Submit 1 Copy To Appropriate District	State of New M	exico 39-	3/3/7 Form C-103
Office District I – (575) 393-6161	Energy, Minerals and Nati	Iral Resources	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	OIL CONSERVATION	DURION	WELL API NO.
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	1220 South St. Fra	DIVISION nois Dr	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 8	7505	STATE FEE
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	54114 1 0, 1111 0	1505	6. State Off & Gas Lease No.
SUNDRY NOTIO (DO NOT USE THIS FORM FOR PROPOS.	ES AND REPORTS ON WELLS ALS TO DRILL OR TO DEEPEN OR PL	G BACK TO A	7. Lease Name or Unit Agreement Name Section 25 Drying Pad/Burial Trench
DIFFERENT RESERVOIR. USE "APPLIC. PROPOSALS.)	ATION FOR PERMIT" (FORM C-101) F	OR SUCH	8. Well Number
1. Type of Well: Oil Well	Gas Well 🗌 Other 🛛 Drying	Pad/Burial Trench	#1
2. Name of Operator WPX Energy Production LLC			9. OGRID Number
3. Address of Operator			10. Pool name or Wildcat
P. O. Box 640, Aztec, NM 87410			
4. Well Location			
Unit Letter <u>E</u> :	_1540feet from theN_	line and	1196 feet from the Wline
Section 25	11 Elevation (Show whether DR	Range 6W NN	APM County Rio Arriba
	6372' GR	, KKD, KI, OK, etc.)	
12. Check A	ppropriate Box to Indicate N	ature of Notice.	Report or Other Data
	ENTION TO:		SEQUENT REPORT OF:
	CHANGE PLANS	COMMENCE DRI	
PULL OR ALTER CASING		CASING/CEMENT	
OTHER:		OTHER:	
		Extension for	drying pad/burial trench closure application
 Describe proposed or complete of starting any proposed wor proposed completion or recompletion 	ted operations. (Clearly state all) k). SEE RULE 19.15.7.14 NMA(mpletion.	pertinent details, and C. For Multiple Con	l give pertinent dates, including estimated date apletions: Attach wellbore diagram of
Due to BLM Winter Closure restriction month extension to close the Section 2 Pad 27, the Rosa Unit #643H (API #3 25 Drying Pad/Burial Trench #1 until	ns in the Rosa Unit (NMNM 784) 25 Drying Pad/Burial Trench #1 (0-039-31317) at 06.00 on 08/27/2 05/27/2016.	07E), WPX Energy I 13037). The drilling 015, therefore, we an	Production, LLC hereby requests for a 3- , rig was released from the first well on Rosa re requesting an extension to close the Section
			OIL CONS. DIV DIST. 3
			FEB 0 3 2016
A - Spin			and the second
Spud Date:	Rig Release Da	ite:	
	to the second around the to the b		and half of
A A	sove is true and complete to the b	est of my knowledge	and beller.
SIGNATURE TAM	TITLE Regu	latory Specialist, Sr.	DATE <u>02/02/2016</u>
Type or print name Andres Falin	/ Email address	andras falin an	BUONE: 505 222 1940
For State Use Only	L-mail address	_anurea.tettx(wwp	renergy.com PRONE: _303-353-1849
APPROVED BY: Ind	JW TITLE E	windmental.	Sec. DATE 2/19/16
Conditions of Approval (if any).	New closure Deale	5/27/1	6 See Attichal.
-		-121/1	8

State of New Mexico Energy, Minerals and Natural Resources Department

Susana Martinez Governor

David Martin Cabinet Secretary

Tony Delfin Deputy Cabinet Secretary David R. Catanach, Division Director **Oil Conservation Division**



New Mexico Oil Conservation Division approval and conditions listed below are made in accordance with OCD Rule 19.15.5.11

Application Type:

Drilling/Casing Change Location Change P&A

Recomplete/DHC (For hydraulic fracturing operations review EPA Underground injection control Guidance #84)

Other: C-144 Burial Trench Closure extension request.

Conditions of Approval:

WPX request for a (3) three month closure extension at the Section 25 Drying Pad/Burial Trench #1 has been approved with the following Conditions:

- Due to the amount of free standing fluids witnessed within the Burial trench, WPX will need to . verify that the contents of the Burial trench are stabilized prior to closure.
- OCD requires to be present when WPX verifies that the contents of the trench are stabilized prior to closure.
- During the 3 month extension, WPX will continue to follow all aspects of their approved permit.

If you have any questions please feel free to contact me.

2/19/16

NMOCD Approved by Signature

Date

District 1 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.

Type of action	n: Below grade tank registra Permit of a pit or propose Closure of a pit, below-gr Modification to an existin Closure plan only submitt Iternative method	tion ed alternative method ade tank, or proposed alternative method g permit/or registration ed for an existing permitted or non-permitted	FEB 0 3 2016 pit, below-grade tank,
Instructions: F lease be advised that approval of this novironment. Nor does approval relie	Please submit one application (Form s request does not relieve the operator of eve the operator of its responsibility to o	C-144) per individual pit, below-grade tank or alt of liability should operations result in pollution of surfa- comply with any other applicable governmental author	ernative request ice water, ground water or the ity's rules, regulations or ordinar
Derator: WPX Energy	Production LLC	OGRID #:12	0782
Address: P.O. Box 640	Aztec, NM 87410	All all set and a set of the	
Facility or well name: Sect	tion 25 Drying Pad/Burial Trench #1		
API Number:	7, 30-039-31315, 30-039-31314, 30-0	39-31313, 30-039-31318, 30-039-31321, 30-039-3	1320
U/L or Qtr/Qtr Sec	tion 25 Township 1	31N Range R6W County: Rio Arriba	
Center of Proposed Design: Latitu	ude <u>36.873473</u> Longitude	107.419031 NAD: □1927 ⊠ 1983 Goog	le Earth
Surface Owner: 🛛 Federal 🗌 Sta	ate 🗌 Private 🗌 Tribal Trust or Indi	an Allotment	
 ☑ Lined □ Unlined Liner typ ☑ String-Reinforced Liner Seams: ☑ Welded □ Fac 	tory Other <u>Volume 17,78</u>	LDPE HDPE PVC Other	
3.		The second s	
Below-grade tank: Subsecti	ion I of 19.15.17.11 NMAC		
Volume:	_bbl Type of fluid:		
Tank Construction material:		-	
Secondary containment with I	leak detection [] Visible sidewalls,	tiner, 6-inch lift and automatic overflow shut-off	
Liner type: Thickness		C Other	The second second
inter type, Threeness			
Alternative Method:			
Submittal of an exception request	is required. Exceptions must be sub	mitted to the Santa Fe Environmental Bureau office	for consideration of approval.
5.		pits, temporary pits, and below-grade tanks)	
 Fencing: Subsection D of 19.15.1 	17.11 NMAC (Applies to permanent)		
 5. Fencing: Subsection D of 19.15. Chain link, six feet in height, t institution or church) 	17.11 NMAC (Applies to permanent j	nuired if located within 1000 feet of a permanent re	sidence, school, hospital,

Oil Conservation Division

V 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. Firmer Subsection Conf.10.15.17.11.NMAC	
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.	1
Please check a box if one or more of the following is requested, if not leave blank: Variance(s): Requests must be submitted to the appropriate division district for consideration of approval. Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. 	
9. <u>Siting Criteria (regarding permitting)</u> : 19.15.17.10 NMAC Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of accumaterial are provided below. Siting criteria does not apply to drying pads or above-grade tanks.	eptable source
General siting	
Ground water is less than 25 feet below the bottom of a low chloride temporary pit or below-grade tank	☐ Yes ☐ No ⊠ NA
Ground water is less than 50 feet below the bottom of a Temporary pit, burial trench, permanent pit, or Multi-Well Fluid Management pit.	☐ Yes ⊠ No □ NA
NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells See Figures 1 & 2	
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. (Does not apply to below grade tanks) See Figure 5 - Written confirmation or verification from the municipality; Written approval obtained from the municipality	🗌 Yes 🛛 No
 Within the area overlying a subsurface mine. (Does not apply to below grade tanks) See Figure 7 Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division 	Yes 🛛 No
 Within an unstable area. (Does not apply to below grade tanks) See Figure 8 and discussion in application Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society: Topparathic map 	Yes No
Within a 100-year floodplain. (Does not apply to below grade tanks) See Figure 9	Yes X No
- FEMA map	31. 6
Within 100 feet of a continuously flowing watercourse, significant watercourse, lake bed, sinkhole, wetland or playa lake (measured	Yes No
- Topographic map; Visual inspection (certification) of the proposed site	Yes No
 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 	
Temporary Pit using Low Chloride Drilling Fluid (maximum chloride content 15,000 mg/liter)	1200
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.)	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.	Yes No

	And the second state of the
 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	1
 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. 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; MM 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
Burial Trench	
 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 See Figure 3 	🗆 Yes 🛛 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 See Figure 4 	🗌 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 See Figures 1 & 2 	🗌 Yes 🛛 No
 Within 500 feet of a wetland. US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site See Figure 6 	🗋 Yes 🛛 No
10. Temporary Pits, Emergency Pits, Burial Trench and Below-grade Tanks Permit Application Attachment Checklist: Subsection B NMAC Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the do attached. Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC Design Plan - based upon the appropriate requirements of 19.15.17.10 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:	e of 19.15.17.9 cuments are 9 NMAC 15.17.9 NMAC
II. 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 do attached. 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 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:	cuments are 9.15.17.9 NMAC

⁴ (2,)	
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, the	at 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	
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	
Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC	
Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17.11 NMAC	
Nuisance or Hazardous Odors, including H ₂ S, Prevention Plan	
Oil Field Waste Stream Characterization	
Monitoring and Inspection Plan	
Erosion Control Plan	
Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC	
Proposed Closure: 19.15.17.13 NMAC	
Instructions: Please complete the applicable boxes, Boxes 14 through 18, in regards to the proposed closure plan.	
Type: Drilling Workover Emergency Cavitation P&A Permanent Pit Below-grade Tank Multi-	well Fluid Management Pit
Proposed Closure Method: Waste Excavation and Removal	
Waste Removal (Closed-loop systems only)	
In-place Burial On-site Trench Burial	
Alternative Closure Method	
 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 Site Reclamation Plan - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC 	ІМАС
15. <u>Siting Criteria (regarding on-site closure methods only)</u> : 19.15.17.10 NMAC Instructions: Each siting criteria requires a demonstration of compliance in the closure plan. Recommendations of acceptab provided below. Requests regarding changes to certain siting criteria require justifications and/or demonstrations of equivale	le source material are ncy. Please refer to
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
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
 Within 100 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse, lakebed, sinkhole, or pla lake (measured from the ordinary high-water mark). Topographic map; Visual inspection (certification) of the proposed site 	ya 🗌 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 exist at the time of initial application. - NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site	ence Yes No
Written confirmation or verification from the municipality; Written approval obtained from the municipality	Yes No
Within 300 feet of a wetland.	
US FISH and whether wethand 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 ordinar	Yes No

Upped pulsant to NMSA 1978, Section 3-27-3, as mended. Written confirmation or verification form the municipality. Written approval obtained from the municipality V vs: No No • Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division Vs: No No • Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division Vs: No No • Engineering messures incorporated into the design: NM Bureau of Geology & Mineral Resources: USGS: NM Geological Society: Topographic map Vs: No No • FEMA map Vs: No No Vs: No No • Sitting Criteria: Complianc Demonstrituns - based upon the appropriate requirements of 19.15.17.10 NMAC Or Surface Ower Notice - based upon the appropriate requirements of 19.15.17.11 NMAC Construction: Disrigh Plan of Temporary Bt (or in-place buril of a dring pag) - based upon the appropriate requirements of 19.15.17.11 NMAC Or Surface Ower Notice - based upon the appropriate requirements of 19.15.17.11 NMAC Disrout Facility Name and Permit Terech (if applicable based upon the appropriate requirements of 19.15.17.13 NMAC Disrout Facility Name and Permit Requirements of Subsection H of 19.15.17.13 NMAC Disrout Facility Name and Permit Requirements of Subsection H of 19.15.17.13 NMAC Disrout Facility Name and Permit Requirements of Subsection H of 19.15.17.13 NMAC Soli Cover Design - based upon the appropriate requirements				
Within the area overlife ation or map from the NM EMNRD-Mining and Mineral Division Use is indication overlifeation or map from the NM EMNRD-Mining and Mineral Division Use is not set indication overlifeation or map from the NM EMNRD-Mining and Mineral Division Infinite confination on comparison or map from the NM EMNRD-Mining and Mineral Division Use is NM Employment in an unstable area. Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map Ves is NM FEMA map FEMA map FEMA map Siting Chinere Plan. Checklist; (19,1517.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indicate of the following items must be attached to the closure plan. Please indicate of the following items must be attached to the closure plan. Please indicate of the following items must be attached to the closure plan. Please indicate Construction/Design Plan of Themporty Plan (trapplicable) based upon the appropriate requirements of 19,151,713 NMAC Construction/Design Plan of Themporty Plan (trapplicable) based upon the appropriate requirements of 19,151,713 NMAC Despecial Facility Name and Permit Number (for liquids, drilling fulds and trill curings or in ease order closure standards cannot be achieved) Site Cheare Plan. Plan (trapplicable) - based upon the appropriate requirements of 19,151,713 NMAC Descepation Plan of Tempsory Plan (for liquids, drilling fulds and trill curings or in ease order closure standards cannot be achieved) Descepation Plan of Tempsory Plan (for liquids, drilling fulds and trill curings or in ease order closure st	adopted pursuant to NMSA 1978, Section 3-27-3, as amended. - Written confirmation or verification from the municipality; Writed States and Sta	itten approval obtained from th	e municipality	Yes No
Within an unstable area. Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map <pre></pre>	Within the area overlying a subsurface mine. - Written confirmation or verification or map from the NM EMN	RD-Mining and Mineral Divis	ion	Yes No
Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources: USGS; NM Geological Societ; Topographic map FibM map Yes No Yes No Societ; Topographic map Proof Startic Comparison: The back must be detached to the closure plan. Please indices Societ; Topographic map Proof Startic Comparison: The back must be detached to the closure plan. Please indices Societ; Topographic map Proof Startic Comparison: The back must be detached to the closure plan. Please indices Societ; Topographic map Proof Startic Comparison: The back must be detached. Societ; Topographic map Proof Startic Comparison: The back must be detached to the closure plan. Please indices Construction Design Plan of Tuend Trench (if applicable) backed upon the appropriate requirements of 19.15.17.13 NMAC Proof Startic Startic Comparison: The society provide requirements of 19.15.17.13 NMAC Society: Topographic map Proof Startic Startic Comparison: The society provide requirements of 19.15.17.13 NMAC Society: Topographic map Proof Startic Startic Startic Design Plan of Tuends, drilling fluids, and drilling fluids and drill curitings or in case on-site closure standards cannot be achieved) Society: Topographic map Society: Topographic map Tue: Requirements of Stabsection H of 19.15.17.13 NMAC Society: Topographic map Tue: Requirements of Stabsection H of 19.15.17.13 NMAC State Closure Attended to the appropriate requirements of Stabsection H of 19.15.17.13 NMAC State Closure Plan - based upon the appropriate requirements of Stabsection H of 19.15.17.13 NMAC State Relamation Plan - based upon the appropriate requirements of Stabsection H of 19.15.17.13 NMAC State Relamation Plan - based upon the appropriate requirements of Stabsection H of 19.15.17.13 NMAC State Relamation Plan - based upon the appropriate requirements of Stabsection H of 19.15.17.13 NMAC State Relamation Plan - based upon the approp	Within an unstable area.			
initial 100-year floadplain. Image: Start Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indices or concernance in the box, that the documents are attached. Stitt Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indices or concernance in the box, that the documents are attached. Stitt Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: - based upon the appropriate requirements of Subsection E of 19.15.17.13 NMAC Construction Design Plan of Themory Plat (if or inplates based upon the appropriate requirements of 19.15.17.13 NMAC Construction Design Plan of Themory Plat (if or inplates based upon the appropriate requirements of Subsection H or 19.15.17.13 NMAC Disponal Facility Name and Permit Number (for liquids, dfilling fluids and dfill cuttings or in case on-site closure standards cannot be achieved) Social Control Plan - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC Strender Name and Permit Number (for liquids, dfilling fluids and dfill cuttings or in case on-site closure standards cannot be achieved) Social Control Plan - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC Revegetation Plan - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC Streamer Tritle: Regulatory Manager Streamer Tritle: Streamer Martine Filth Concontext Manager Stream	 Engineering measures incorporated into the design; NM Bureau Society; Topographic map 	of Geology & Mineral Resou	rces; USGS; NM Geological	□ Yes □ No
FEMA map	Within a 100-year floodplain.			
milit Chaure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indices marking Sing Criteria Compliance Demonstrations - Seade upon the appropriate requirements of Subsection E of 19.15.17.13 NMAC ConstructionDesign Plan of Temporary Pli (for in-place burial of a drying paul) - based upon the appropriate requirements of Subsection E of 19.15.17.13 NMAC ConstructionDesign Plan of Temporary Pli (for in-place burial of a drying paul) - based upon the appropriate requirements of 19.15.17.13 NMAC ConstructionDesign Plan of Temporary Pli (for in-place burial of a drying paul) - based upon the appropriate requirements of 19.15.17.13 NMAC ConstructionDesign Plan of Temporary Pli (for in-place burial of a drying paul) - based upon the appropriate requirements of 19.15.17.13 NMAC ConstructionDesign Plan of Temporary Pli (for in-place burial of a drying paul) - based upon the appropriate requirements of Subsection Plan / 13.8 NMAC Socie Cover Design - based upon the appropriate requirements of Subsection Plan / 13.8 NMAC Socie Cover Design - based upon the appropriate requirements of Subsection Plan / 13.8 NMAC State Celoanation Plan - based upon the appropriate requirements of Subsection Plan / 13.13 NMAC State Celoanation Plan - based upon the appropriate requirements of Subsection Plan / 13.13 NMAC State Celoanation Plan - based upon the appropriate requirements of Subsection Plan / 19.15.17.13 NMAC State Celoanation Plan - Plan / 14.11 Constructions Celoanation Subsection	- FEMA map			Yes No
	 16. On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: by a check mark in the box, that the documents are attached. Siting Criteria Compliance Demonstrations - based upon the approximate requires Construction/Design Plan of Burial Trench (if applicable) based Construction/Design Plan of Temporary Pit (for in-place burial o Protocols and Procedures - based upon the appropriate requiremee Confirmation Sampling Plan (if applicable) - based upon the appropriate requiremee Disposal Facility Name and Permit Number (for liquids, drilling Soil Cover Design - based upon the appropriate requirements of Site Reclamation Plan - based upon the appropriate requirements of 	Each of the following items to ropriate requirements of 19.15 irements of Subsection E of 19 upon the appropriate requirem f a drying pad) - based upon the ents of 19.15.17.13 NMAC ropriate requirements of 19.15 irements of 19.15.17.13 NMAV fluids and drill cuttings or in c Subsection H of 19.15.17.13 N Subsection H of 19.15.17.13 N	nust be attached to the closure j .17.10 NMAC 9.15.17.13 NMAC tents of Subsection K of 19.15.17 te appropriate requirements of 19 .17.13 NMAC C ase on-site closure standards can MAC MAC 3 NMAC	olan. Please indicate, 7.11 NMAC 0.15.17.11 NMAC not be achieved)
heretor Application Certification: hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief. Anne (Print)	17.		and the second second second	and as not the second
hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief. Signature: Title: Regulatory Manager Date: July 14, 2015 Trail address: Not Hermit Application (including closure plan) Clo Approval: Q Permit Application (including closure plan) OCD Representative Signature:	Operator Application Certification:			
Name (Print) Title: Regulatory Manager ignature: Date: July 14, 2015 -mail address: Non-the data of the print application (ignating closure plan) Closure Plant fonty) OCD Conditions (see attachment) OCD Representative Signature:	I hereby certify that the information submitted with this application is t	rue, accurate and complete to	the best of my knowledge and be	lief.
Signature: Date: July 14, 2015 mail address: Date: July 14, 2015 mail address: Date: S05-333-1822 mail address: Date: OCD Approval: CD Approval: Permit Application (including closure plan) Closure Plan fonly OCD Conditions (see attachment) Approval Experimentative Signature: Approval Date: 7/244/15 Consume required within 60 days of closure completion): 19.15.17.13 NMAC Instructions: Departors are required to be submitted to the division within 60 days of the completion of the 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. Plasure Report (required to be submitted to the division within 60 days of the completion of the 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 and submitting the closure report is required to be submitted to the division within 60 days of the completion Date: * Closure Completion Date: * Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Proof of Closure Notice (surface owner and division) Proof of Closure Notice (surface owner and division) Proof of Closure Notice (surface owner and division)	Heather R. lou	The De La		
Signature: Date: July 14. 2015 -mail address: head-head (equip) (equip) (equip) (equip) (equip) Telephone: 505-333-1822 ADD Approval: Approval: Approval: Approval Application (including closure/plan) Closure Plant Konly) OCD Conditions (see attachment) OCD Representative Signature:	Name (Print): Preus and Pr	Intie: <u>Regulat</u>	ory Manager	
-mail address: hearbor (lequippediation (isoluding closureptan) Felephone:	Signature: NUCTUR Killy	Date: July 14.	2015	
Approval: Permit Application (including closur plan) Closur Plan only OCD Conditions (see attachment) Approval Date:	e-mail address: heather riley oup vehergy.	Com Telephone:	505-333-1822	
Approval. Construction of the documents are attached. Approval Date: 7/24/15 OCD Representative Signature: Approval Date: 7/24/15 OCD Representative Signature: OCD Permit Number: Description of the document of the docume	18. OCD Assessed: N Parmit Application (including closure black	Class Blanding TI OCI	Conditions (see attachment)	
Approval Date:	OCD Approval. A remain Appreador (Breading Closeropian)		7/	hulic
ittle:	OCD Representative Signature:		Approval Date:C	24/15
Inter	Title Francisco Al Solo	OCD Parmit Nur	shore	
Normal 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 complete this ection of the form until an approved closure plan has been obtained and the closure activities have been completed. Closure Period is approved closure plan has been obtained and the closure activities have been completed. Closure Method: Name Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check rark in the box, that the documents are attached. Proof of Closure Notice (surface owner and division) Proof of Closure Surge and temporary pits) Confirmation Sampling Analytical Results (if applicable) Waste Raterial Sampling Analytical Results (required for on-site closure) Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Closure Location: Latitude Longitude NAD: 1927 1983	The porton mency spec.	OCD Fermit Num	ider:	
Waste Excavation and Removal On-Site Closure Method Alternative Closure Method Waste Removal (Closed-loop systems only) If different from approved plan, please explain. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached. Proof of Closure Notice (surface owner and division) Proof of Closure Notice (required for on-site closure for private land only) Plot Plan (for on-site closures and temporary pits) Confirmation Sampling Analytical Results (if applicable) Waste Material Sampling Analytical Results (required for on-site closure) Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) Longitude NAD: [1927] 1983	^{19.} <u>Closure Report (required within 60 days of closure completion)</u> : 15 Instructions: Operators are required to obtain an approved closure particle to be submitted to the division within 60 section of the form until an approved closure plan has been obtained to be approved closure plan has b	0.15.17.13 NMAC lan prior to implementing any 0 days of the completion of the and the closure activities have Closure Con	c closure activities and submittin e closure activities. Please do no e been completed. apletion Date:	ng the closure report. The closure this
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Ke-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Location: Latitude Longitude NAD: [1927] 1983	21. Closure Report Attachment Checklist: Instructions: Each of the formark in the box, that the documents are attached. Proof of Closure Notice (surface owner and division) Proof of Deed Notice (required for on-site closure for private lan Plot Plan (for on-site closures and temporary pits) Confirmation Sampling Analytical Results (if applicable) Waste Material Sampling Analytical Results (required for on-site Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation	Ilowing items must be attache d only) e closure)	ed to the closure report. Please i	indicate, by a check
On-site Closure Location: Latitude Longitude NAD: 1927 1983	Site Reclamation (Photo Documentation)			
	On-site Closure Location: Latitude	Longitude	NAD: 192	27 🔲 1983

Oil Conservation Division

22. Operator Closure Certification:		
I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. Lalso certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.		
Name (Print):	Titla:	
	The	
Signature:	Date:	
e-mail address:	Telephone:	