  | 8/4/2012 1:41:09 AM  |
| EPA METHOD 8021B: VOLATILES   |             |          |           |    | Analyst: NSB         |
| Benzene                       | ND          | 0.048    | mg/Kg     | 1  | 8/4/2012 1:41:09 AM  |
| Toluene                       | ND          | 0.048    | mg/Kg     | 1  | 8/4/2012 1:41:09 AM  |
| Ethylbenzene                  | ND          | 0.048    | mg/Kg     | 1  | 8/4/2012 1:41:09 AM  |
| Xylenes, Total                | ND          | 0.096    | mg/Kg     | 1  | 8/4/2012 1:41:09 AM  |
| Surr: 4-Bromofluorobenzene    | 101         | 80-120   | %REC      | 1  | 8/4/2012 1:41:09 AM  |
| EPA METHOD 300.0: ANIONS      |             |          |           |    | Analyst: SRM         |
| Chloride                      | ND          | 1.5      | mg/Kg     | 1  | 8/3/2012 11:55:35 AM |
| EPA METHOD 418.1: TPH         |             |          |           |    | Analyst: JMP         |
| Petroleum Hydrocarbons, TR    | ND          | 19       | mg/Kg     | 1  | 8/7/2012             |
|                               |             |          |           |    |                      |

Qualifiers:

\*/X Value exceeds Maximum Contaminant Level.

E Value above quantitation range

J Analyte detected below quantitation limits

R RPD outside accepted recovery limits

S Spike Recovery outside accepted recovery limits

B Analyte detected in the associated Method Blank

H Holding times for preparation or analysis exceeded

ND Not Detected at the Reporting Limit

RL Reporting Detection Limit

U Samples with CalcVal < MDL

Page 1 of 6

#### Hall Environmental Analysis Laboratory, Inc.

WO#:

1208057 08-Aug-12

Client:

Blagg Engineering

Project:

HEATON LS #8A

Sample ID MB-3181

SampType: MBLK

TestCode: EPA Method 300.0: Anions

Client ID:

PBS

8/3/2012

Batch ID: 3181

RunNo: 4648

Prep Date: Analyte

Analysis Date: 8/3/2012 PQL

SeqNo: 130738

Units: mg/Kg HighLimit

**RPDLimit** 

Qual

Chloride

ND

Sample ID LCS-3181

8/3/2012

SampType: LCS

TestCode: EPA Method 300.0: Anions

Client ID: LCSS Batch ID: 3181

Result

RunNo: 4648

SeqNo: 130739

Units: mg/Kg

HighLimit

%RPD

%RPD

Analyte

Analysis Date: 8/3/2012 Result PQL

SPK value SPK Ref Val %REC

SPK value SPK Ref Val %REC LowLimit

**RPDLimit** 

Qual

Chloride

Prep Date:

15

1.5

15.00

LowLimit

110

Qualifiers:

Value exceeds Maximum Contaminant Level. \*/X

Value above quantitation range

Analyte detected below quantitation limits RPD outside accepted recovery limits

В

Analyte detected in the associated Method Blank Holding times for preparation or analysis exceeded Н

Not Detected at the Reporting Limit

Page 2 of 6

Reporting Detection Limit

### Hall Environmental Analysis Laboratory, Inc.

WO#:

1208057

08-Aug-12

Client:

Blagg Engineering

Project:

**HEATON LS #8A** 

Sample ID MB-3204 SampType: MBLK

TestCode: EPA Method 418.1: TPH

TestCode: EPA Method 418.1: TPH

LowLimit

Client ID:

**PBS** 

Batch ID: 3204

PQL

20

RunNo: 4685

Prep Date: 8/6/2012 Analysis Date: 8/7/2012

SeqNo: 131600

Units: mg/Kg

%REC LowLimit

HighLimit

%RPD **RPDLimit** 

Qual

Analyte Petroleum Hydrocarbons, TR Result ND

Result

97

Sample ID LCS-3204

SampType: LCS

Client ID:

LCSS

Batch ID: 3204

RunNo: 4685

%REC

97.1

Prep Date:

Analyte

8/6/2012

Analysis Date: 8/7/2012

SPK value SPK Ref Val

SPK value SPK Ref Val

100.0

SeqNo: 131601

Units: mg/Kg HighLimit

120

**RPDLimit** Qual

Qual

Petroleum Hydrocarbons, TR Sample ID LCSD-3204

SampType: LCSD

TestCode: EPA Method 418.1: TPH

Client ID: LCSS02

Batch ID: 3204

PQL

20

RunNo: 4685

Prep Date:

Analyte

8/6/2012

Analysis Date: 8/7/2012

Result

98

SegNo: 131602

Units: mg/Kg

HighLimit %RPD **RPDLimit** 

%RPD

Petroleum Hydrocarbons, TR

SPK value SPK Ref Val PQL 20 100.0

%REC LowLimit 98.3

1.23

Qualifiers:

\*/X Value exceeds Maximum Contaminant Level.

Value above quantitation range

Analyte detected below quantitation limits

RPD outside accepted recovery limits

Analyte detected in the associated Method Blank В

Η Holding times for preparation or analysis exceeded

Not Detected at the Reporting Limit Reporting Detection Limit

Page 3 of 6

## Hall Environmental Analysis Laboratory, Inc.

WO#:

1208057

08-Aug-12

Client:

Blagg Engineering

Project:

HEATON LS #8A

| Sample ID MB-3179           | SampType: MBLK                                                  |         |           | Tes         | TestCode: EPA Method 8015B: Diesel Range Organics |          |             |      |          |      |
|-----------------------------|-----------------------------------------------------------------|---------|-----------|-------------|---------------------------------------------------|----------|-------------|------|----------|------|
| Client ID: PBS              | Batch                                                           | 1D: 31  | 79        | F           | RunNo: 4                                          | 631      |             |      |          |      |
| Prep Date: 8/3/2012         | Analysis D                                                      | ate: 8/ | 3/2012    | S           | SeqNo: 1                                          | 30294    | Units: mg/K | (g   |          |      |
| Analyte                     | Result                                                          | PQL     | SPK value | SPK Ref Val | %REC                                              | LowLimit | HighLimit   | %RPD | RPDLimit | Qual |
| Diesel Range Organics (DRO) | ND                                                              | 10      |           |             |                                                   |          |             |      |          |      |
| Surr: DNOP                  | 12                                                              |         | 10.00     |             | 118                                               | 77.6     | 140         |      |          |      |
| Sample ID LCS-3179          | SampType: LCS TestCode: EPA Method 8015B; Diesel Range Organics |         |           |             |                                                   |          |             |      |          |      |

| Sample ID LCS-3179          | SampType: L      | CS        | Tes         | tCode: El | PA Method | 8015B: Diese | el Range ( | Organics |      |
|-----------------------------|------------------|-----------|-------------|-----------|-----------|--------------|------------|----------|------|
| Client ID: LCSS             | Batch ID: 3      | 179       | F           | RunNo: 4  | 631       |              |            |          |      |
| Prep Date: 8/3/2012         | Analysis Date: 8 | /3/2012   | S           | SeqNo: 1  | 30295     | Units: mg/K  | g          |          |      |
| Analyte                     | Result PQL       | SPK value | SPK Ref Val | %REC      | LowLimit  | HighLimit    | %RPD       | RPDLimit | Qual |
| Diesel Range Organics (DRO) | 36 10            | 50.00     | 0           | 71.8      | 52.6      | 130          |            |          |      |
| Surr: DNOP                  | 4.1              | 5.000     |             | 81.8      | 77.6      | 140          |            |          |      |

#### Qualifiers:

\*/X Value exceeds Maximum Contaminant Level.

E Value above quantitation range

Analyte detected below quantitation limits

R RPD outside accepted recovery limits

B Analyte detected in the associated Method Blank

H Holding times for preparation or analysis exceeded

ND Not Detected at the Reporting Limit

RL Reporting Detection Limit

Page 4 of 6

## Hall Environmental Analysis Laboratory, Inc.

WO#:

1208057

08-Aug-12

Client:

Blagg Engineering

Project:

HEATON LS #8A

| Sample ID MB-3170             | SampT                                    | ype: ME | BLK       | Test                   | е                 |    |           |      |          |      |
|-------------------------------|------------------------------------------|---------|-----------|------------------------|-------------------|----|-----------|------|----------|------|
| Client ID: PBS                | Batch ID: <b>3170</b> RunNo: <b>4638</b> |         |           |                        |                   |    |           |      |          |      |
| Prep Date: 8/2/2012           | Analysis D                               | ate: 8/ | 3/2012    | SeqNo: <b>130903</b> U |                   |    |           | (g   |          |      |
| Analyte                       | Result                                   | PQL     | SPK value | SPK Ref Val            | /al %REC LowLimit |    | HighLimit | %RPD | RPDLimit | Qual |
| Gasoline Range Organics (GRO) | ND                                       | 5.0     |           |                        |                   |    |           |      |          |      |
| Surr: BFB                     | 970                                      |         | 1000      |                        | 96.9              | 84 | 116       |      |          |      |

| Sample ID LCS-3170            | SampType: Lo                            | tCode: El | EPA Method 8015B: Gasoline Range |      |             |           |      |          |      |  |  |  |
|-------------------------------|-----------------------------------------|-----------|----------------------------------|------|-------------|-----------|------|----------|------|--|--|--|
| Client ID: LCSS               | Batch ID: 31                            | 638       |                                  |      |             |           |      |          |      |  |  |  |
| Prep Date: 8/2/2012           | Analysis Date: 8/3/2012 SeqNo: 130904 U |           |                                  |      | Units: mg/K | g         |      |          |      |  |  |  |
| Analyte                       | Result PQL                              | SPK value | SPK Ref Val                      | %REC | LowLimit    | HighLimit | %RPD | RPDLimit | Qual |  |  |  |
| Gasoline Range Organics (GRO) | 24 5.0                                  | 25.00     | 0                                | 95.3 | 85          | 115       |      |          |      |  |  |  |
| Surr: BFB                     | 1000                                    | 1000      |                                  | 101  | 84          | 116       |      |          |      |  |  |  |

#### Qualifiers:

\*/X Value exceeds Maximum Contaminant Level.

E Value above quantitation range

J Analyte detected below quantitation limits

R RPD outside accepted recovery limits

B Analyte detected in the associated Method Blank

H Holding times for preparation or analysis exceeded

ND Not Detected at the Reporting Limit

RL Reporting Detection Limit

Page 5 of 6

## Hall Environmental Analysis Laboratory, Inc.

WO#:

1208057

08-Aug-12

Client:

Blagg Engineering

Project:

HEATON LS #8A

| Sample ID MB-3170          | SampT                                          | ype: ME                         | BLK      | Tes       | tCode: El    |          |      |  |  |  |  |
|----------------------------|------------------------------------------------|---------------------------------|----------|-----------|--------------|----------|------|--|--|--|--|
| Client ID: PBS             | Batch                                          | Batch ID: 3170                  |          |           | RunNo: 4     | 638      |      |  |  |  |  |
| Prep Date: 8/2/2012        | Analysis D                                     | is Date: 8/3/2012 SeqNo: 130928 |          |           | Units: mg/Kg |          |      |  |  |  |  |
| Analyte                    | Result PQL SPK value SPK Ref Val %REC LowLimit |                                 | LowLimit | HighLimit | %RPD         | RPDLimit | Qual |  |  |  |  |
| Benzene                    | ND                                             | 0.050                           |          |           |              |          |      |  |  |  |  |
| Toluene                    | ND                                             | 0.050                           |          |           |              |          |      |  |  |  |  |
| Ethylbenzene               | ND                                             | 0.050                           |          |           |              |          |      |  |  |  |  |
| Xylenes, Total             | ND                                             | 0.10                            |          |           |              |          |      |  |  |  |  |
| Surr: 4-Bromofluorobenzene | 1.0                                            |                                 | 1.000    |           | 103          | 80       | 120  |  |  |  |  |

| Sample ID LCS-3170         | TestCode: EPA Method 8021B: Volatiles    |         |           |                           |               |          |           |      |          |      |
|----------------------------|------------------------------------------|---------|-----------|---------------------------|---------------|----------|-----------|------|----------|------|
| Client ID: LCSS            | Batch ID: <b>3170</b> RunNo: <b>4638</b> |         |           |                           |               |          |           |      |          |      |
| Prep Date: 8/2/2012        | Analysis D                               | ate: 8/ | 3/2012    | 8                         | SeqNo: 130929 |          |           | (g   |          |      |
| Analyte                    | Result                                   | PQL     | SPK value | e SPK Ref Val %REC LowLim |               | LowLimit | HighLimit | %RPD | RPDLimit | Qual |
| Benzene                    | 0.97                                     | 0.050   | 1.000     | 0                         | 96.7          | 76.3     | 117       |      |          |      |
| Toluene                    | 0.98                                     | 0.050   | 1.000     | 0                         | 97.9          | 80       | 120       |      |          |      |
| Ethylbenzene               | 1.0                                      | 0.050   | 1.000     | 0                         | 99.9          | 77       | 116       |      |          |      |
| Xylenes, Total             | 3.0                                      | 0.10    | 3.000     | 0                         | 101 76.7      |          | 117       |      |          |      |
| Surr: 4-Bromofluorobenzene | 1.1                                      |         | 1.000     |                           | 108           | 80       | 120       |      |          |      |

#### Qualifiers:

\*/X Value exceeds Maximum Contaminant Level.

E Value above quantitation range

J Analyte detected below quantitation limits

R RPD outside accepted recovery limits

B Analyte detected in the associated Method Blank

H Holding times for preparation or analysis exceeded

ND Not Detected at the Reporting Limit

RL Reporting Detection Limit

Page 6 of 6



Hall Environmental Analysis Laboratory 4901 Hawkins NE Albuquerque, NM 87105 TEL: 505-345-3975 FAX: 505-345-4107 Website: www.hallenvironmental.com

# Sample Log-In Check List

| Clier | nt Name:       | BLAGG                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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                                                                                                                                                       | Wo                                      | rk Ord             | der N                    | Numb    | oer:           | 1208057                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    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| Rece  | eived by/date  | 46                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| Logg  | ed By:         | Lindsay Ma                     | ngin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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| Com   | pleted By:     | Lindsay Ma                     | ngin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         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| 5.    | Was an atter   | mpt made to c                  | cool the samples                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ? 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| 6.    | Were all sam   | nples received                 | l at a temperatur                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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| 7.    | Sample(s) in   | proper contai                  | iner(s)?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| 8.    | Sufficient sar | mple volume f                  | for indicated test                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | (s)? 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| 9.    | Are samples    | (except VOA                    | and ONG) prope                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | erly preserved? 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| 10.   | Was preserv    | ative added to                 | bottles?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| 11.   | VOA vials ha   | ive zero head:                 | space?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       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| 12.   | Were any sa    | mple containe                  | ers received brok                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | en? 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| 14.   | Are matrices   | correctly ider                 | ntified on Chain o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | f Custody? 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| 15.   | Is it clear wh | at analyses w                  | ere requested?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               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|       | Person         | Notified:                      | AND AND AND AND A SERVICE AND ADDRESS AND | COMMON TO SERVICE AND ADDRESS OF THE SERVICE AND | Date:                                   | -714 LV: 347 LV23  | *********                | 2411400 | T.DAYLONS      | chi de la colorga de acción                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                             |                |       |
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| 18.   | Additional re  | marks:                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              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| 19.   | Cooler Infor   | 1                              | Condition S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  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1.0

| CI                                                  | Chain-of-Custody Record |              |                                        | Turn-Around Time:                       |                      |           |                                                              |                                                    |                               | н                  | A                  | LL                | E             | N۷           | /IF             | 20          | NI              | ME               | N        | ΓΑΙ         | L                      |
|-----------------------------------------------------|-------------------------|--------------|----------------------------------------|-----------------------------------------|----------------------|-----------|--------------------------------------------------------------|----------------------------------------------------|-------------------------------|--------------------|--------------------|-------------------|---------------|--------------|-----------------|-------------|-----------------|------------------|----------|-------------|------------------------|
| Client:                                             | BLAG                    | G ENGR.      | / BP AMERICA                           | Standard Rush ANALYSIS LABO             |                      |           |                                                              |                                                    |                               |                    |                    |                   |               |              |                 |             |                 |                  |          |             |                        |
|                                                     |                         |              |                                        | Project Name: www.hallenvironmental.com |                      |           |                                                              |                                                    |                               |                    |                    |                   |               |              |                 |             |                 |                  |          |             |                        |
| Mailing Ad                                          | ddress:                 | P.O. BO      | X 87                                   | HEATON LS # 8A                          |                      |           |                                                              | 4901 Hawkins NE - Albuquerque, NM 87109            |                               |                    |                    |                   |               |              |                 |             |                 |                  |          |             |                        |
|                                                     |                         |              | FIELD, NM 87413                        | Project #:                              |                      |           | Tel. 505-345-3975 Fax 505-345-4107                           |                                                    |                               |                    |                    |                   |               |              |                 |             |                 |                  |          |             |                        |
| Phone #:                                            | Phone #: (505) 632-1199 |              |                                        |                                         |                      |           | Analysis Request                                             |                                                    |                               |                    |                    |                   |               |              |                 |             |                 |                  |          |             |                        |
| email or Fax#:                                      |                         |              | Project Manag                          | ger:                                    |                      |           |                                                              |                                                    |                               |                    |                    |                   | 504           |              |                 |             |                 |                  |          |             |                        |
| QA/QC Package:  Standard  Level 4 (Full Validation) |                         | NELSON VELEZ |                                        |                                         | (80218)              | only)     | /Diesel)                                                     |                                                    |                               |                    |                    | P04,              | CB's          |              |                 |             |                 |                  | е        |             |                        |
| Accreditat                                          | Accreditation:          |              | Sampler:                               | NELSON VE                               | ELEZ onv             | 168       | (Gas                                                         | (Gas                                               |                               |                    |                    |                   | NO3, NO2,     | / 8082 PCB's |                 |             |                 |                  | -        | ldwi        |                        |
| □ NELAP □ Other                                     |                         | On Ice:      | ∕ Yes                                  | □No                                     | 1                    | TPH       | 158                                                          | 18.1                                               | 04.1                          | AH)                |                    | 03,1              | / 80          |              | 7               |             |                 |                  | te sa    |             |                        |
| □ EDD (Type)                                        |                         | Sample Temp  | erature: /                             | 0                                       | ŧ                    | 3E +      | 08 P                                                         | b pc                                               | od 5                          | or P,              | tals               | CI, N             | ides          | 7            | -40/            | 0.00        |                 | ole              | oosit    |             |                        |
| Date                                                | Time                    | Matrix       | Sample Request ID                      | Container<br>Type and #                 | Preservative<br>Type | HEAL NO.  | BTEX +-WIF                                                   | BTEX + MTBE + TPH (Gas only)                       | TPH Method 8015B (Gas/Diesel) | TPH (Method 418.1) | EDB (Method 504.1) | 8310 (PNA or PAH) | RCRA 8 Metals | Anions (F, C | 8081 Pesticides | 8260B (VOA) | 8270 (Semi-VOA) | Chloride (300.0) |          | Grab sample | 5 pt. composite sample |
| 7/30/12                                             | 1510                    | SOIL         | 5PC-TB @ 6' (95 BGT)                   | 4 oz 2                                  | Cool                 | -001      | ٧                                                            |                                                    | ٧                             | ٧                  |                    |                   |               |              |                 |             |                 | ٧                |          | -           | ٧                      |
|                                                     |                         |              |                                        |                                         |                      |           |                                                              |                                                    |                               |                    |                    |                   |               |              |                 |             |                 |                  |          |             | $\top$                 |
|                                                     |                         |              |                                        |                                         |                      |           |                                                              |                                                    |                               |                    |                    |                   |               |              |                 |             |                 |                  | $\neg$   | $\neg$      | $\top$                 |
|                                                     |                         |              |                                        |                                         |                      |           |                                                              |                                                    |                               |                    |                    |                   |               |              |                 |             |                 |                  | $\neg$   | +           | +                      |
|                                                     |                         |              |                                        |                                         |                      |           |                                                              |                                                    |                               |                    |                    |                   |               |              | _               |             |                 |                  | $\dashv$ | 1           | +                      |
|                                                     |                         |              |                                        |                                         |                      |           |                                                              |                                                    |                               |                    |                    |                   |               |              |                 |             |                 |                  | +        | -           | +                      |
|                                                     |                         |              |                                        |                                         |                      |           |                                                              |                                                    |                               |                    |                    |                   |               | _            |                 |             |                 |                  |          | +           | +                      |
|                                                     |                         |              |                                        |                                         | 1                    |           |                                                              |                                                    |                               |                    |                    |                   | -             | -            |                 |             |                 |                  | -        | -           | +                      |
|                                                     |                         |              |                                        |                                         |                      |           |                                                              |                                                    | _                             |                    |                    |                   |               | -            |                 |             |                 |                  | -        | -           | +                      |
|                                                     |                         |              |                                        |                                         |                      |           |                                                              |                                                    |                               |                    |                    |                   |               |              |                 |             | _               |                  | $\dashv$ | +           | +                      |
|                                                     |                         |              |                                        |                                         |                      |           | -                                                            |                                                    | _                             | -                  |                    |                   |               | -            |                 | -           | -               |                  | -        | -           | +                      |
|                                                     |                         |              |                                        |                                         |                      |           |                                                              |                                                    |                               |                    |                    |                   | -             |              |                 |             |                 |                  | $\dashv$ | +           | +                      |
| Date:                                               | Time:                   | Relinquish   | ed by:                                 | Received by:                            |                      | Date Time | Ren                                                          | nark                                               | S:                            | TPH                | 1 (80              | 015               | B) -          | GRO          | 2 &             | DRO         | ON              | JLY.             |          |             |                        |
| 7/31/12                                             | 1425                    | 96           | an Vot                                 | n, ,                                    | 1 20 10              | 7/ 1      | Remarks: TPH (8015B) - GRO & DRO ONLY.  BILL DIRECTLY TO BP: |                                                    |                               |                    |                    |                   |               |              |                 |             |                 |                  |          |             |                        |
| Date:                                               | Time:                   | Relinquish   | ed by:                                 | Received by:                            |                      |           |                                                              | Jeff Peace, 200 Energy Court, Farmington, NM 87401 |                               |                    |                    |                   |               |              |                 |             |                 |                  |          |             |                        |
| 7/31/12                                             | 1428                    | Chri         | atur Dallan                            |                                         | 12.1000              | W         | ork C                                                        | rder                                               | : _1                          | 1155               | 983                | 6                 |               | Payke        | ey:             | ZSCI        | HWLI            | _BGT             |          |             |                        |
|                                                     |                         | an eamnles   | submitted to Hell Environmental may be | and a standard and attack               | . X                  | 1         |                                                              |                                                    |                               |                    |                    |                   |               |              |                 |             |                 |                  |          |             |                        |



