$\mathbf{C-144}$

Permanent Pit

Closure Plan Approval

Dist ist I
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 V. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

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1.

State of New Mexico Energy Minerals and Natural Resources Department Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505

1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 1301 V. Grand Avenue, Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Road, Aztec, NM 87410 <u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Energy Minerals and Natural Resources Department Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	For temporary pits, closed-loop systems, 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.
<u>Pit, C</u>	Closed-Loop System, Below-Grade 7	<u>Fank, or</u>
Proposed Alte	ernative Method Permit or Closure F	Plan Application
Closu	it of a pit, closed-loop system, below-grade tank, o re of a pit, closed-loop system, below-grade tank, fication to an existing permit re plan only submitted for an existing permitted or sed alternative method	or proposed alternative method
Instructions: Please submit one application	ation (Form C-144) per individual pit, closed-loop syste	em, below-grade tank or alternative request
Please be advised that approval of this request does n environment. Nor does approval relieve the operator	ot relieve the operator of liability should operations result i of its responsibility to comply with any other applicable go	n pollution of surface water, ground water or the
I. Operator: Jay Management Co., LLC	OGRID #:	247692
Address:4801 Woodway Suite 100E Hous	ston, TX 77056	
	OCD Permit Number:	
	Township <u>11S</u> Range <u>33E</u>	
	70NLongitude103.62395W	
Surface Owner: 🔲 Federal X State 🗌 Private	Tribal Trust or Indian Allotment	
2,		
X Pit: Subsection F or G of 19.15.17.11 NMA	AC	
Temporary: 🔲 Drilling 🔲 Workover		
X Permanent 🗋 Emergency 🔲 Cavitation 🔲	P&A	
X Lined Unlined Liner type: Thickness	40 mil 🗌 LLDPE X HDPE 🗌 PVC 🗌 C	Other
String-Reinforced		
Liner Seams: X Welded [] Factory [] Other	Volume: 10 b	bl Dimensions: L <u>15'</u> x W <u>20'</u> x D <u>5'</u>
. Closed-loop System: Subsection H of 19.1	5.17.11 NMAC	
	well 🔲 Workover or Drilling (Applies to activities wh	ich require prior approval of a permit or notice of
Drying Pad Above Ground Steel Tanks	Haul-off Bins D Other	
] Other
Liner Seams: Welded Factory Othe	· · · · ·	
	·	
4. Below-grade tank: Subsection 1 of 19.15.1 Volume: bbl	17.11 NMAC	
Tank Construction material:		
Secondary containment with leak detection	Visible sidewalls, liner, 6-inch lift and automatic or	verflow shut-off
□ Visible sidewalls and liner □ Visible side	walls only 🔲 Other	
Liner type: Thicknessm	hil 🗌 HDPE 🗌 PVC 🗌 Other	·
5.		
Alternative Method:		
Submittal of an exception request is required. E	Exceptions must be submitted to the Santa Fe Environme	ental Bureau office for consideration of approval.

1.

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)

X Four foot height, four strands of barbed wire evenly spaced between one and four feet

Alternate. Please specify_

6

7.

8

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

Screen X Netting Other_

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

Signs: Subsection C of 19.15.17.11 NMAC

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

Signed in compliance with 19.15.3.103 NMAC

Administrative Approvals and Exceptions:

Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance.

Please check a box if one or more of the following is requested, if not leave blank:

	Administrative approval(s):	Requests must	be submitted to	o the appropriate	division district or	the Santa Fe Er	vironmental Bu	ireau off	ice for
conside	eration of approval.								

Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.

10. Siting Criteria (regarding permitting): 19.15.17.10 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 accept material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appro- office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of a Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to dry above-grade tanks associated with a closed-loop system.	ppriate district approval.
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 X No
 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 X No
 Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to temporary, emergency, or cavitation pits and below-grade tanks) Visual inspection (certification) of the proposed site; Aerial photo; Satellite image 	☐ Yes X No ☐ NA
 Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application. (Applies to permanent pits) Visual inspection (certification) of the proposed site; Aerial photo; Satellite image 	☐ Yes X No ☐ NA
 Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application. NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site 	☐ Yes X 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 	🗋 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 X No
Within the area overlying a subsurface mine. - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division	🗌 Yes X No
 Within an unstable area. Engineering measures incorporated into the design; NM Bureau of Geology & Mineral Resources; USGS; NM Geological Society; Topographic map 	🔲 Yes X No
Within a 100-year floodplain.	🗌 Yes X No

- FEMA map

11. <u>Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment Checklist</u> : Subsection B of 19.15.17.9 NMAC <i>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.</i>
 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 19.15.17.11 NMAC
 Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Previously Approved Design (attach copy of design) API Number: or Permit Number:
12.
<u>Closed-loop Systems Permit Application Attachment Checklist</u> : Subsection B of 19.15.17.9 NMAC Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.
Geologic and Hydrogeologic Data (only for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9 Siting Criteria Compliance Demonstrations (only for on-site closure) - based upon the appropriate requirements of 19.15.17.10 NMAC
Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC
 Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC
and 19.15.17.13 NMAC
Previously Approved Design (attach copy of design) API Number:
Previously Approved Operating and Maintenance Plan API Number: (Applies only to closed-loop system that use
above ground steel tanks or haul-off bins and propose to implement waste removal for closure)
^{13.} <u>Permanent Pits Permit Application Checklist</u> : 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 Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
14. <u>Proposed Closure</u> : 19.15.17.13 NMAC <i>Instructions: Please complete the applicable boxes, Boxes 14 through 18, in regards to the proposed closure plan.</i>
Type: 🗌 Drilling 🗌 Workover 🗋 Emergency 🗌 Cavitation 🗌 P&A X Permanent Pit 🗍 Below-grade Tank 🔲 Closed-loop System
Alternative Proposed Closure Method: X 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 (Exceptions must be submitted to the Santa Fe Environmental Bureau for consideration)
15. <u>Waste Excavation and Removal Closure Plan Checklist</u> : (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indicate, by a check mark in the box, that the documents are attached.
 X Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC X Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
 X Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings) X Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC
X Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC
X Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

Borrane Application Certification: Thereby certify that the information submined with this application is true, accurate and complete to the best of my knowledge and belief. Name (Prim):	• • • • •	
I berchy certify that the information submitted with this application in true, accurate and complete to the best of my knowledge and belief. Name (Pfinit):	19. Operator Application Certification:	
Signature:		curate and complete to the best of my knowledge and belief.
e-mail address: <u>MARL & CISKBA CO</u> - <u>JAY. CO</u>		
BCD Approval: Permit Application Linckeding closure plan) Closure Plan (only) OCD Conditions (see attachment) OCD Representative Signature:	Signature: Kits Grannen.	Date: <u>2-28-09</u>
OCD Approval: Permit Application (indudting closure plan) Image: State induction: State inductane: State inductane: State inductane induction: State	e-mail address: KIRKB@ISRAA.CO-JAY.CO.	<u>m</u> Telephone: <u>113-456-2892 Exi 302</u>
Title:	OCD Approval: Permit Application (including closure plan) OC Closure	
Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Instructions: Operators are required to obtain an approved closure plan piot to implementing any closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed. Instructions: Please in the closure closure plan has been obtained and the closure activities have been completed. Instructions: Please indication of the form until an approved closure plan has been obtained and the closure activities have been completed. Instructions: Please indication of the form until an approved closure plan has been obtained and the closure activities have been completed. Instructions: Please indication of the form until an approved plan, please explain. Instructions: Please indication of the closure for Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: Instructions: Please indication of the facility of facilities for where the liquids, drilling fluids and drill cutings were disposed. Use attachment if more that no facilities were utilized. Disposal Facility Name: Disposal Facility Permit Number: Disposal Facility Name: Disposal Facility Permit Number: Disposal Facility Name: Disposal Facility Permit Number: Site Reclamation (Photo Documentation) So all daschiting and Cover Installation Required for inpacted areas which will not be used for future service and operations? Yes (If yes, please dem		
Closure Method: On-Site Closure Method Alternative Closure Method Waste Excavation and Removal On-Site Closure Method Waste Excavation and Removal Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: Instructions: Please indentify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more that two facilities were utilized. Disposal Facility Name:	<u>Closure Report (required within 60 days of closure completion)</u> : Subsection Instructions: Operators are required to obtain an approved closure plan prion The closure report is required to be submitted to the division within 60 days of	or to implementing any closure activities and submitting the closure report. of the completion of the closure activities. Please do not complete this e closure activities have been completed.
Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tasks or Haul-off Bins Only: Instructions: Please indentify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more that not facilities were utilized. Disposal Facility Name:	Closure Method:	ernative Closure Method 🔲 Waste Removal (Closed-loop systems only)
Disposal Facility Name: Disposal Facility Permit Number: Were the closed-loop system operations and associated activities performed on or in areas that will not be used for future service and operations? Yes (If yes, please demonstrate compliance to the liems below) No Required for impacted areas which will not be used for future service and operations: No Still Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Re-vegetation Application Rates and Seeding Technique Zet 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 Deed Notice (surface owner and division) Proof of Closure Rooments and tenporary pils) Confirmation Sampling Analytical Results (required for on-site closure) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique NAD: [1927] 1983 Zet Confirmation Sampling Analytical Results (if applicable) Waste Material Sampling Analytical Results (if applicable) NAD: [1927] 1983 Zet Confirmation Sampling Analytical Results (if applicable) NAD: [1927] 1983 Zet Confirmation Sampling Analytical Results (if applicable) NAD: [1927] 1983	Closure Report Regarding Waste Removal Closure For Closed-loop System Instructions: Please indentify the facility or facilities for where the liquids, de two facilities were utilized.	drilling fluids and drill cuttings were disposed. Use attachment if more than
Were the closed-loop system operations and associated activities performed on or in areas that will not be used for future service and operations? Yes (If yes, please demonstrate compliance to the items below) No Required for impacted areas which will not be used for future service and operations: No Site Reclamation (Photo Documentation) Site Reclamation (Photo Documentation) Required for impacted areas which will not be used for future service and operations: No Required for impacted areas which will not be used for future service and operations: Site Reclamation (Photo Documentation) Site Reclamation (Photo Documents are attached 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 (surface owner and division) Proof of Deed Notice (required for on-site closure) Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Revegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Certification: In there we except and prover Installation NAD: [1927] 1983 Zoperator Closure Certification: Interby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowl		
□ Yes (If yes, please demonstrate compliance to the items below) □ No Required for impacted areas which will not be used for future service and operations: □ Site Reclamation (Photo Documentation) □ Site Reclamation Application Rates and Seeding Technique □ 24. □ Re-vegetation Application Rates and Seeding Technique 24. □ Istachalting and Cover Installation □ Proof of Closure Notice (surface owner and division) □ □ Proof of Closure Notice (surface owner and division) □ □ Proof of Closure Notice (surface owner and division) □ □ Proof of Closure Notice (required for on-site closure) □ □ Pito Plan (for on-site closures and itemporary pits) □ Confirmation Sampling Analytical Results (if applicable) □ Waste Material Sampling Analytical Results (if equired for on-site closure) □ □ □ Disposal Facility Name and Permit Number □ Soil Backfilling and Cover Installation □ Re-vegetation Application Rates and Seeding Technique □ NAD: □!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	· · · ·	
Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique 24. Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached. Proof of Closure Notice (crequired for on-site closure) Piot Plan (for on-site closures and temporary pits) Confirmation Sampling Analytical Results (required for on-site closure) Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Location: Latitude Longitude NAD: [1927] 1983 25. Operator Closure Certification: I hereby certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan. Name (Print): Title: Signature: Date:		•
Closure Report Attachment Checklist: Instructions: Each of the 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 Ded Notice (required for on-site closure) Plot Plan (for on-site closures and temporary pits) Confirmation Sampling Analytical Results (if applicable) Waste Material Sampling Analytical Results (required for on-site closure) Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Location: Latitude I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan. Name (Print):	 Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation 	rations:
25. <u>Operator Closure Certification:</u> I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan. Name (Print): Title: Date: Date: Date: Date: Date:	Closure Report Attachment Checklist: Instructions: Each of the following mark in the box, that the documents are attached. Proof of Closure Notice (surface owner and division) Proof of Deed Notice (required for on-site closure) Plot Plan (for on-site closures and temporary pits) Confirmation Sampling Analytical Results (if applicable) Waste Material Sampling Analytical Results (required for on-site closure Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation)	re)
Operator Closure Certification: I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan. Name (Print):		ngitude NAD: [_]1927 [_] 1983
Signature: Date:	Operator Closure Certification: I hereby certify that the information and attachments submitted with this closur	
	Name (Print):	Title:
e-mail address: Telcphone:	Signature:	Date:
	e-mail address:	Telephone:

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Pit Closure Protocol Jay Management Company Satellite 2

1.0 Purpose

This protocol is to provide a detailed outline of the steps to be employed in the closure of an emergency brine disposal pit near Tatum, New Mexico.

2.0 Scope

This protocol is site specific for the Satellite 2 Closure Project. The site is presently protected by an intact 40 mil HDPE liner and does not appear to pose an imminent danger to fresh water, public health or the environment.

3.0 Schedule

Final closure of the site must be completed by December 31, 2009 in accordance with ASO-010-A.

4.0 Safety

- 4.1 Prior to work on the site, Jay Management shall obtain the location and phone numbers of the nearest emergency medical treatment facility. Jay Management will review all safety related issues with the appropriate personnel, sub-contractors and exchange phone numbers.
 - 4.2 A tailgate safety meeting shall be held and documented each day. All subcontractors must attend and sign the daily log-in sheet.
 - 4.3 Anyone allowed on to location must be wearing sleeved shirts, steel toed boots, and long pants. Each vehicle must be equipped with two way communication capabilities.
 - 4.4 Prior to any excavation, the area shall be surveyed with a line finder. If lines are discovered within the area to be excavated they shall be marked with pin flags on either side of the line at maximum five foot intervals.

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5.0 Closure Procedure

- **5.1** Jay Management will notify the surface owner by certified mail, return receipt requested, that they plan to close the permanent pit. Evidence of the mailing of the notice to the surface owner shown in the county tax records shall be sufficient to demonstrate compliance with this requirement.
- **5.2** Jay Management shall additionally notify the NMOCD Environmental Bureau in the division's Santa Fe Office at least sixty days in advance of the proposed schedule for closure. The notification will include a proposed schedule of activities.
- **5.3** There are presently no fluids within the impoundment. Any fluids within the permanent pit will be at the time of closure will be rain water which will be pumped into the adjacent storage tank for processing through the existing system consisting of separators and a licensed saltwater disposal well.
- 5.4 The plastic liner and all solid contaminants contained within will be tested for the presence of NORM (naturally occurring radioactive materials) in accordance with 20 NMAC 3.1, subpart 14. If acceptable concentrations are found, the liner and soils shall be excavated and transported to the Gandy-Marley landfill (permit no. NM 1-0019) located near Caprock, New Mexico.
- **5.5** Netting, fencing, pipes or other ancillary equipment will be removed and used at other locations.
- 5.6 Jay Management will test the soils beneath the permanent pit to determine whether a release has occurred. Jay management will collect, at a minimum, a five point, composite sample; collect individual grab samples from any area that is wet, discolored or showing other evidence of a release; and analyze for BTEX, TPH and chlorides to demonstrate that the benzene concentration, as determined by EPA SW-846 methods 8021B or 8260B or other EPA method that the division approves, does not exceed 0.2 mg/kg; total BTEX concentration, as determined by EPA SW-846 methods 8021B or 8260B or other EPA method that the division approves, does not exceed 50 mg/kg; the TPH concentration, as determined by EPA method 418.1 or other EPA method that the division approves, does not exceed 100 mg/kg; and the chloride concentration, as determined by EPA method 300.1 or other EPA method that the division approves, does not exceed 250 mg/kg, or the background concentration, whichever is greater. Jay Management shall notify the division of its results on form C-141. Jay

Management recognize that the division may require additional delineation upon review of the results.

- 5.7 If Jay Management or the division determines that a release has occurred, Jay Management will comply with 19.15.29 NMAC and 19.15.30 NMAC, as appropriate.
 - **5.8** If the sampling program demonstrates that a release has not occurred or that any release does not exceed the concentrations specified in paragraph 5.6 of this procedure, Jay Management will backfill the excavation with compacted, non-waste containing, earthen material, construct a division-prescribed soil cover; re-contour the location to match existing elevations and re-vegetate the site in accordance with paragraph 5.9 of this procedure.
 - **5.9** Jay Management will 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 revegetate according to Subsection I of 19.15.17.13 NMAC.
 - **5.10** The soil cover for closures shall consist of the background thickness of topsoil or one foot of suitable material to establish vegetation at the site, whichever is greater. Jay Management will construct the soil cover to the site's existing grade and prevent ponding of water and erosion of the cover material.
 - **5.11** Jay Management will seed by drilling on the contour whenever practical or by other division-approved methods. Jay Management will obtain vegetative cover that equals 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 maintain that cover through two successive growing seasons. During the two growing seasons that prove viability, there shall be no artificial irrigation of the vegetation.

Jay Management will repeat seeding or planting until it successfully achieves the required vegetative cover. If conditions are not favorable for the establishment of vegetation, such as periods of drought, the division may allow Jay Management to delay seeding or planting until soil moisture conditions become favorable or may require Jay Management to use additional cultural techniques such as mulching, fertilizing, irrigating, fencing or other practices. The request must be made by Jay Management and approved by the NMOCD Environmental Bureau.

Jay Management will notify the division when it has seeded or planted and when it successfully achieves re-vegetation.

6.0 Closure Report

At the conclusion of the project, Jay Management shall submit a closure report within 60 days of closure which contains the following minimum information:

- Photographs of the location prior to closure
- Photographs of the excavation at maximum size
- Photographs of the location at time of final closure
- NORM survey report
- Confirmation sampling analytical results
- Manifests of all materials sent to commercial disposal to include permit number
- Soil backfilling and cover installation
- Re-vegetation application rates and seeding techniques
- Proof of closure notice to the division and surface owner

New Mexico Office of the State Engineer

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Township: 115 Ran	ge: 33E Sections: 28
NAD27 X: Y:	Zone: Search Radius:
County: LE Basin: LC	Lea County) Number: Suffix:
Owner Name: (First)	(Last) ©Non-Domestic ©Domesti
POD / Surface Data Report	Avg Depth to Water Report Water Column Report
Clea	ar Form iWATERS Menu Help

AVERAGE DEPTH OF WATER REPORT 04/18/2009

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							(Depth	Water in	Feet)
Bsn	Tws	Rng Sec	Zone	x	Y	Wells	Min	Max	Avg
L	11S	33E 28				6	50	70	60

Record Count: 6



New Mexico Office of the State Engineer Water Column/Average Depth to Water

(quarters are 1=NW 2=NE 3=SW 4=SE)

	Sub	(quarte					to larg		(NAD83 UTM		脾肉麻痹	(In feet)	
POD Number		County	1 <u>64</u>	ц 16	4	Sec	, Tws	Rng		<u>المحمد المحمد المحم محمد المحمد ا</u>	Well	Depth W WaterCo	lum
L 01151	PRO	LE		4	4	33	11S	33E	629132	3687276*	130	50	8
L 03361	PRO	LE		3	3	20	11S	33E	626269	3690456*	120	70	ę
L 03361 APPRO	PRO	LE		3	3	20	11S	33E	626269	3690456*	120	70	:
L 03368	PRO	LE		3	3	28	11S	33E	627902	3688869*	143	70	
L 03368 APPRO	PRO	LE		3	3	28	11S	33E	627902	3688869*	143	70	
L 03450	PRO	LE	3	4	1	33	11S	33E	628215	3687969*	136	55	
L 03450 APPRO	PRO	LE	3	4	1	33	11S	33E	628215	3687969*	136	55	
L 03890	PRO	LE	3	4	2	33	11S	33E	629019	3687979*	137	75	
L 03890 APPRO	PRO	LE	3	4	2	33	11S	33E	629019	3687979*	137	75	
L 04168	DOM	LΕ		4	3	22	1 1S	33E	629890	3690503*	70	40	
L 04168 APPRO	DOM	LE		4	3	22	11S	33E	629890	3690503*	70	40	
L 04543	PRO	LE		1	2	22	11S	33E	630275	3691715*	90	60	
L 04543 APPRO	PRO	LE		1	2	22	11S	33E	630275	3691715*	90	60	
L 04919	STK	LE				21	11S	33E	628481	3691082*	70	55	
L 05091 EXPL	EXP	LE			2	34	11S	33E	630528	3688296*	140	65	
L 05109 REPAR	STK	LΕ		3	1	29	11S	33E	626281	3689652*	80	64	
L 05110	STK	LE	1	1	4	32	11S	33E	627014	3687751*	99	66	
L 05236	PRO	LE		4	2	22	1 1 S	33È	630684	3691318*	84	39	
L 05488	DOM	LE	2	2	2	27	1 1 S	33E	630799	3690211*	65	65	
L 05603	PRO	LE		1	1	22	11S	33E	629470	3691704*	90	40	
L 05748	DOM	LE			1	21	11S	33E	628067	3691484*		50	
L 05760	PRO	LE		2	2	21	11S	33E	629067	3691699*		50 -	
L 05945	PRO	LE		2	1	21	11S	33E	628262	3691690*	90	52	
L 06016	PRO	LE		3	4	22	11S	33E	630292	3690508*	120	50	
L 06082	PRO	LE		2	3	29	11S	33E	626689	3689255*	126	70	
L 06092	PRO	LE		3	2	28	1 1 S	33E	628694	3689684*	125	55	
L 06111	PRO	LE	3	3	3	21	11S	33E	627777	3690378*	120	70	
L 06147	PRO	LE		2	2	28	1 1 S	33E	629091	3690090*	,115	50	
L 06248	PRO	ĻΕ		1	4	28	11S	33E	628700	3689281*	110	55	
location was derived from PL	SS - see Help			 .				1					

		(quarters	are s	ma	llest	to larg	est) (NAD83 UTN	1 in meters)		(In feet)	Color Martin
a the state of the second s	Sub u asin Use C	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 Q 4 16	4. A 14	Sec	Tws	Rng	X		ALL STREET	Depth∫W WaterCo	、 在 品 题 32
L 06267	PRO	LE ·	4	1	29	1 1 S	33E	626683	3689657*	105	65	40
L 06371 (E)	PRO	LE	3	1	28	1 1 S	33E	627890	3689674*	110,	60	50
L 06466	DOM	LE	1	4	20	11S	33E	627067	3690870*		70	
L 09545	PRO	LE	2	4	34	11S	33E	630735	3687698*	154	70	84
L 09565	PRO	LE	2	3	34	11S	33E	629931	3687688*	155	48	107
								Avera	age Depth to	Water:	58 fee	et
									Minimum	Depth:	39 fee	ət
									Maximum	Depth:	75 fee	et
Record Count: 34	Y YOM YOUNY MICH WANN WITH MICH.											bayo nan amad

Basin/County Search:

Basin: Lea County

County: Lea

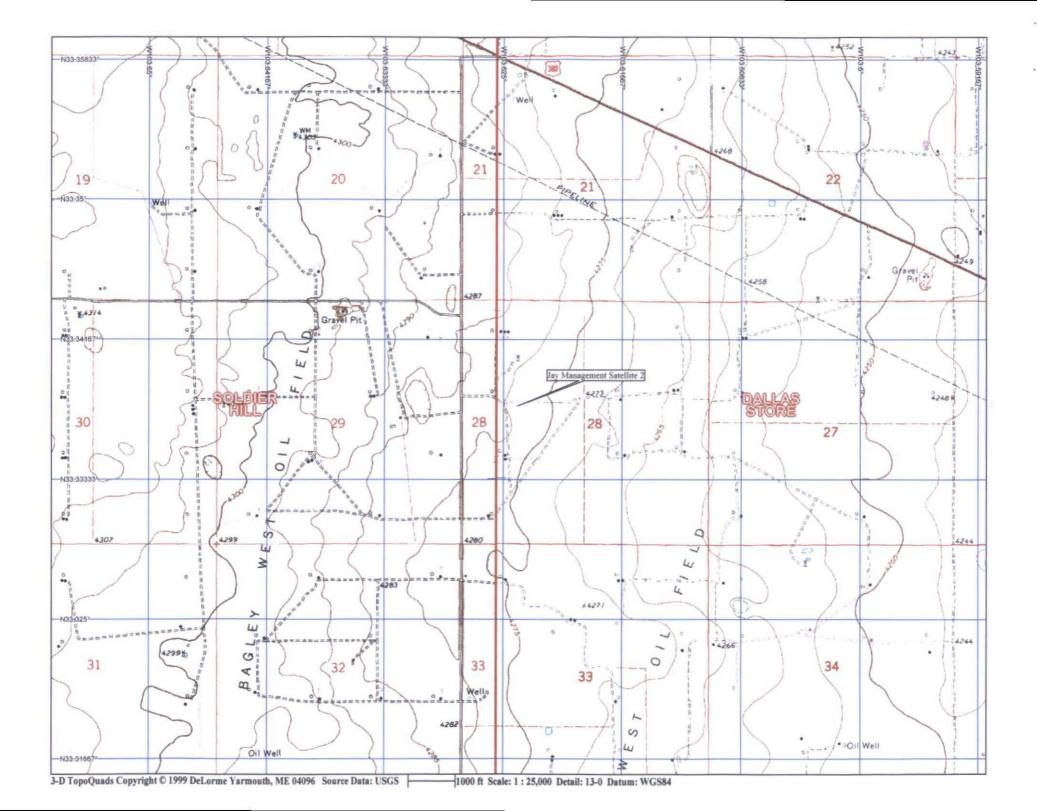
Township: 11S

PLSS Search:

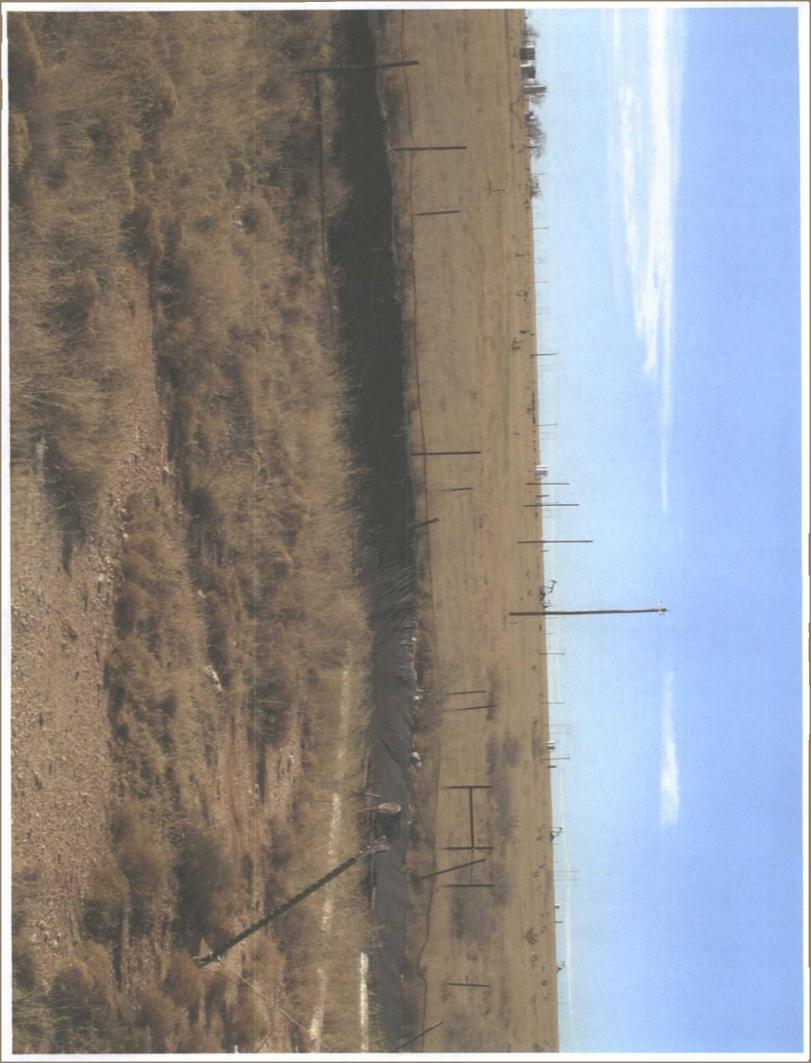
Section(s): 20, 21, 22, 27, 28, 29, 32, 33, 34 Range: 33E

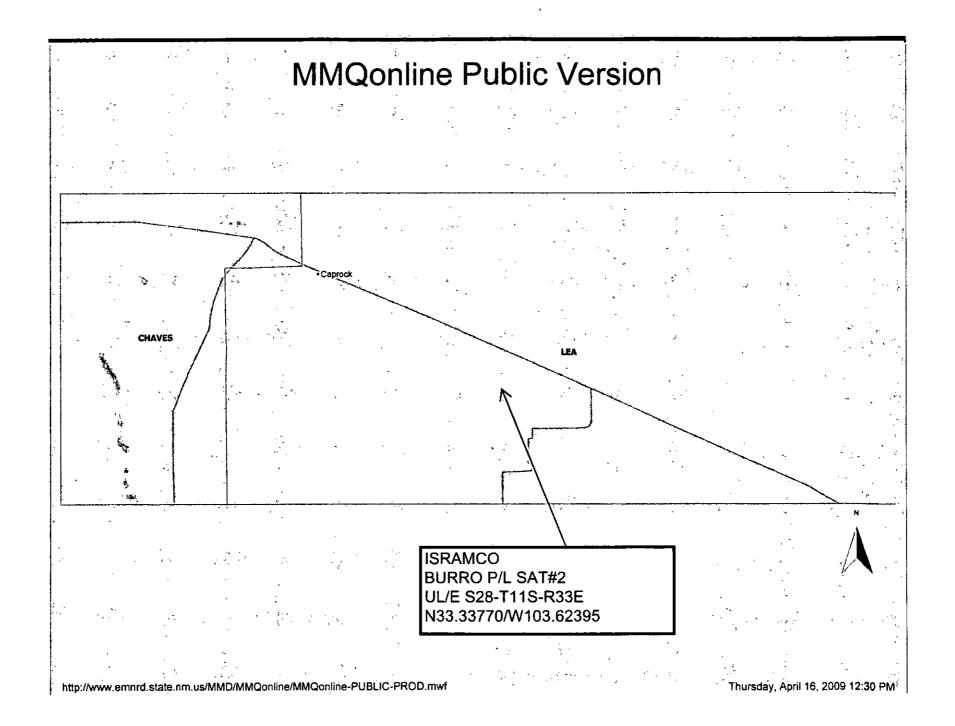
*UTM location was derived from PLSS - see Help

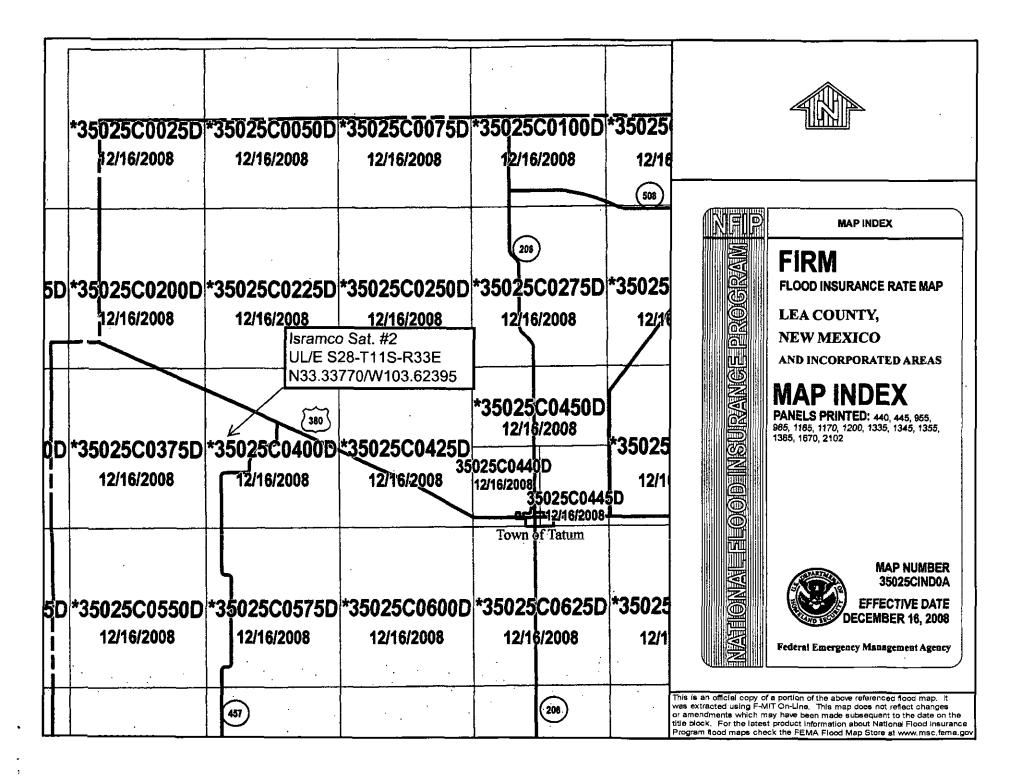
The data is furnished by the NMOSE/ISC and is accepted by the recipient with the expressed understanding that the OSE/ISC make no warranties, expressed or implied, concerning the accuracy, completeness, reliability, usability, or suitability for any particular purpose of the data.













Whole Earth Environmental, Inc. 2103 Arbor Cove Katy, Tx. 77494 281.394.2050 whearth@msn.com

PECEWED OCD

September 28, 2009

NMOCD 1220 South St. Francis Dr. Santa Fe, NM 87505

Ref: ASO-010-A

Attn: Brad Jones

Dear Mr. Jones:

This is to serve as notification of our intent to close four permanent pits in Lea County in behalf of Jay Management Co., LLC in accordance with protocols PR-119 through PR-122 (attached).

Jay Management plans to schedule the excavation and removal of all pit contents as soon as we receive approval from the NMOCD and NMSLO. Hopefully, Whole Earth Environmental will receive such approval by October 2nd. If such approval is receive, we plan to conduct the remediation activities in accordance with the attached schedule.

Whole Earth will communicate with the Hobbs district office advising them at least forty-eight hours in advance of the beginning of any field activity and will similarly provide a forty-eight hour notification of any testing being conducted at the sites.

Warmest personal regards,

Mike Griffin President Whole Earth Environmental, Inc.

Jones, Brad A., EMNRD

From:	Mike Griffin [Mikeg@vadose.us]
Sent:	Wednesday, September 30, 2009 9:28 AM
То:	Jones, Brad A., EMNRD
Cc:	Roy Rascon ; Elliot Werner; Chris Griffin
Subject:	Jay Management / Isramco Clarifications

Good Morning, Brad:

All four facilities, (Satellites 1, 2, 3 and 5) are classified as transfer stations leading to a single disposal well named the State OG-SWD 002, API No. 30-025-31381 situated at Unit L, Section 9, Township 11S, Range 33E. Jay Management's OGRD number is 247692.

I will have the specific water depths from the individual wells from the State Engineer's office for Satellites 2, 3 and 5 early this afternoon.

Thank you again for your assistance in getting the pit remediation protocols through the system.

Mike Griffin

 President
 5

 Whole Earth Environmental
 Office: (281) 394-2050

 Cell :
 (713) 376-2790

 Fax:
 (281) 393-2051

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October 2009 November 2009 October 2009 Su Mo Tu We Th Tu We Th Fr Su Mo Fr 5a Sa 2 3 9 10 16 17 23 24 30 31 1 8 15 22 29 2 9 16 23 30 6 7 13 14 20 21 27 28 3 4 5 10 11 12 17 18 19 24 25 26 1 8 15 22 29 4 5 11 12 18 19 25 26 6 13 20 27 7 14 21 28 Tuesday Wednesday Thursday Friday Saturday Sunday Monday 29 Ôct 1 28 30 2 3 Sep 27 ŝ ð 27 Sep 7 5 6 8 9 10 4 10 1 4 ö 1 12 14 17 13 15 16 11 Excavation of Satellites 2 & 3 - 17 Oct 11 21 19 20 22 23 24 18 Soil Testing of Satellites 2 & 3 / Begin excavation of Satellite 1 - 24 Oct 18 -25 26 27 28 29 30 31 Begin Excavation of Satellite 5 / Soil Testing of Satellite 1 31 Oct 25

Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa 1 2 3 4 5 6 7 8 9 10 11 12 13 14 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 13 14 15 16 17 18 19 20 21 20 21 22 23 24 25 26 27 28 20 21 22 23 24 25 26 27 28 29 30 31						
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Nov 1	2	3	4 oil Testing of Satellite 5 / Be	5 gin final contouring of Sats	6	7
8	9	10	11	12	13	14
			Final Conto	uring of Satellite 5		
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	Dec 1	2	3	4	5

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