| District I * 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., 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 July 21, 2008 For temporary pits, closed-loop sytems, and below-grade tanks, submit to the appropriate NMOCD District Office. For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office. | |
|---|---|--|------|
| 1220 D. D. Hundis Di., Banarre, Hur Broos | Pit, Closed-Loop System, Below-Grad | e Tank or | |
| 11/2/2 Prop | osed Alternative Method Permit or Clos | | - |
| 1433 Prop | osed Alternative Method I ennit of Clos | ure Plan Application OIL CONS. DIV DIS | 1. 3 |
| Type of action: | Permit of a pit, closed-loop system, below-grade ta X Closure of a pit, closed-loop system, below-grade t | APR 0.8 2016 | |
| | Modification to an existing permit | | |
| | Closure plan only submitted for an existing permitt below-grade tank, or proposed alternative method | ed or non-permitted pit, closed-loop system, | |
| Instructions: Please submit one a | pplication (Form C-144) per individual pit, closed-loop | o system, below-grade tank or alternative request | |
| Please be advised that approval | of this request does not relieve the operator of liability should operations re | sult in pollution of surface water, ground water or the | |
| environment. Nor does approval rel | ieve the operator of its responsibility to comply with any other applicable a | governmental authority's rules, regulations or ordinances. | |
| 1 | | | |
| Operator: Burlington Resources O | il & Gas Company, LP | OGRID#: 14538 | |
| Address: PO Box 4289, Farmingto | on, NM 87499 | | |
| Facility or well name: Canyon Lar | go Unit 471E | | |
| API Number: 3 | 0-039-30827 OCD Permit Number | 11223 | |
| U/L or Qtr/Qtr: C(NE/NW) Secti | | W County: Rio Arriba | |
| Center of Proposed Design: Latitude | | -107.42248 °W NAD: #### [X] 1983 | |
| | State Private Tribal Trust or Indian | | |
| Surface Owner: X Federal | | Anounent | |
| Permanent Emergency | rkover Cavitation P&A iner type: Thickness mil LLDPE | HDPE PVC Other | |
| 3 Closed-loop System: Subsec Type of Operation: X P&A [| tion H of 19.15.17.11 NMAC Drilling a new well Workover or Drilling (Applies to a notice of intent) | activities which require prior approval of a permit or | |
| Lined Unlined Line | actory Other | DPE PVD Other | |
| Below-grade tank: Subsection Volume: Tank Construction material: | l of 19.15.17.11 NMAC obl Type of fluid: | | |
| Secondary containment with leak de | etection Visible sidewalls, liner, 6-inch lift and autor | natic overflow shut-off | |
| Visible sidewalls and liner | Visible sidewalls only Other | | |
| Liner Type: Thickness | mil HDPE PVC . Other | | |
| | | | |
| 5 Alternative Method: | | | |
| Submittal of an exception request is rea | quired. Exceptions must be submitted to the Santa Fe Environn | nental Bureau office for consideration of approval. | |
| | | | |

| 6 <u>Fencing:</u> Subsection D of 19.15.17.11 NMAC (Applies to permanent pit, temporary pits, and below-grade tanks) Chain link, six feet in height, two strands of barbed wire at top (Required if located within 1000 feet of a permanent residence, school, hospital, instead of barbed wire evenly spaced between one and four feet Alternate. Please specify | titution or church) |
|--|------------------------|
| 7 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) | |
| 8 Signs: Subsection C of 19.15.17.11 NMAC 12" X 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers X Signed in compliance with 19.15.3.103 NMAC | |
| 9 Administrative Approvals and Exceptions: Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance. Please check a box if one or more of the following is requested, if not leave blank: Administrative approval(s): Requests must be submitted to the appropriate division district of the Santa Fe Environmental Bureau office for consideration of approval. Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. | ideration of approval. |
| ¹⁰ <u>Siting Criteria (regarding permitting)</u> : 19.15.17.10 NMAC Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau Office for consideration of approval. Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to drying pads or above grade-tanks associated with a closed-loop system. | |
| Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank. - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells | Yes No |
| Within 300 feet of a continuously flowing watercourse, or 200 feet of any other watercourse, lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark). - Topographic map; Visual inspection (certification) of the proposed site | Yes No |
| Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. | Yes No |
| (Applies to temporary, emergency, or cavitation pits and below-grade tanks) - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image | NA |
| Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applied to permanent pits) Visual inspection (certification) of the proposed site; Aerial photo; Satellite image | Yes No NA |
| Within 500 horizonal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application. | Yes No |
| NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site. Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended Written confirmation or verification from the municipality; Written approval obtained from the municipality | Yes No |
| Within 500 feet of a wetland. US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site | Yes No |
| Within the area overlying a subsurface mine. Written confirmation or verification or map from the NM EMNRD - Mining and Mineral Division | Yes No |
| Within an unstable area. Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map | Yes No |
| Within a 100-year floodplain - FEMA map | Yes No |

Oil Conservation Division

| _ | | | k mark in the box, that the documents are attached. (4) of Subsection B of 19.15.17.9 NMAC |
|--|--|--|--|
| Hydrogeologic Data | (Temporary and Emergency Pits) - | based upon the requirements of P | Paragraph (2) of Subsection B of 19.15.17.9 |
| Siting Criteria Com | bliance Demonstrations - based upor | a the appropriate requirements of | 19.15.17.10 NMAC |
| Design Plan - based | upon the appropriate requirements | of 19.15.17.11 NMAC | |
| Operating and Main | tenance Plan - based upon the appro | priate requirements of 19.15.17.1 | 2 NMAC |
| Closure Plan (Please | the second s | A company of the second s | opriate requirements of Subsection C of |
| Previously Approved D | esign (attach copy of design) | API | or Permit |
| , ,, | | | |
| osed-loop Systems Per structions: Each of the follo | | olication. Please indicate, by a check | MAC mark in the box, that the documents are attached. s of Paragraph (3) of Subsection B of 19.15.17.9 |
| | | | propriate requirements of 19.15.17.10 NMAC |
| = | upon the appropriate requirements | A Designed at the construction of the second | |
| | tenance Plan - based upon the appro | | 2 NMAC |
| | complete Boxes 14 through 18, if a | | opriate requirements of Subsection C of 19.15.17.9 |
| | esign (attach copy of design) | API | |
| | perating and Maintenance Plan | API | |
| | and maintenance r lan | | |
| rmanent Dite Parmit A | pplication Checklist: Subsection | B of 19 15 17 0 NMAC | |
| | | | ck mark in the box, that the documents are attached. |
| - | rt - based upon the requirements of | State and the second se | |
| | bliance Demonstrations - based upor | | |
| Climatological Facto | | i de appropriate requirements or | |
| | g Design Plans - based upon the app | propriate requirements of 19.15.1' | 7.11 NMAC |
| Dike Protection and | Structural Integrity Design: based u | pon the appropriate requirements | of 19.15.17.11 NMAC |
| | gn - based upon the appropriate req | | |
| Liner Specifications | and Compatibility Assessment - bas | ed upon the appropriate requirem | nents of 19.15.17.11 NMAC |
| | lity Assurance Construction and Ins | | |
| | tenance Plan - based upon the appro | | |
| | opping Prevention Plan - based upo | | 19.15.17.11 NMAC |
| Emergency Respons | ous Odors, including H2S, Preventio | in Plan | |
| Oil Field Waste Stre | | | |
| Monitoring and Insp | | | |
| Erosion Control Play | | | |
| | upon the appropriate requirements | of Subsection C of 19.15.17.9 NM | MAC and 19.15.17.13 NMAC |
| | | | |
| oposed Closure: 19.15 | | | |
| | e the applicable boxes, Boxes 14 throu | | |
| pe: Drilling Wo | rkover Emergency Cavitati | on XP&A Permanent Pit | Below-grade Tank X Closed-loop System |
| posed Closure Method: | Waste Excavation and Removal | | |
| | X Waste Removal (Closed-loop sy | | |
| | | or temporary pits and closed-loop sy | ystems) |
| | | On-site Trench | |
| all and the second | Alternative Closure Method (Ex | ceptions must be submitted to the | Santa Fe Environmental Bureau for consideration) |
| | | | |
| | | | ch of the following items must be attached to the closure pla |
| | ark in the box, that the documents are | | C. |
| | lures - based upon the appropriate re | | |
| | me and Permit Number (for liquids, | | Subsection F of 19.15.17.13 NMAC |
| | | | of Subsection H of 19.15.17.13 NMAC |
| 1 J DUL DUCKIIII AND CD | | approprime requirements (| a second in the second se |
| | based upon the appropriate requirer | nents of Subsection L of 19 15 17 | 13 NMAC |

Page 3 of 5

| garding change conmental Bure |
|----------------------------------|
| No |
| No |
| No |
| No |
| |
| No |
| |

Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC

Re-vegetation Plan - based upon the appropriate requirements of Subsection For Forester 1997
 Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

Oil Conservation Division

| Name (Print): | e, accurate and complete to the best of my knowledge and belief. Title: | |
|---|--|-----------|
| | | |
| Signature: | | |
| e-mail address: | Telephone: | |
| CD Approval: Permit Application (including closure place) OCD Representative Signature: Compare the second sec | Closure Plan (only) OCD Conditions (see attachment) Approval Date: 0509 OCD Permit Number: | 2016 |
| | prior to implementing any closure activities and submitting the closure report. The cl mpletion of the closure activities. Please do not complete this section of the form until | |
| 2 2 2 2 2 2 2 3 2 3 2 3 2 3 2 3 2 3 2 3 3 3 4 5 4 5 5 5 5 5 5 5 5 5 5 5 5 5 | hod Alternative Closure Method X Waste Removal (Closed-loop systems | only) |
| | | |
| nstructions: Please identify the facility or facilities for where the liquit pere utilized. Disposal Facility Name: Envirotech / JFJ Landfarm % IEI Disposal Facility Name: Basin Disposal Facility | ts, drilling fluids and drill cuttings were disposed. Use attachment if more than two j Disposal Facility Permit Number: <u>NM-01-0011 / NM-01-0010B</u> Disposal Facility Permit Number: <u>NM-01-005</u> | |
| Were the closed-loop system operations and associated activities perf Yes (If yes, please demonstrate complilane to the items below) Required for impacted areas which will not be used for future service Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique | The second secon | location) |
| Were the closed-loop system operations and associated activities perf Yes (If yes, please demonstrate complilane to the items below) Required for impacted areas which will not be used for future service Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Closure Report Attachment Checklist: Instructions: Each of the box, that the documents are attached. Proof of Closure Notice (surface owner and division) Proof of Deed Notice (required for on-site closure) Plot Plan (for on-site closures and temporary pits) Confirmation Sampling Analytical Results (if applicable) Waste Material Sampling Analytical Results (if applicable) Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique | The second secon | |
| Were the closed-loop system operations and associated activities perf Yes (If yes, please demonstrate complilane to the items below) Required for impacted areas which will not be used for future service Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Closure Report Attachment Checklist: Instructions: Each of the box, that the documents are attached. Proof of Closure Notice (surface owner and division) Proof of Deed Notice (required for on-site closure) Plot Plan (for on-site closures and temporary pits) Confirmation Sampling Analytical Results (if applicable) Waste Material Sampling Analytical Results (if applicable) Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation | The primed on or in areas that will not be used for future service and opeartions? (Original Approved Drying Pad was not utilized for this and operations: | k mark in |
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| Were the closed-loop system operations and associated activities performed by the second structure of the second struct | primed on or in areas that will not be used for future service and opeartions? Image: Image | k mark in |
| Were the closed-loop system operations and associated activities performed by the system operations and associated activities performed by the system operation and associated activities performed by the system operation of the system operation of the system operation of the system operation operation operation (Photo Documentation) Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Closure Report Attachment Checklist: Instructions: Each of the box, that the documents are attached. Proof of Closure Notice (surface owner and division) Proof of Deed Notice (required for on-site closure) Plot Plan (for on-site closures and temporary pits) Confirmation Sampling Analytical Results (if applicable) Waste Material Sampling Analytical Results (if applicable) Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Location: Latitude: | primed on or in areas that will not be used for future service and opeartions? Image: Image | k mark in |
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Form C-144

Oil Conservation Division