

NM1 - 23

**GENERAL
CORRESPONDENCE**

YEAR(S):

2005-1996

J&L LANDFARM, INC.

P.O. Box 356
Hobbs, New Mexico 88241-0356
Phone (505) 392-9697
Fax (505) 392-8537

2007 JAN 17 PM 3 08

January 9, 2007

NM Energy, Minerals & Natural
Resources Dept. (OCD)
1220 South St. Francis Drive
Santa Fe, New Mexico 87505

RE: Request for Discontinued Maintenance Status and Application of Additional
Lifts in designated cells

Attn: Wayne Price

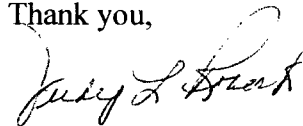
We are requesting a **Discontinued Maintenance Status** for the following active cells within our landfarming facility: cells 2-10, 16; cells 12-15, 17-23, 25-31. A composite of the hydrocarbon impacted soil of each individual cell was collected and analytically tested for TPH/B-TEX. The results of the testing are attached.

Permission is also requested to use the remediated soil in these cells within our facility to maintain high and durable berms around existing cells and for use on roads within facility for ease of access and maintenance.

We would use these cells for application of additional lifts, after the remediated soil has been removed using bulldozers and such equipment to ensure the 6 inch lift of soil in each cell is maintained.

If you need other information, please call me at (505) 631-5765.

Thank you,



Judy L. Roberts

Xc Hobbs OCD

**ASSAIGAI
ANALYTICAL
LABORATORIES, INC.**

Chain of Custody Record

Lab Job No. 1113439 Date 12-12-06

Page 1 of 2

4301 Masthead N.E.
ALBUQUERQUE, NEW MEXICO 87109
(505) 345-8964

3332 WEDGEWOOD
EL PASO, TEXAS 79925
(915) 583-6000

127 EASTGATE DRIVE, 212-C
LOS ALAMOS, NEW MEXICO 87544
(505) 662-2558

Client TEL. LANDFARM
Address P.O. BOX 356
City/State/Zip Hobbs, N.Mex. 88240
Project Name / Number Close-CUT Cells

Project Manager / Contact LEE M. Roberts
Telephone No. 505-631-5765
Fax No. 505-392-8537
Samplers: (signature) Lee M. Roberts

Contract / Purchase Order / Quote

AAU Fraction Number	Field Sample Number / Location	Date	Time	Sample Type	Type / Size of Container	Preservation		No. of Containers	Analysis Required	Remarks
						Temp.	Chemical			
0001A	Cell # 12	12-12	0910	Soil	4 1/2 glass		None	1	X	
0002A	Cell # 13	"	0910	"	"		"	1	X	
0003A	Cell # 14	"	0920	"	"		"	1	X	
0004A	Cell # 15	"	0930	"	"		"	1	X	
0005A	Cell # 17	"	0940	"	"		"	1	X	
0006A	Cell # 18	"	0945	"	"		"	1	X	
0007A	Cell # 19	"	0955	"	"		"	1	X	
0008A	Cell # 20	"	1005	"	"		"	1	X	
0009A	Cell # 21	"	1015	"	"		"	1	X	
0010A	Cell # 22	"	1020	"	"		"	1	X	
0011A	Cell # 23	"	1030	"	"		"	1	X	
0012A	Cell # 25	"	1040	"	"		"	1	X	

Relinquished by:		Received by:	
Signature	Date	Signature	Date
<u>LEE M. Roberts</u>	<u>12-12-06</u>	<u>Lee M. Roberts</u>	<u>12/14/06</u>
Printed <u>LEE M. Roberts</u>		Printed <u>Lee M. Roberts</u>	
Company <u>TEL. LANDFARM</u>		Company <u>AAI</u>	
Reason <u>CLOSE CUT</u>		Reason <u>AAI</u>	

Method of Shipment		Comments:	
Shipment No.	Special Instructions:		
		<u>Color temp. 4.0</u>	

After analysis, samples are to be:	
<input type="checkbox"/> Disposed of (additional fee)	<input type="checkbox"/> Stored over 30 days (additional fee)
<input type="checkbox"/> Stored (30 days max)	<input type="checkbox"/> Returned to customer

CARRIER

Chain of Custody Record

127 EASTGATE DRIVE, 212-C
LOS ALAMOS, NEW MEXICO 87544
(505) 662-2558

Page 2 of 2

Project Manager / Contact

Telephone No. 202 607 2102

Fax No. 00-256-0221

Samplers : (signature) Y. L. L. 8.6.1. N. 10.00.00

Contract / Purchase Order / Quote

[illegible]

Date	12/04/06
Received by:	<i>[Signature]</i>
Signature	<i>[Signature]</i>
Printed	_____
Company	<i>AAI</i>
Reason	<i>AAI 151</i>
Time	10:13

Method of Shipment

Shipment No

Special Instructions:

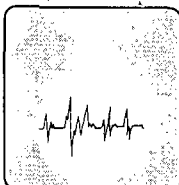
Comments:

2016 Sep 20

After analysis, samples are to be:

- ☐ Disposed of (additional fee)
- ☐ Stored (30 days max)
- ☐ Stored over 30 days (additional fee)
- ☐ Returned to customer

CARRIER



ASSAIGAI ANALYTICAL LABORATORIES, INC.

4301 Masthead NE • Albuquerque, New Mexico 87109 • (505) 345-8964 • FAX (505) 345-7259

3332 Wedgewood, Ste. N • El Paso, Texas 79925 • (915) 593-6000 • FAX (915) 593-7820

127 Eastgate Drive, 212-C • Los Alamos, New Mexico 87544 • (505) 662-2558

J&L LAND FARM INC.

attn: LEE M. ROBERTS

PO BOX 356

HOBBS

NM 88240

Explanation of codes

B	Analyte Detected in Method Blank
E	Result is Estimated
H	Analyzed Out of Hold Time
N	Tentatively Identified Compound
S	Subcontracted
1-9	See Footnote

STANDARD

Assaigai Analytical Laboratories, Inc.

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: J&L LAND FARM INC.

Project: CLOSE OUT CELLS

Order: 0612429 JLF01

Receipt: 12-12-06

William P. Biava
William P. Biava, President of Assaigai Analytical Laboratories, Inc.

Sample: CELL #12

Collected: 12-12-06 9:00:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0001A			SW846 5035B/8015B GRO by GC/FID					By: EJB		
V06594	XG.2006.1605.5		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-18-06	12-18-06
0612429-0001A			SW846 5035B/8021B Purgeable VOCs by GC/PID					By: EJB		
V06592	XG.2006.1583.6	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.6	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.6	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.6	179601-23-1	p/m-Xylenes	ND	mg / Kg	1	0.01		12-14-06	12-14-06
V06592	XG.2006.1583.6	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
0612429-0001A			SW846 8015B Diesel Range Organics by GC/FID					By: SDW		
S06729	XG.2006.1614.40		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: CELL #13

Collected: 12-12-06 9:10:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0002A			SW846 5035B/8015B GRO by GC/FID					By: EJB		
V06594	XG.2006.1605.6		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-18-06	12-18-06
0612429-0002A			SW846 5035B/8021B Purgeable VOCs by GC/PID					By: EJB		
V06592	XG.2006.1583.7	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.7	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.7	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.7	179601-23-1	p/m-Xylenes	ND	mg / Kg	1	0.01		12-14-06	12-14-06
V06592	XG.2006.1583.7	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-14-06	12-14-06

Assaigai Analytical Laboratories, Inc.

Certificate of Analysis

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Client: J&L LAND FARM INC.

Project: CLOSE OUT CELLS

Order: 0612429 JLF01

Receipt: 12-12-06

Sample: CELL #13

Collected: 12-12-06 9:10:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0002A			SW846 8015B Diesel Range Organics by GC/FID					By: SDW		
S06729	XG.2006.1614.43		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: CELL #14

Collected: 12-12-06 9:20:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0003A			SW846 5035B/8015B GRO by GC/FID					By: EJB		
V06594	XG.2006.1605.7		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-18-06	12-18-06
0612429-0003A			SW846 5035B/8021B Purgeable VOCs by GC/PID					By: EJB		
V06592	XG.2006.1583.8	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.8	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.8	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.8	179601-23-1	p/m-Xylenes	ND	mg / Kg	1	0.01		12-14-06	12-14-06
V06592	XG.2006.1583.8	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-14-06	12-14-06

0612429-0003A

SW846 8015B Diesel Range Organics by GC/FID

By: SDW

S06729 XG.2006.1614.44

	Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06
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Sample: CELL #15

Collected: 12-12-06 9:30:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0004A			SW846 5035B/8015B GRO by GC/FID					By: EJB		
V06594	XG.2006.1605.8		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-18-06	12-18-06
0612429-0004A			SW846 5035B/8021B Purgeable VOCs by GC/PID					By: EJB		
V06592	XG.2006.1583.9	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.9	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.9	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.9	179601-23-1	p/m-Xylenes	ND	mg / Kg	1	0.01		12-14-06	12-14-06
V06592	XG.2006.1583.9	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
0612429-0004A			SW846 8015B Diesel Range Organics by GC/FID					By: SDW		
S06729	XG.2006.1614.45		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Assagai Analytical Laboratories, Inc.

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: **J&L LAND FARM INC.**Project: **CLOSE OUT CELLS**Order: **0612429 JLF01**Receipt: **12-12-06**Sample: **CELL #17**

Collected: 12-12-06 9:40:00 By: LMR

Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0005A		SW846 5035B/8015B GRO by GC/FID		By: EJB						
V06594	XG.2006.1605.9		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-18-06	12-18-06
0612429-0005A		SW846 5035B/8021B Purgeable VOCs by GC/PID		By: EJB						
V06592	XG.2006.1583.10	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.10	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.10	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
V06592	XG.2006.1583.10	179601-23-1	p/m-Xylenes	ND	mg / Kg	1	0.01		12-14-06	12-14-06
V06592	XG.2006.1583.10	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-14-06	12-14-06
0612429-0005A		SW846 8015B Diesel Range Organics by GC/FID		By: SDW						
S06729	XG.2006.1614.46		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: **CELL #18**

Collected: 12-12-06 9:45:00 By: LMR

Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0006A		SW846 5035B/8015B GRO by GC/FID		By: EJB						
V06594	XG.2006.1605.10		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-18-06	12-18-06
0612429-0006A		SW846 5035B/8260B Purgeable VOCs by GC/MS		By: EJB						
V06607	XG.2006.1617.8	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.8	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.8	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.8	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06
V06607	XG.2006.1617.8	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0006A		SW846 8015B Diesel Range Organics by GC/FID		By: SDW						
S06729	XG.2006.1614.47		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: **CELL #19**

Collected: 12-12-06 9:55:00 By: LMR

Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0007A		SW846 5035B/8015B GRO by GC/FID		By: EJB						
V06598	XG.2006.1607.5		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-19-06	12-19-06
0612429-0007A		SW846 5035B/8260B Purgeable VOCs by GC/MS		By: EJB						
V06607	XG.2006.1617.9	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.9	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.9	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.9	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06
V06607	XG.2006.1617.9	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06

Assagai Analytical Laboratories, Inc.

Certificate of Analysis

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Client: J&L LAND FARM INC.

Project: CLOSE OUT CELLS

Order: 0612429 JLF01

Receipt: 12-12-06

Sample: CELL #19

Collected: 12-12-06 9:55:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0007A		SW846 8015B	Diesel Range Organics by GC/FID					By: SDW		
S06729	XG.2006.1614.55		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: CELL #20

Collected: 12-12-06 10:05:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0008A		SW846 5035B/8015B	GRO by GC/FID					By: EJB		
V06598	XG.2006.1607.6		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-19-06	12-19-06
0612429-0008A		SW846 5035B/8260B	Purgeable VOCs by GC/MS					By: EJB		
V06607	XG.2006.1617.10	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.10	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.10	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.10	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06
V06607	XG.2006.1617.10	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0008A		SW846 8015B	Diesel Range Organics by GC/FID					By: SDW		
S06729	XG.2006.1614.56		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: CELL #21

Collected: 12-12-06 10:15:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0009A		SW846 5035B/8015B	GRO by GC/FID					By: EJB		
V06598	XG.2006.1607.7		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-19-06	12-19-06
0612429-0009A		SW846 5035B/8260B	Purgeable VOCs by GC/MS					By: EJB		
V06607	XG.2006.1617.11	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.11	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.11	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.11	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06
V06607	XG.2006.1617.11	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0009A		SW846 8015B	Diesel Range Organics by GC/FID					By: SDW		
S06729	XG.2006.1614.57		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Assagai Analytical Laboratories, Inc.

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: **J&L LAND FARM INC.**Project: **CLOSE OUT CELLS**Order: **0612429 JLF01**Receipt: **12-12-06**Sample: **CELL #22**Collected: 12-12-06 10:20:00 By: **LMR**Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0010A		SW846 5035B/8015B GRO by GC/FID						By: EJB		
V06598	XG.2006.1607.8		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-19-06	12-19-06
0612429-0010A		SW846 5035B/8260B Purgeable VOCs by GC/MS						By: EJB		
V06607	XG.2006.1617.12	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.12	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.12	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.12	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06
V06607	XG.2006.1617.12	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0010A		SW846 8015B Diesel Range Organics by GC/FID						By: SDW		
S06729	XG.2006.1614.58		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: **CELL #23**Collected: 12-12-06 10:30:00 By: **LMR**Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0011A		SW846 5035B/8015B GRO by GC/FID						By: EJB		
V06598	XG.2006.1607.9		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-19-06	12-19-06
0612429-0011A		SW846 5035B/8260B Purgeable VOCs by GC/MS						By: EJB		
V06607	XG.2006.1617.13	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.13	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.13	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.13	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06
V06607	XG.2006.1617.13	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0011A		SW846 8015B Diesel Range Organics by GC/FID						By: SDW		
S06729	XG.2006.1614.59		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: **CELL #25**Collected: 12-12-06 10:40:00 By: **LMR**Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0012A		SW846 5035B/8015B GRO by GC/FID						By: EJB		
V06598	XG.2006.1607.10		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-19-06	12-19-06
0612429-0012A		SW846 5035B/8260B Purgeable VOCs by GC/MS						By: EJB		
V06607	XG.2006.1617.14	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.14	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.14	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.14	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06

Assaigai Analytical Laboratories, Inc.

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: J&L LAND FARM INC.

Project: CLOSE OUT CELLS

Order: 0612429 JLF01

Receipt: 12-12-06

Sample: CELL #25

Collected: 12-12-06 10:40:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0012A		SW846 5035B/8260B Purgeable VOCs by GC/MS						By: EJB		
V06607	XG.2006.1617.14	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0012A		SW846 8015B Diesel Range Organics by GC/FID						By: SDW		
S06729	XG.2006.1614.60		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: CELL #26

Collected: 12-12-06 10:45:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0013A		SW846 5035B/8015B GRO by GC/FID						By: EJB		
V06610	XG.2006.1610.7		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-21-06	12-21-06
0612429-0013A		SW846 5035B/8260B Purgeable VOCs by GC/MS						By: EJB		
V06607	XG.2006.1617.15	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.15	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.15	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.15	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06
V06607	XG.2006.1617.15	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0013A		SW846 8015B Diesel Range Organics by GC/FID						By: SDW		
S06729	XG.2006.1614.61		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: CELL #27

Collected: 12-12-06 11:00:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0014A		SW846 5035B/8015B GRO by GC/FID						By: EJB		
V06611	XG.2006.1611.5		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-22-06	12-22-06
0612429-0014A		SW846 5035B/8260B Purgeable VOCs by GC/MS						By: EJB		
V06607	XG.2006.1617.16	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.16	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.16	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.16	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06
V06607	XG.2006.1617.16	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0014A		SW846 8015B Diesel Range Organics by GC/FID						By: SDW		
S06729	XG.2006.1614.62		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Assagai Analytical Laboratories, Inc.

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: J&L LAND FARM INC.

Project: CLOSE OUT CELLS

Order: 0612429 JLF01

Receipt: 12-12-06

Sample: CELL #28

Collected: 12-12-06 11:15:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0015A			SW846 5035B/8015B GRO by GC/FID		By: EJB					
V06610	XG.2006.1610.9		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-21-06	12-21-06
0612429-0015A			SW846 5035B/8260B Purgeable VOCs by GC/MS		By: EJB					
V06607	XG.2006.1617.17	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.17	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.17	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.17	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06
V06607	XG.2006.1617.17	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0015A			SW846 8015B Diesel Range Organics by GC/FID		By: SDW					
S06729	XG.2006.1614.63		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: CELL #29

Collected: 12-12-06 11:30:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0016A			SW846 5035B/8015B GRO by GC/FID		By: EJB					
V06610	XG.2006.1610.10		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-21-06	12-21-06
0612429-0016A			SW846 5035B/8260B Purgeable VOCs by GC/MS		By: EJB					
V06607	XG.2006.1617.18	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.18	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.18	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.18	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06
V06607	XG.2006.1617.18	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0016A			SW846 8015B Diesel Range Organics by GC/FID		By: SDW					
S06729	XG.2006.1614.64		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: CELL #30

Collected: 12-12-06 11:45:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0017A			SW846 5035B/8015B GRO by GC/FID		By: EJB					
V06610	XG.2006.1610.11		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-21-06	12-21-06
0612429-0017A			SW846 5035B/8260B Purgeable VOCs by GC/MS		By: EJB					
V06607	XG.2006.1617.19	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.19	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.19	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.19	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06

Assaigai Analytical Laboratories, Inc.

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: **J&L LAND FARM INC.**Project: **CLOSE OUT CELLS**Order: **0612429 JLF01**Receipt: **12-12-06**Sample: **CELL #30**

Collected: 12-12-06 11:45:00 By: LMR

Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0017A			SW846 5035B/8260B Purgeable VOCs by GC/MS				By: EJB			
V06607	XG.2006.1617.19	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0017A			SW846 8015B Diesel Range Organics by GC/FID				By: SDW			
S06729	XG.2006.1614.67		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Sample: **CELL #31**

Collected: 12-12-06 11:55:00 By: LMR

Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0612429-0018A			SW846 5035B/8015B GRO by GC/FID				By: EJB			
V06610	XG.2006.1610.12		Gasoline Range Organics	ND	mg / Kg	1	0.25		12-21-06	12-21-06
0612429-0018A			SW846 5035B/8260B Purgeable VOCs by GC/MS				By: EJB			
V06607	XG.2006.1617.20	71-43-2	Benzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.20	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.20	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
V06607	XG.2006.1617.20	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		12-26-06	12-26-06
V06607	XG.2006.1617.20	108-88-3	Toluene	ND	mg / Kg	1	0.005		12-26-06	12-26-06
0612429-0018A			SW846 8015B Diesel Range Organics by GC/FID				By: SDW			
S06729	XG.2006.1614.68		Diesel Range Organics	ND	mg / Kg	1	25		12-21-06	12-22-06

Unless otherwise noted, all samples were received in acceptable condition and all sampling was performed by client or client representative. Sample result of ND indicates Not Detected, ie result is less than the sample specific Detection Limit. Sample specific Detection Limit is determined by multiplying the sample Dilution Factor by the listed Reporting Detection Limit. All results relate only to the items tested. Any miscellaneous workorder information or footnotes will appear below.

Analytical results are not corrected for method blank or field blank contamination.

Chain of Custody Record

Lab/job No. 20110101 Date 11-8-06



Page 1 of 1

3332 WEDGEWOOD
EL PASO, TEXAS 79925
(915) 593-6000

Telephone No. 203-631-5165
Fax No. 203-392-8537
Samplers: (signature) Joe M. Kobacki

Samplers: (signature) [Signature]

[illegible]

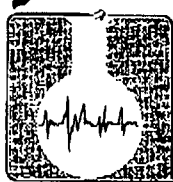
Date	11/13/06
Received by:	
Signature	
Printed	J. J. Smith
Company	Smith
Reason	

After analysis, samples are to be:

☐ Disposed of (additional fee)

☐ Stored (30 days max)

CARRIER



ASSAIGAI ANALYTICAL LABORATORIES, INC.

4301 Masthead NE • Albuquerque, New Mexico 87109 • (505) 345-8964 • FAX (505) 345-7259

3332 Wedgewood, Ste. N • El Paso, Texas 79925 • (915) 593-6000 • FAX (915) 593-7820

127 Eastgate Drive, 212-C • Los Alamos, New Mexico 87544 • (505) 662-2558

J&L LAND FARM INC.
attn: LEE M. ROBERTS
PO BOX 356
HOBBS

NM 88240

Explanation of codes

B	Analyte Detected in Method Blank
E	Result is Estimated
H	Analyzed Out of Hold Time
N	Tentatively Identified Compound
S	Subcontracted
1-9	See Footnote

Assaigai Analytical Laboratories, Inc.

STANDARD

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: J&L LAND FARM INC.

Project: CLOSE OUT CELLS

Order: 0611262 JLF01

Receipt: 11-08-06

[Signature]
William P. Davis, President of Assaigai Analytical Laboratories, Inc.

Sample: CELL #2

Collected: 11-08-06 8:30:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0001A		SW846 5035B/8015B	GRO by GC/FID					By: EJB		
V06547	XG.2006.1461.5		Gasoline Range Organics	ND	mg / Kg	1	0.25		11-13-06	11-13-06
0611262-0001A		SW846 5035B/8260B	Purgeable VOCs by GC/MS					By: TRS		
V06548	XG.2006.1456.12	71-43-2	Benzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.12	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.12	85-47-6	o-Xylene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.12	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		11-14-06	11-14-06
V06548	XG.2006.1456.12	108-88-3	Toluene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
0611262-0001A		SW846 8015B	Diesel Range Organics by GC/FID					By: EJB		
S06653	XG.2006.1465.5		Diesel Range Organics	ND	mg / Kg	1	25		11-14-06	11-14-06

Sample: CELL #3

Collected: 11-08-06 8:45:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0002A		SW846 5035B/8015B	GRO by GC/FID					By: EJB		
V06547	XG.2006.1461.6		Gasoline Range Organics	ND	mg / Kg	1	0.25		11-13-06	11-13-06
0611262-0002A		SW846 5035B/8260B	Purgeable VOCs by GC/MS					By: TRS		
V06548	XG.2006.1456.13	71-43-2	Benzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.13	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.13	85-47-6	o-Xylene	ND	mg / Kg	1	0.005		11-14-06	11-14-06

Assalgal Analytical Laboratories, Inc.

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e., ~ Dry Weight).

Client: **J&L LAND FARM INC.**Project: **CLOSE OUT CELLS**Order: **0611262 JLF01**Receipt: **11-08-06**Sample: **CELL #3**Collected: **11-08-06 8:45:00** By: **LMR**Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0002A		SW846 5035B/8260B Purgeable VOCs by GC/MS						By: TRS		
V06548	XG.2006.1456.13	108-38-3/108-42	p/m-Xylenes	ND	mg / Kg	1	0.01		11-14-06	11-14-06
V06548	XG.2006.1456.13	108-88-3	Toluene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
0611262-0002A		SW846 8015B Diesel Range Organics by GC/FID						By: EJB		
S06653	XG.2006.1465.8		Diesel Range Organics	ND	mg / Kg	1	25		11-14-06	11-14-06

Sample: **CELL #4**Collected: **11-08-06 9:00:00** By: **LMR**Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0003A		SW846 5035B/8015B GRO by GC/FID						By: EJB		
V06553	XG.2006.1467.5		Gasoline Range Organics	ND	mg / Kg	1	0.25		11-16-06	11-16-06
0611262-0003A		SW846 5035B/8260B Purgeable VOCs by GC/MS						By: TRS		
V06548	XG.2006.1456.14	71-43-2	Benzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.14	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.14	95-47-8	o-Xylene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.14	108-38-3/108-42	p/m-Xylenes	ND	mg / Kg	1	0.01		11-14-06	11-14-06
V06548	XG.2006.1456.14	108-88-3	Toluene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
0611262-0003A		SW846 8015B Diesel Range Organics by GC/FID						By: EJB		
S06663	XG.2006.1465.9		Diesel Range Organics	ND	mg / Kg	1	25		11-14-06	11-14-06

Sample: **CELL #5**Collected: **11-08-06 9:15:00** By: **LMR**Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0004A		SW846 5035B/8015B GRO by GC/FID						By: EJB		
V06547	XG.2006.1461.8		Gasoline Range Organics	ND	mg / Kg	1	0.25		11-13-06	11-13-06
0611262-0004A		SW846 5035B/8260B Purgeable VOCs by GC/MS						By: TRS		
V06548	XG.2006.1456.26	71-43-2	Benzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.26	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.26	95-47-8	o-Xylene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.26	108-38-3/108-42	p/m-Xylenes	ND	mg / Kg	1	0.01		11-14-06	11-14-06
V06548	XG.2006.1456.26	108-88-3	Toluene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
0611262-0004A		SW846 8015B Diesel Range Organics by GC/FID						By: EJB		
S06653	XG.2006.1465.10		Diesel Range Organics	ND	mg / Kg	1	25		11-14-06	11-14-06

Assaigai Analytical Laboratories, Inc.

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: **J&L LAND FARM INC.**Project: **CLOSE OUT CELLS**Order: **0611262 JLF01**Receipt: **11-08-06**Sample: **CELL #16**Collected: **11-08-06 11:15:00 By: LMR**Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0010A		SW846 5035B/8015B	GRO by GC/FID					By: EJB		
V06547	XG.2006.1461.17		Gasoline Range Organics	ND	mg / Kg	1	0.25		11-13-06	11-13-06
0611262-0010A		SW846 5035B/8260B	Purgeable VOCs by GC/MS					By: TRS		
V06548	XG.2006.1456.21	71-43-2	Benzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.21	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.21	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.21	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		11-14-06	11-14-06
V06548	XG.2006.1456.21	108-88-3	Toluene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
0611262-0010A		SW846 8015B	Diesel Range Organics by GC/FID					By: EJB		
S06653	XG.2006.1485.17		Diesel Range Organics	ND	mg / Kg	1	25		11-14-06	11-14-06

Unless otherwise noted, all samples were received in acceptable condition and all sampling was performed by client or client representative. Sample result of ND indicates Not Detected, ie result is less than the sample specific Detection Limit. Sample specific Detection Limit is determined by multiplying the sample Dilution Factor by the listed Reporting Detection Limit. All results relate only to the items tested. Any miscellaneous workorder information or footnotes will appear below.

Analytical results are not corrected for method blank or field blank contamination.

MEMO: The samples were received at 20.1 degrees Celsius.

Assaigai Analytical Laboratories, Inc.

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: **J&L LAND FARM INC.**Project: **CLOSE OUT CELLS**Order: **0611262 JLF01**Receipt: **11-08-06**Sample: **CELL #8**Collected: **11-08-06 10:00:00** By: **LMR**Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0007A SW846 5035B/8260B Purgeable VOCs by GC/MS By: TRS										
V06548	XG.2006.1458.18	108-88-3	Toluene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
0611262-0007A SW846 8015B Diesel Range Organics by GC/FID By: EJB										
S06653	XG.2006.1465.14		Diesel Range Organics	ND	mg / Kg	1	25		11-14-06	11-14-06

Sample: **CELL #9**Collected: **11-08-06 10:15:00** By: **LMR**Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0008A SW846 5035B/8015B GRO by GC/FID By: EJB										
V06547	XG.2006.1461.12		Gasoline Range Organics	ND	mg / Kg	1	0.25		11-13-06	11-13-06
0611262-0008A SW846 5035B/8260B Purgeable VOCs by GC/MS By: TRS										
V06548	XG.2006.1458.19	71-43-2	Benzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1458.19	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1458.19	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1458.19	108-38-3/108-42	p/m-Xylenes	ND	mg / Kg	1	0.01		11-14-06	11-14-06
V06548	XG.2006.1458.19	108-88-3	Toluene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
0611262-0008A SW846 8015B Diesel Range Organics by GC/FID By: EJB										
S06653	XG.2006.1465.15		Diesel Range Organics	ND	mg / Kg	1	25		11-14-06	11-14-06

Sample: **CELL #10**Collected: **11-08-06 10:30:00** By: **LMR**Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0009A SW846 5035B/8015B GRO by GC/FID By: EJB										
V06547	XG.2006.1461.14		Gasoline Range Organics	ND	mg / Kg	1	0.25		11-13-06	11-13-06
0611262-0009A SW846 5035B/8260B Purgeable VOCs by GC/MS By: TRS										
V06548	XG.2006.1458.20	71-43-2	Benzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1458.20	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1458.20	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1458.20	108-38-3/108-42	p/m-Xylenes	ND	mg / Kg	1	0.01		11-14-06	11-14-06
V06548	XG.2006.1458.20	108-88-3	Toluene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
0611262-0009A SW846 8015B Diesel Range Organics by GC/FID By: EJB										
S06653	XG.2006.1465.16		Diesel Range Organics	ND	mg / Kg	1	25		11-14-06	11-14-06

Assaigai Analytical Laboratories, Inc.

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: J&L LAND FARM INC.

Project: CLOSE OUT CELLS

Order: 0611262 JLF01

Receipt: 11-08-06

Sample: CELL #6

Collected: 11-08-06 9:30:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0005A		SW846 5035B/8015B	GRO by GC/FID					By: EJB		
V06547	XG.2006.1461.9		Gasoline Range Organics	ND	mg / Kg	1	0.25		11-13-06	11-13-06
0611262-0005A		SW846 5035B/8260B	Purgeable VOCs by GC/MS					By: TRS		
V06548	XG.2006.1456.16	71-43-2	Benzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.16	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.16	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.16	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		11-14-06	11-14-06
V06548	XG.2006.1456.16	108-88-3	Toluene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
0611262-0005A		SW846 8015B	Diesel Range Organics by GC/FID					By: EJB		
S06853	XG.2006.1465.11		Diesel Range Organics	ND	mg / Kg	1	25		11-14-06	11-14-06

Sample: CELL #7

Collected: 11-08-06 9:45:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0006A		SW846 5035B/8015B	GRO by GC/FID					By: EJB		
V06547	XG.2006.1461.10		Gasoline Range Organics	ND	mg / Kg	1	0.25		11-13-06	11-13-06
0611262-0006A		SW846 5035B/8260B	Purgeable VOCs by GC/MS					By: TRS		
V06548	XG.2006.1456.17	71-43-2	Benzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.17	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.17	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.17	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		11-14-06	11-14-06
V06548	XG.2006.1456.17	108-88-3	Toluene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
0611262-0006A		SW846 8015B	Diesel Range Organics by GC/FID					By: EJB		
S06853	XG.2006.1465.12		Diesel Range Organics	ND	mg / Kg	1	25		11-14-06	11-14-06

Sample: CELL #8

Collected: 11-08-06 10:00:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0611262-0007A		SW846 5035B/8015B	GRO by GC/FID					By: EJB		
V06547	XG.2006.1461.11		Gasoline Range Organics	ND	mg / Kg	1	0.25		11-13-06	11-13-06
0611262-0007A		SW846 5035B/8260B	Purgeable VOCs by GC/MS					By: TRS		
V06548	XG.2006.1456.18	71-43-2	Benzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.18	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.18	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		11-14-06	11-14-06
V06548	XG.2006.1456.18	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		11-14-06	11-14-06



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON

Governor

Joaquin Prukop

Cabinet Secretary

Mark E. Fesmire, P.E.

Director

Oil Conservation Division

January 25, 2006

Ms. Judy L. Roberts
J & L Landfarm, Inc.
P.O. Box 356
Hobbs, New Mexico 88241-0356

**RE: Approval of Discontinued Maintenance Status and Application of Additional Lifts
J & L Landfarm, Inc. – Permit NM-1-0023
N/2, N/2 of Section 9 and the N/2, N/2 of Section 10, Township 20 South, Range 38 East, NMPM,
Lea County**

Dear Ms. Roberts:

The New Mexico Oil Conservation Division (OCD) has received J & L Landfarm, Inc. (J&L) letter dated January 9, 2007 and has reviewed the analytical data concerning the remediated soils within Cells 2 through 10, 12 through 23, and 25 through 31. Based upon the information provided, Cells 2 through 10, 12 through 23, and 25 through 31 are hereby approved for discontinued maintenance status and the additional of another lift of contaminated soils. Note, that with the addition of successive lifts J&L must resume maintenance and treatment zone monitoring. The treatment zone monitoring depth must be adjusted to reach the 2-3 foot zone below the original native ground surface. In addition, J&L's request to reuse the soil from these cells is hereby approved with the following uses:

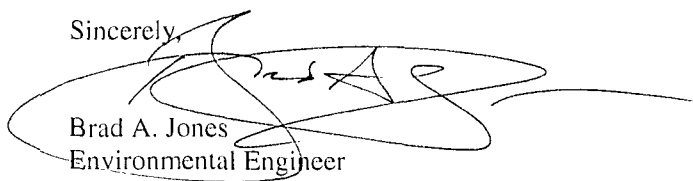
1. Use remediated soils in the berms and roads within the J & L Landfarm facility.

Application of these soils in the approved project list above must not result in run-off into any waters of the U.S. If J&L wants to move the soils from these cells for any other use other than those approved here, separate OCD authorization must be granted. Soils to be removed from the facility must have additional analysis performed, including metals and chlorides.

Please be advised that approval of this request does not relieve the J&L of liability should operations result in pollution of surface water, ground water or the environment. Nor does approval relieve J&L of its responsibility to comply with any other applicable governmental authority's rules and regulations.

If you have any questions, regarding this matter, please do not hesitate to contact me at (505) 476-3487 or brad.a.jones@state.nm.us.

Sincerely,



Brad A. Jones
Environmental Engineer

BAJ/baj

cc: OCD District I Office, Hobbs



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON

Governor

Joanna Prukop

Cabinet Secretary

Mark E. Fesmire, P.E.

Director

Oil Conservation Division

November 21, 2005

Ms. Judy L. Roberts
J & L Landfarm, Inc.
P.O. Box 356
Hobbs, NM 88241-0356

RE: Discontinued Maintenance Status and Application of
Additional Lifts for J & L Landfarm, Inc. Permit # NM-01-0023

Dear Ms. Roberts:

The New Mexico Oil Conservation Division (NMOCD) has received and reviewed your application shown above. Discontinued maintenance status and application of additional lifts is approved for landfarm cells # 1, 3, 4, 5, 6, 7, 8, and 9.

NMOCD approval does not relieve J & L Landfarm, Inc. (J & L) of liability should its operations at the surface waste management facility site covered by the above permit should prove to have been harmful to public health or the environment. Nor does it relieve J & L of its responsibility to comply with the rules and regulations of any other local, state or federal governmental agency.

If you have any questions, contact me at (505) 476-3492 or ed.martin@state.nm.us

NEW MEXICO OIL CONSERVATION DIVISION

Edwin E. Martin
Environmental Bureau

J&L LANDFARM, INC.

P.O. Box 356
Hobbs, New Mexico 88241-0356
Phone (505) 392-9697
Fax (505) 392-8537

October 25, 2005

NM Energy, Minerals & Natural
Resources Dept. (OCD)
1220 South St. Francis Drive
Santa Fe, New Mexico 87505

Attn: Ed Martin

**Subject: Approval of Discontinued Maintenance Status & Application of
Additional Lifts for J&L Landfarm, Inc., Permit # NM-01-0023**

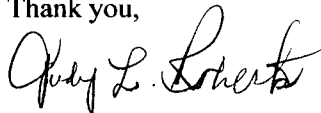
Our landfarm facility is requesting Discontinued Maintenance Status for the following cells: #1, #3, #4, #5, #6, #7, #8, #9. In addition we request these cells be approved for Application of Additional Lifts of contaminated soils.

Permission is requested that the remediated soils in these cells be used **within** our landfarming facility to maintain berms and roads for ease of access and maintenance in the facility.

A composite sample of the hydrocarbon soil of each of the cells was collected and tested by an independent laboratory for amounts of TPH/B-TEX. The test results are attached.

If any other information is needed, please call me at (505) 392-9697.

Thank you,



Judy L. Roberts
cc Hobbs OCD
File

ASSAIGAI ANALYTICAL LABORATORIES, INC.

Chain of Custody Record

 ALBUQUERQUE, NEW MEXICO 87109
(505) 345-8964

 3332 WEDGEWOOD
EL PASO, TEXAS 79925
(915) 593-6000

 127 EASTGATE DRIVE, 212-C
LOS ALAMOS, NEW MEXICO 87544
(505) 662-2558

 Lab Job No.: 50011 Date: 9-6-05
Page 1 of 2

 Project Manager/Contact: WILLIAM K. ROBERTS

 Telephone No.: 505-631-5765

Fax No.:

 Samplers: (signature) WILLIAM K. ROBERTS

ct / Purchase Order/Quote:

ALL Section Number	Field Sample Number / Location	Date	Time	Sample Type	Type / Size of Container	Preservation Temp.	Chemical	No. of Containers	Analysis Required	Remarks
1	1	9-6-05	08:00	Soil	100g			1	TPH	
2	2	9-6-05	08:05	Soil	100g			1	BTEX	
3	3	9-6-05	08:10	Soil	100g			1		
4	4	9-6-05	08:15	Soil	100g			1		
5	5	9-6-05	08:20	Soil	100g			1		
6	6	9-6-05	08:25	Soil	100g			1		
7	7	9-6-05	08:30	Soil	100g			1		
8	8	9-6-05	08:35	Soil	100g			1		
9	9	9-6-05	08:40	Soil	100g			1		
10	10	9-6-05	08:45	Soil	100g			1		

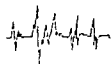
Relinquished by: Signature: <u>William K. Roberts</u> Printed: <u>WILLIAM K. ROBERTS</u> Company: <u>ASSAIGAI ANALYTICAL</u> Reason: <u>Analysis</u>		Received by: Signature: <u>[Signature]</u> Printed: <u>[Printed Name]</u> Company: <u>[Company]</u> Reason: <u>[Reason]</u>	
Date: <u>9-6-05</u> Time: <u>9:00 AM</u>		Date: <u>9-6-05</u> Time: <u>1:30</u>	

Comments:

After analysis, samples are to be:

- ☐ Disposed of (additional fee)
☐ Stored (30 days max)
☐ Stored over 30 days (additional fee)
☐ Returned to customer

CARRIER



**ASSAIGAI
ANALYTICAL
LABORATORIES, INC.**

4301 Masthead NE • Albuquerque, New Mexico 87109 • (505) 345-8964 • FAX (505) 345-7259

3332 Wedgewood, Ste. N • El Paso, Texas 79925 • (915) 593-6000 • FAX (915) 593-7820

127 Eastgate Drive, 212-C • Los Alamos, New Mexico 87544 • (505) 662-2558

J&L LAND FARM INC.
attn: **LEE M. ROBERTS**
PO BOX 356
HOBBS

NM 88240

Explanation of codes

B	Analyte Detected in Method Blank
E	Result is Estimated
H	Analyzed Out of Hold Time
N	Tentatively Identified Compound
S	Subcontracted
1-9	See Footnote

STANDARD

Assaigai Analytical Laboratories, Inc.

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: **J&L LAND FARM INC.**

Project: **CLEAN UP CELL'S**

Order: **0509132 JLF01**

Receipt: **09-06-05**

William P. Biava
William P. Biava: President of Assaigai Analytical Laboratories, Inc.

Sample: **CELL #1**

Collected: 09-06-05 8:50:00 By: **LMR**

Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0509132-0001A		SW846 5035B/8015B	GRO by GC/FID					By: TRS		
V05276	XG.2005.1495.9		Gasoline Range Organics	ND	mg / Kg	1	0.55		09-16-05	09-16-05
0509132-0001A		SW846 5035B/8021B	Purgeable VOCs by GC/PID					By: TRS		
V05277	XG.2005.1497.5	71-43-2	Benzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
V05277	XG.2005.1497.5	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
V05277	XG.2005.1497.5	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
V05277	XG.2005.1497.5	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		09-16-05	09-16-05
V05277	XG.2005.1497.5	108-88-3	Toluene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
0509132-0001A		SW846 8015B	Diesel Range Organics by GC/FID					By: JPM		
S05274	XG.2005.1429.109		Diesel Range Organics	ND	mg / Kg	1	25		09-09-05	09-11-05

Sample: **CELL #3**

Collected: 09-06-05 8:55:00 By: **LMR**

Matrix: **SOIL**

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
0509132-0002A		SW846 5035B/8015B	GRO by GC/FID					By: TRS		
V05276	XG.2005.1495.10		Gasoline Range Organics	ND	mg / Kg	1	0.55		09-16-05	09-16-05
0509132-0002A		SW846 5035B/8021B	Purgeable VOCs by GC/PID					By: TRS		
V05277	XG.2005.1497.8	71-43-2	Benzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
V05277	XG.2005.1497.8	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
V05277	XG.2005.1497.8	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		09-16-05	09-16-05

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: J&L LAND FARM INC.

Project: CLEAN UP CELL'S

Order: 0509132 JLF01

Receipt: 09-06-05

Sample: CELL #3

Collected: 09-06-05 8:55:00 By: LMR

Matrix: SOIL

IC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
By: TRS										
1509132-0002A		SW846 5035B/8021B Purgeable VOCs by GC/PID								
05277	XG.2005.1497.8	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		09-16-05	09-16-05
05277	XG.2005.1497.8	108-88-3	Toluene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
By: JPM										
1509132-0002A		SW846 8015B Diesel Range Organics by GC/FID								
05274	XG.2005.1429.110		Diesel Range Organics	ND	mg / Kg	1	25		09-09-05	09-11-05

Sample: CELL #4

Collected: 09-06-05 9:10:00 By: LMR

Matrix: SOIL

IC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
By: TRS										
1509132-0003A		SW846 5035B/8015B GRO by GC/FID								
05276	XG.2005.1495.11		Gasoline Range Organics	ND	mg / Kg	1	0.55		09-16-05	09-16-05
By: TRS										
1509132-0003A		SW846 5035B/8021B Purgeable VOCs by GC/PID								
05277	XG.2005.1497.9	71-43-2	Benzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.9	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.9	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.9	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		09-16-05	09-16-05
05277	XG.2005.1497.9	108-88-3	Toluene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
By: JPM										
1509132-0003A		SW846 8015B Diesel Range Organics by GC/FID								
05274	XG.2005.1429.111		Diesel Range Organics	ND	mg / Kg	1	25		09-09-05	09-11-05

Sample: CELL #5

Collected: 09-06-05 9:15:00 By: LMR

Matrix: SOIL

IC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
By: TRS										
1509132-0004A		SW846 5035B/8015B GRO by GC/FID								
05276	XG.2005.1495.12		Gasoline Range Organics	ND	mg / Kg	1	0.55		09-16-05	09-16-05
By: TRS										
1509132-0004A		SW846 5035B/8021B Purgeable VOCs by GC/PID								
05277	XG.2005.1497.10	71-43-2	Benzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.10	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.10	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.10	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		09-16-05	09-16-05
05277	XG.2005.1497.10	108-88-3	Toluene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
By: JPM										
1509132-0004A		SW846 8015B Diesel Range Organics by GC/FID								
05274	XG.2005.1429.112		Diesel Range Organics	ND	mg / Kg	1	25		09-09-05	09-11-05

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: J&L LAND FARM INC.

Project: CLEAN UP CELL'S

Order: 0509132 JLF01

Receipt: 09-06-05

Sample: CELL #6

Collected: 09-06-05 9:20:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
1509132-0005A SW846 5035B/8015B GRO by GC/FID By: TRS										
05276	XG.2005.1495.14		Gasoline Range Organics	ND	mg / Kg	1	0.55		09-16-05	09-16-05
1509132-0005A SW846 5035B/8021B Purgeable VOCs by GC/PID By: TRS										
05277	XG.2005.1497.11	71-43-2	Benzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.11	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.11	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.11	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		09-16-05	09-16-05
05277	XG.2005.1497.11	108-88-3	Toluene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
1509132-0005A SW846 8015B Diesel Range Organics by GC/FID By: JPM										
05274	XG.2005.1429.113		Diesel Range Organics	ND	mg / Kg	1	25		09-09-05	09-11-05

Sample: CELL #7

Collected: 09-06-05 8:40:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
1509132-0006A SW846 5035B/8015B GRO by GC/FID By: TRS										
05276	XG.2005.1495.15		Gasoline Range Organics	ND	mg / Kg	1	0.55		09-16-05	09-16-05
1509132-0006A SW846 5035B/8021B Purgeable VOCs by GC/PID By: TRS										
05277	XG.2005.1497.12	71-43-2	Benzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.12	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.12	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
05277	XG.2005.1497.12	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		09-16-05	09-16-05
05277	XG.2005.1497.12	108-88-3	Toluene	ND	mg / Kg	1	0.005		09-16-05	09-16-05
1509132-0006A SW846 8015B Diesel Range Organics by GC/FID By: JPM										
05274	XG.2005.1429.116		Diesel Range Organics	ND	mg / Kg	1	25		09-09-05	09-11-05

Sample: CELL #8

Collected: 09-06-05 8:35:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
1509132-0007A SW846 5035B/8015B GRO by GC/FID By: TRS										
05276	XG.2005.1495.16		Gasoline Range Organics	ND	mg / Kg	1	0.55		09-16-05	09-16-05
1509132-0007A SW846 5035B/8021B Purgeable VOCs by GC/PID By: TRS										
05279	XG.2005.1512.5	71-43-2	Benzene	ND	mg / Kg	1	0.005		09-19-05	09-19-05
05279	XG.2005.1512.5	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		09-19-05	09-19-05
05279	XG.2005.1512.5	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		09-19-05	09-19-05
05279	XG.2005.1512.5	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		09-19-05	09-19-05

Certificate of Analysis

All samples are reported on an "as received" basis, unless otherwise noted (i.e. - Dry Weight).

Client: J&L LAND FARM INC.

Project: CLEAN UP CELL'S

Order: 0509132 JLF01

Receipt: 09-06-05

Sample: CELL #8

Collected: 09-06-05 8:35:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
1509132-0007A		SW846 5035B/8021B	Purgeable VOCs by GC/PID					By: TRS		
05279	XG.2005.1512.5	108-88-3	Toluene	ND	mg / Kg	1	0.005		09-19-05	09-19-05
1509132-0007A		SW846 8015B	Diesel Range Organics by GC/FID					By: JPM		
05274	XG.2005.1429.117		Diesel Range Organics	ND	mg / Kg	1	25		09-09-05	09-11-05

Sample: CELL #9

Collected: 09-06-05 8:45:00 By: LMR

Matrix: SOIL

QC Group	Run Sequence	CAS #	Analyte	Result	Units	Dilution Factor	Detection Limit	Code	Prep Date	Run Date
1509132-0008A		SW846 5035B/8015B	GRO by GC/FID					By: TRS		
05276	XG.2005.1495.17		Gasoline Range Organics	ND	mg / Kg	1	0.55		09-16-05	09-16-05
1509132-0008A		SW846 5035B/8021B	Purgeable VOCs by GC/PID					By: TRS		
05279	XG.2005.1512.8	71-43-2	Benzene	ND	mg / Kg	1	0.005		09-19-05	09-19-05
05279	XG.2005.1512.8	100-41-4	Ethylbenzene	ND	mg / Kg	1	0.005		09-19-05	09-19-05
05279	XG.2005.1512.8	95-47-6	o-Xylene	ND	mg / Kg	1	0.005		09-19-05	09-19-05
05279	XG.2005.1512.8	108-38-3/106-42	p/m-Xylenes	ND	mg / Kg	1	0.01		09-19-05	09-19-05
05279	XG.2005.1512.8	108-88-3	Toluene	0.0056	mg / Kg	1	0.005		09-19-05	09-19-05
1509132-0008A		SW846 8015B	Diesel Range Organics by GC/FID					By: JPM		
05274	XG.2005.1429.118		Diesel Range Organics	ND	mg / Kg	1	25		09-09-05	09-11-05

Unless otherwise noted, all samples were received in acceptable condition and all sampling was performed by client or client representative. Sample result of ND indicates Not Detected, ie result is less than the sample specific Detection Limit. Sample specific Detection Limit is determined by multiplying the sample Dilution Factor by the listed Reporting Detection Limit. All results relate only to the items tested. Any miscellaneous workorder information or footnotes will appear below.

Analytical results are not corrected for method blank or field blank contamination.



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON

Governor

Joanna Prukop

Cabinet Secretary

7001 1940 0004 7920 7546

March 4, 2005

Mark E. Fesmire, P.E.

Director

Oil Conservation Division

J & L Landfarm, Inc.
P.O. Box 356
Hobbs, NM 88241-0356

Permit Number: NM-1-0023

Re: Administrative Modification of Landfarm Permits

The Oil Conservation Division (OCD) issued the landfarm permit identified above under OCD Rule 711. As explained in the public notice given prior to the issuance of the permit, the permit was for landfarming to remediate hydrocarbon-contaminated soils. The language of the permit, however, is broader, allowing the facility to accept oilfield contaminated solids which are either exempt from the Federal RCRA Subtitle C (hazardous waste) regulations or are "nonhazardous" by characteristic testing. If this language were interpreted to allow the landfarm to accept oilfield waste contaminated with salts, the salts could compromise the biodegradation capacity of the landfarm. And because salts leach more easily than hydrocarbons, the landfarm may pose a greater threat to groundwater.

According to the terms of the permit identified above, the OCD may change the permit conditions administratively for good cause shown as necessary to protect fresh water, human health and the environment. The OCD has determined that it is necessary to protect fresh water, human health and the environment to modify the permit as follows:

Effective immediately, the NMOCD permitted landfarm identified above is prohibited from accepting oilfield waste contaminated with salts.

If the landfarm identified above wishes to accept oilfield waste contaminated with salts, you will need to file an application to modify the permit pursuant to OCD Rule 711.B(1) and follow the notice requirements of OCD Rule 711.B(2). If you have already filed a complete application for permit modification with this office and complied with the notice requirements, the OCD will process the application promptly.

Landfarms that wish to accept oilfield wastes contaminated with salts while their application for permit modification is pending may apply to the Division Director for an emergency order under OCD Rule 1202. Applications for emergency orders will be considered on a case-by-case basis.

This notice is being sent to all entities operating landfarm facilities in New Mexico permitted pursuant to OCD Rule 711, as shown on the attached list.

If you have any questions, please contact Ed Martin at (505) 476-3492 or emartin@state.nm.us.

Very truly yours,

Mark E. Fesmire, P.E

J&L LANDFARM, INC.

P.O. Box 356
Hobbs, New Mexico 88241-0356
Phone (505) 392-9697
Fax (505) 392-8537

September 24, 2004

NM Energy, Minerals & Natural
Resources Dept. (OCD)
1220 South St. Francis Drive
Santa Fe, New Mexico 87505

Attn: Ed Martin

Re: Chloride Levels of Contaminated Material

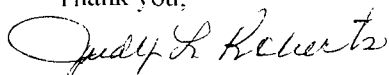
Dear Mr. Martin:

Attached is C-137 form as requested, with remediation steps taken to process chloride levels in our facility.

- 1) No restrictions of chloride levels (ppm) on contaminated material transferred into facility for remediation. Chloride level (ppm) cannot be above 250 ppm within 50' of groundwater. Our facility groundwater is estimated by State Engineering Office in Roswell as more than 100'.
- 2) Remediated material being transferred out of facility cannot have a chloride level of more than 250 ppm for use within 50' of groundwater.
- 3) On any remediated material which will be transferred out of facility, all testing required by OCD is performed, including chloride levels, and prior approval of OCD is in place; i.e. submission of complete testing results and written OCD approval.

All contaminated material deposited in facility is disked regularly according to OCD requirements and material with high chloride levels is mixed thoroughly with clean soil in our landfarm facility to cut ppm.

Thank you,



Judy L. Roberts
cc Hobbs OCD

NM-1-023
RECEIVED
OCT 01 2004
Oil Conservation Division
1220 S. Saint Francis Drive
Santa Fe, NM 87505

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

State of New Mexico
Energy Minerals and Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-137
Revised June 10, 2003

Submit Original Plus 1
Copy to Santa Fe
1 Copy Appropriate
District Office

APPLICATION FOR WASTE MANAGEMENT FACILITY

(Refer to the OCD Guidelines for assistance in completing the application)

☒ Commercial

☐ Centralized

1. Type: ☐ Evaporation ☐ Injection ☐ Other
☒ Solids/Landfarm ☐ Treating Plant

2. Operator: J&L LANDFARM, INC.

Address: P.O. Box 356, Hobbs, NM 88241 (phys address-C-45 (Billy Walker & Hwy 18))

Contact Person: Lee M. or Judy L. Roberts Phone: 505-631-5765/505-392-9697

3. Location: N/2 /4 N/2 /4 Section 9/10 Township 20 Range 38E

Submit large scale topographic map showing exact location

4. Is this a modification of an existing facility? ☒ Yes ☐ No ADDRESSING CHLORIDE LEVELS
Attachments for #5-14 (SEE ORIGINAL APPLICATION)
5. Attach the name and address of the landowner of the facility site and landowners of record within one mile of the site.
6. Attach description of the facility with a diagram indicating location of fences, pits, dikes, and tanks on the facility.
7. Attach designs prepared in accordance with Division guidelines for the construction/installation of the following: pits or ponds, leak-detection systems, aerations systems, enhanced evaporation (spray) systems, waste treating systems, security systems, and landfarm facilities.
8. Attach a contingency plan for reporting and clean-up for spills or releases.
9. Attach a routine inspection and maintenance plan to ensure permit compliance.
10. Attach a closure plan.
11. Attach geological/hydrological evidence demonstrating that disposal of oil field wastes will not adversely impact groundwater. Depth to and quality of ground water must be included.
12. Attach proof that the notice requirements of OCD Rule 711 have been met.
13. Attach a contingency plan in the event of a release of H₂S.
14. Attach such other information as necessary to demonstrate compliance with any other OCD rules, regulations and orders.

15. CERTIFICATION

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: Judy L. Roberts

Title: Company Officer

Signature: _____

Date: 9/24/04

E-mail Address: JLRob9697@aol.com



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON

Governor

Joanna Prukop

Cabinet Secretary

September 17, 2004

Mark E. Fesmire, P.E.

Director

Oil Conservation Division

Ms. Judy L. Roberts
J&L Landfarm
8301 Eunice Highway
Hobbs, NM 88240

Dear Ms. Roberts:

Since the New Mexico Oil Conservation Division (NMOCD) promulgated Rule 50 covering pits and below-grade tanks, there has arisen a need, in certain circumstances, for operators to transport their drill cuttings off-site and dispose of them.

NMOCD Rule 711, as it pertains to landfarms, does not specifically address the issue of exempt oilfield wastes that may be contaminated with salts. Your landfarm application and permit were written with only hydrocarbon-contaminated soils in mind. Salt-contaminated wastes cause the following problems:

1. Lessening the effectiveness of the biodegradation capacity of your landfarm
2. Rapid leachability causing adverse effects on groundwater

If you want to accept salt-contaminated cuttings or any other salt-contaminated wastes, your 711 permit must be modified to ensure that your acceptance of those wastes will not adversely affect public health or the environment.

Please check one of the following:

☐ I have accepted or intend to accept salt-contaminated wastes in my landfarm. An OCD form C-137, applying for a modification to my 711 permit is attached. Included, as an attachment, is a demonstration that the accepted salt-contaminated soils will not adversely affect groundwater in the foreseeable future. (Closure requirements will also require modification to ensure the protection of groundwater. Should your acceptance of salt-contaminated wastes prove detrimental to groundwater, future liability for such damage rests with the landfarm operator).

☐ I do not intend to accept salt-contaminated wastes in my landfarm. Should this condition change, I will submit an OCD Form C-137 for a modification to my 711 permit at that time.

New Mexico Oil Conservation Division
Attn: Ed Martin
1220 S. St. Francis
Santa Fe, NM 87505

This letter must be returned to the above address no later than October 31, 2004. An extension of time may be granted if you contact this office no later than that date.

If you have any questions, contact Ed Martin (505) 476-3492 or emartin@state.nm.us

Signed _____

Date _____



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON

Governor

Joanna Prukop

Cabinet Secretary

Mark E. Fesmire, P.E.

Director

Oil Conservation Division

March 18, 2005

Ms. Judy L. Roberts
J & L Landfarm, Inc.
P.O. Box 356
Hobbs, NM 88241-0356

**Re: J & L Landfarm's Request for a Temporary Emergency Order
Allowing a Landfarm to Accept Salt-Contaminated Oilfield Waste
NMOCD Permit No. NM-1-0023**

The New Mexico Oil Conservation Division (NMOCD) received the request captioned above on March 18, 2005.

Based upon NMOCD's review of your request and an analysis of conditions at the site of the landfarm, we find that we must deny your request. The NMOCD does not feel that you have adequately shown that acceptance of salt-contaminated oilfield waste at your facility would not pose a threat to groundwater, public health and the environment.

The NMOCD has received your request to modify your permit to accept salt-contaminated oilfield waste and we will process this request. You will be notified when the matter is scheduled for hearing.

NEW MEXICO OIL CONSERVATION DIVISION

Mark E. Fesmire, P.E.

Director

cc: NMOCD, Hobbs

ATTN: ED MARTIN, ENMRD OCD 505-476-3462

Request for a temporary emergency order allowing a landfarm to accept salt-contaminated oilfield waste.

Name of Facility J&L Landfarm, Inc.
Address County Road C-45 & Hwy 18(Lea County)
P.O. Box 356 Hobbs, New Mexico 88241
City, State, Zip _____
Location of landfarm
Qtr/Qtr, Section, Township, Range N/2 N/2 Sec 9/10 Tsp 20 Rge 38
Depth to groundwater at landfarm more than 100 feet

Fresh water wells within 1,000 feet? ☐ Yes ☒ NoWatercourses (wet or dry) within 1,000 feet? ☐ Yes ☒ No

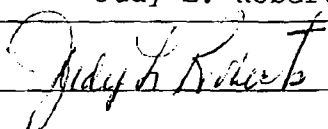
Conditions at the landfarm site which would make it acceptable for the disposal of salt-contaminated oilfield waste. Such conditions could include an impermeable barrier such as clay (red bed) between the landfarm and the groundwater, lack of groundwater at the site, etc.

lack of groundwater is such, no firm estimate can be reached
except more than 100 feet. No firm geological surveys as water
is so scarce. This comes from the State Engineers office in
Roswell. There is little or no groundwater in facility area.

Why do you consider this an emergency? Facility has jobs set up which could
be affected. Facility has taken such waste in past and designated
1 cell. Waste was tested once and level of salt contamination
was below 250 ppm.

Check one: ☒ I have already submitted an application to accept salt-contaminated waste
☐ I will submit an application for modification in the next two weeks

Signed by:

Printed Name Judy L. Roberts
Signature 
Title President
Date 3/16/05

New Mexico Office of the State Engineer
Well Reports and Downloads

Township: Range: Sections:

NAD27 X: Y: Zone: Search Radius:

County: Basin: Number: Suffix:

Owner Name: (First) (Last) ☐ Non-Domestic ☐ Domestic
☒ All

[Well / Surface Data Report](#)[Avg Depth to Water Report](#)[Water Column Report](#)[Clear Form](#)[WATERS Menu](#)[Help](#)**AVERAGE DEPTH OF WATER REPORT 03/18/2005**

Bsn	Tws	Rng	Sec	Zone	X	Y	Wells	Min	Max	Avg
L	20S	38E	10				4	30	52	45

Record Count: 4

New Mexico Office of the State Engineer
Well Reports and Downloads

Township: Range: Sections:

NAD27 X: Y: Zone: Search Radius:

County: Basin: Number: Suffix:

Owner Name: (First) (Last) ☐ Non-Domestic ☐ Domestic
☒ All

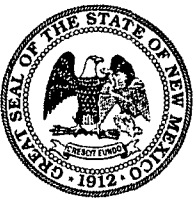
WELL / SURFACE DATA REPORT 03/18/2005

(qua
(qua

DB File Nbr	(acre ft per annum)	Use	Diversion	Owner
L 03125	DOM		3	D. W. HOUSE
L 09503	STK		3	RON ELLISON
L 10044	EXP		0	DALLAS MCCASLAND

Well Number
L 03125 APPRO
L 03125 CLW
L 09503
L 10044 EXPL

Record Count: 4



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON

Governor

Joanna Prukop

Cabinet Secretary

March 11, 2004

Lori Wrotenbery

Director

Oil Conservation Division

Ms. Judy L. Roberts
J&L Landfarm, Inc.
P.O. Box 356
Hobbs, NM 88241-0356

**RE: Approval of Discontinued Maintenance Status and Application of Additional Lifts
J&L Landfarm, Inc., Permit NM-01-0023
N/2 N/2 of Section 9 and the N/2 N/2 of Section 10, Township 20 South, Range 38 East,
NMPM, Lea County, New Mexico**

Dear Ms. Roberts:

The New Mexico Oil Conservation Division (OCD) has received J&L Landfarm, Inc. (J&L) letter dated January 12, 2004 and has reviewed the analytical data concerning remediated soils within Cells 11, 12, 13, 14, 15, and B-1. Based on the information provided, Cells 11, 12, 13, 14, 15, and B-1 are hereby approved for discontinued maintenance status and the addition of another lift of contaminated soil. Note that with the addition of successive lifts J&L must resume maintenance and treatment zone monitoring. The treatment zone monitoring depth must be adjusted to reach the 2-3 foot zone below the original native ground surface. In addition J&L's request to recycle soil from these cells is hereby approved with the following recycling uses:

1. Use remediated soils in the berms and roads within the J&L Landfarm facility.

Application of these soils in the approved project list above must not result in run-off into any waters of the U.S. **If J&L wants to move the soils from these cells for any other use than those approved here separate OCD authorization must be granted. Soils to be removed from the facility must have additional analysis performed including total metals and chloride.**

Please be advised that OCD approval does not relieve J&J of liability should their operation result in pollution of the ground water, surface water or the environment. In addition, OCD approval does not relieve J&L of the responsibility for compliance with other federal state and/or local regulations.

If you have any further questions please do not hesitate to contact me at (505) 476-3488.

Sincerely,

Martyne J. Kielling
Environmental Geologist

xc: OCD Hobbs Office

J&L LANDFARM, INC.

P.O. Box 356
Hobbs, New Mexico 88241-0356
Phone (505) 392-9697
Fax (505) 392-8537

RECEIVED

JAN 14 2004

OIL CONTAMINATION
DIVISION

January 12, 2004

NM Energy, Minerals & Natural
Resources Dept. (OCD)
1220 South St. Francis Drive
Santa Fe, New Mexico 87505

Attn: Martyne Kieling
Environmental Geologist

Dear Ms. Kieling:

We are requesting a **Discontinued Maintenance Status** for the following cells within our landfarming facility: cells **11, 12, 13, 14, 15, B-1**. A composite of the hydrocarbon impacted soil of each individual cell was collected and analytically tested for TPH/B-TEX. The results of the testing are attached.

We also request that upon approval of **Discontinued Maintenance Status** (DMS) for the above cells, permission is granted to J&L Landfarm to use the remediated soil within the facility for berms or roads.

Permission is requested to recycle the remediated soil, outside of the landfarm facility for all Generators requesting clean soil for oil related projects, subject to OCD regulations and guidelines. J&L Landfarm facility will maintain records as to Generator and Project for all soils recycled in this manner.

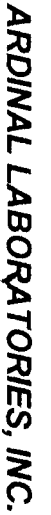
J&L Landfarm also asks that upon approval of DMS for above cells, that subsequent soil deposits be allowed in these cells after remediated soil is bermed or removed to maintain the criteria for 6 inch lifts in cell areas.

If other information is needed, please call me at (505) 392-9697. Please note that our telephone number and fax number has been changed.

Sincerely,

Judy L. Roberts

XL: Hobbs OCD
LL: Copy - all



2111 Beechwood, Abilene, TX 79603 101 East Marland, Hobbs, NM 88240
(915) 673-7001 Fax (915) 673-7020 (505) 393-2326 Fax (505) 393-2476

Page / of /

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

Company Name: J&L Linellbaum Inc.		BILL TO		ANALYSIS REQUEST									
Project Manager: Lee M. Roberts		P.O. #:											
Address: P.O. Box 356		Company: SANLE											
City: Woburn, Mass.		Attn:											
State: MA		Address:											
Phone #: 508-392-9897		City:											
Project #:		State:											
Project Name: Clean up		Zip:											
Project Location: SANLE		Phone #:											
Sample Name: Lee M. Roberts		Fax #:											
FOR LAB USE ONLY													
Lab I.D.		Sample I.D.		(G)RAB OR (C)OMP.		MATRIX				PRESERV.		SAMPLING	
				# CONTAINERS									
H8300-1 -2 -3 -4 -5 -6		Cell # # 11 # 12 # 13 # 14 # 15 # 3-1		DATE 12/29		TIME 1:30		TPH BTEX					

PLEASE NOTE: Liability and Damages. Cardholder's liability and client's exclusive remedy for any claim arising whether based in contract or tort, shall be limited to the amount paid by the client for the analyses. All claims including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within 30 days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services hereunder by Cardinal, regardless of whether such claim is based upon any of the above stated reasons or otherwise.

Terms and Conditions: Interest will be charged on all accounts more than 30 days past due at the rate of 24% per annum from the original date of invoice, and all costs of collection, including attorney's fees.

Relinquished By: <u>Lee M. Roberts</u> Date: <u>12/29</u> Time: <u>1:57 PM</u>		Received By: (Lab Staff) <u>Imy Hill</u>	
Delivered By: (Circle One) <input checked="" type="checkbox"/> UPS <input type="checkbox"/> Bus <input type="checkbox"/> Other		Sample Condition Cool <input type="checkbox"/> Intact <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
REMARKS:		Phone Result: <input type="checkbox"/> Yes <input type="checkbox"/> No Add'l Phone #: Fax Result: <input type="checkbox"/> Yes <input type="checkbox"/> No Add'l Fax #:	

+ Cardinal cannot accept verbal changes. Please fax written changes to 505-393-2476.



ARDINAL LABORATORIES

PHONE (325) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

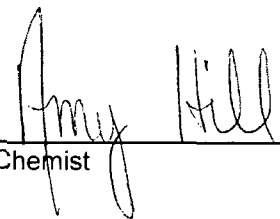
ANALYTICAL RESULTS FOR
J& L LANDFARM, INC.
ATTN: LEE ROBERTS
P.O. BOX 356
HOBBS, NM 88241
FAX TO:

Receiving Date: 12/29/03
Reporting Date: 12/31/03
Project Number: NOT GIVEN
Project Name: CLEANUP
Project Location: SAME

Analysis Date: 12/30/03
Sampling Date: 12/29/03
Sample Type: SOIL
Sample Condition: COOL AND INTACT
Sample Received By: AH
Analyzed By: AH

LAB NUMBER	SAMPLE ID	TPH (ppm)
H8300-1	CELL #11	<10
H8300-2	CELL #12	<10
H8300-3	CELL #13	<10
H8300-4	CELL #14	<10
H8300-5	CELL #15	<10
H8300-6	CELL #B1	<10
Quality Control		243
True Value QC		240
% Recovery		101
Relative Percent Difference		4.6

METHOD: EPA 418.1, 3510, 3540, or 3550; Infrared Spectroscopy



Chemist

12/31/03

Date

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H8300t



ARDINAL LABORATORIES

PHONE (325) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

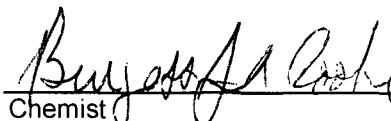
ANALYTICAL RESULTS FOR
J&L LANDFARM, INC.
ATTN: LEE M. ROBERTS
P.O. BOX 356
HOBBS, NM 88241
FAX TO:

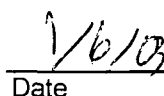
Receiving Date: 12/29/03
Reporting Date: 01/06/04
Project Number: NOT GIVEN
Project Name: CLEAN UP
Project Location: J&L LANDFARM

Sampling Date: 12/29/03
Sample Type: SOIL
Sample Condition: COOL & INTACT
Sample Received By: AH
Analyzed By: BC

LAB NUMBER	SAMPLE ID	BENZENE (mg/Kg)	TOLUENE (mg/Kg)	ETHYL BENZENE (mg/Kg)	TOTAL XYLENES (mg/Kg)
ANALYSIS DATE		01/05/04	01/05/04	01/05/04	01/05/04
H8300-1	CELL #11	<0.005	<0.005	<0.005	<0.015
H8300-2	CELL #12	<0.005	<0.005	<0.005	<0.015
H8300-3	CELL #13	<0.005	<0.005	<0.005	<0.015
H8300-4	CELL #14	<0.005	<0.005	<0.005	<0.015
H8300-5	CELL #15	<0.005	<0.005	<0.005	<0.015
H8300-6	CELL #B-1	<0.005	<0.005	<0.005	<0.015
Quality Control		0.095	0.099	0.096	0.295
True Value QC		0.100	0.100	0.100	0.300
% Recovery		95.2	98.9	96.1	98.4
Relative Percent Difference		3.4	1.7	3.6	5.3

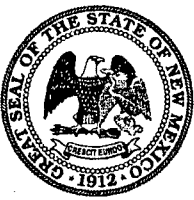
METHOD: EPA SW-846 8260


Chemist


Date

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H8300B.XLS



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON

Governor

Betty Rivera
Cabinet Secretary

Lori Wrotenbery

Director

Oil Conservation Division

July 24, 2002

CERTIFIED MAIL

RETURN RECEIPT NO. 7001-1940-0004-7923-8010

Ms. Judy L. Roberts
J&L Landfarm, Inc.
P.O. Box 356
Hobbs, NM 88241-0356

**RE: Approval of Discontinued Maintenance Status and Application of Additional Lifts
J&L Landfarm, Inc., Permit NM-01-0023
N/2 N/2 of Section 9 and the N/2 N/2 of Section 10, Township 20 South, Range 38 East,
NMPM, Lea County, New Mexico**

Dear Ms. Roberts:

The New Mexico Oil Conservation Division (OCD) has received J&L Landfarm, Inc.'s (J&L) letter dated July 8, 2002 requesting authorization to recycle approximately 3,452 cubic yards of soil located in Cell 2 all generated by Apache Corporation. The Soil within Cell 2 was approved for discontinued maintenance on April 29, 2002. Based on the information that is on file and that has been provided, J&L's request to recycle approximately 3,452 cubic yards of soil located in Cell 2 all generated by Apache Corporation is hereby approved with the following recycling uses:

1. Soil backfill for oil and gas projects such as building berms.

Application of these soils in the approved projects listed above must not result in run-off into any waters of the U.S. If J&L wants to move the soils from Cell 2 for any other use than those approved here separate OCD authorization must be granted.

Please be advised that OCD approval does not relieve J&L of liability should their operation result in pollution of the ground water, surface water or the environment. In addition, OCD approval does not relieve J&L of the responsibility for compliance with other federal, state, local laws and/or regulations.

If you have any questions please do not hesitate to contact me at (505) 476-3488.

Sincerely,

Martyne J. Kieling
Environmental Geologist

xc: OCD Hobbs Office

J&L LANDFARM, INC.

P.O. Box 356
Hobbs, New Mexico 88241-0356
Phone (505) 393-9697
Fax (505) 393-8537

July 8, 2002

NM Energy, Minerals & Natural
Resources Dept. (OCD)
1220 South St. Francis Drive
Santa Fe, New Mexico 87505

Attn: Martyn J. Kieling
Environmental Geologist

Subject: Authorization to Move Remediated Soil

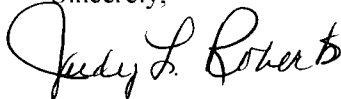
Dear Ms. Kieling:

This is a request to move remediated soils from our landfarming facility to another location. The soils have been remediated to the State of New Mexico OCD requirements.

Apache Corporation is making request for use of these soils generated at their own North East Drinkard Central Battery (see attached Cell Data). These specific soils will be used for and on their own locations (see attached letter from Mike Warren, Apache Sr. Prod. Foreman).

If you require other information, please call me at (505) 393-9697.

Sincerely,



Judy L. Roberts

att

xc Hobbs OCD
Mike Warren

J & L LANDFARM, INC.



P. O. Box 356 • 8301 Eunice Hwy

Hobbs, New Mexico 88240

Phone (505) 393-9697

Fax (505) 393-8537

PERMIT # NM-01-0023

CELL DATA

CELL #	10	Status
		Exempt
YEAR:	2000	

LEE M. ROBERTS
Cell. (505) 631-5765

JUDY L. ROBERTS
Cell. (505) 631-5766

Company	Site Loc	Date Dep	Job #	Total Haul	Amt Haul		Cell Total Soil
					Rock/	Soil	
					Other		
Apache Corp	Northeast Drinkard Unit #518	7/12	107 & 145	120	0	120	
Apache Corp	Satellite 4-A	7/20	110	24	0	24	
Apache Corp	Chesse-Cole Plumlee Bty	7/13	108 & 146	84	0	84	
	TOTALS					228	228

1999	CELL STATUS DATA				Cell #2
COMPANY	SITE LOC.	DATE DEP.	TYPE SOIL	AMT. HAUL	JOB #
Exempt					
Apache Corp.	N.E.D.U. (central battery)	6-18/6-24-99	Exempt/Non-haz.	732 yds.	102
Apache Corp.	N.E.D.U. (10" Line)	10/1/1999	Exempt/Non-haz.	416 yds.	105
"	"	10/2/1999	"	594 yds.	"
"	"	10/4/1999	"	600 yds.	"
"	"	10/5/1999	"	256 yds.	"
"	"	10/6/1999	"	662 yds.	"
"	"	10/7/1999	"	192 yds.	"
	Total Yardage			3452	

July 3, 2002

J&L Landfarm, Inc.
Lee Roberts
P.O. Box 356
Hobbs, NM 88240

RE: Use of Remediated Soil

Mr. Roberts,

Per our discussion this morning, Apache Corporation will use the remediated Soil from J & L Landfarm, in the North East Drinkard Central Battery .It is Apache's understanding this 732 cubic yards of soil meets all requirements of the State of New Mexico for release from the landfill and this soil originated from sites in the North East Drinkard Unit Central Battery.

This soil will be used on the North East Drinkard Unit Central Battery as burms for leak control. North East Drinkard Unit is located in the Unit Letter "P" Sec 2,T21S,R37E. The ground water in this area is 45 ft. The surface is primarily caliche and the surface owner is Apache Corporation.

We appreciate your efforts on this project. If you have any questions, please call Apache Corporation Eunice Office at 505-394-1503 or 505-394-3159.

Sr.Production Foreman,
Mike Warren.





NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON

Governor

Betty Rivera

Cabinet Secretary

Lori Wrotenbery

Director

Oil Conservation Division

April 29, 2002

CERTIFIED MAIL

RETURN RECEIPT NO. 7001-1940-0004-7923-4139

Ms. Judy L. Roberts
J&L Landfarm, Inc.
P.O. Box 356
Hobbs, NM 88241-0356

**RE: Approval of Discontinued Maintenance Status and Application of Additional Lifts
J&L Landfarm, Inc., Permit NM-01-0023
N/2 N/2 of Section 9 and the N/2 N/2 of Section 10, Township 20 South, Range 38 East,
NMPM, Lea County, New Mexico**

Dear Ms. Roberts:

The New Mexico Oil Conservation Division (OCD) has received J&L Landfarm, Inc.'s (J&L) letter dated April 29, 2002 for discontinue maintenance, authorization to remove remediated soil for use within the landfarm on berms and to subsequently apply an additional lift of contaminated soil. Based on the information provided, Cell 1, Cell 2, Cell 3, Cell 4, Cell 6, Cell 9 and Cell 15 are **hereby approved** for discontinued maintenance status. The remediated soil within, Cell 1, Cell 2, Cell 3, Cell 4, Cell 6, Cell 9 and Cell 15 are **approved** for use within the landfarm on berms. Note that with the addition of successive lifts J&L must resume maintenance and treatment zone monitoring. If J&L wants to move the soils from the facility separate OCD authorization must be granted.

Please be advised that OCD approval does not relieve J&L of liability should their operation result in pollution of the ground water, surface water or the environment. In addition, OCD approval does not relieve J&L of the responsibility for compliance with other federal, state, local laws and/or regulations.

If you have any questions please do not hesitate to contact me at (505) 476-3488.

Sincerely,

Martyne J. Kieling
Environmental Geologist

xc: OCD Hobbs Office

STATE OF NEW MEXICO
ENERGY MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION

MEMORANDUM OF MEETING OR CONVERSATION

☒ Telephone ☐ Personal Time 10:30 Date 4-29-02

Originating Party

Marlyse Kieling

Other Parties

Judy Roberts

Subject

Discontinued Maintenance Status and to Approve
for Additional Lifts at a future Date.

Discussion

April 21, 2002 letter

will write Approval to add Additional lifts

Conclusions or Agreements

Distribution

Signed

Marlyse Kieling

RECEIVED

APR 9 5 2002

Environmental Bureau
Oil Conservation Division

J&L LANDFARM, INC.

OL CONSERVATION DIV.
CC APR 26 PM 2:25

P.O. Box 356

Hobbs, New Mexico 88241-0356

Phone (505) 393-9697

Fax (505) 393-8537

April 21, 2002

NM Energy, Minerals & Natural
Resources Dept. (OCD)
1220 South St. Francis Drive
Santa Fe, New Mexico 87505

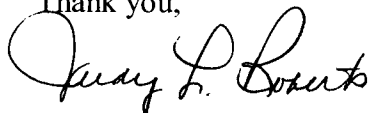
Attn: **Martyne Kieling**
Environmental Geologist

Dear Ms. Kieling:

We are requesting a **Discontinued Maintenance Status** for the following active cells within our landfarming facility: **cells 1, 2, 3, 4, 6, 9, 15**. A composite of the hydrocarbon impacted soil of each individual cell was collected and analytically tested for TPH/B-TEX. The results of the testing are attached.

If you need other information, please call me at (505) 393-9697.

Thank you,



Judy L. Roberts

xc Hobbs OCD

ORDINAL LABORATORIES, INC.

2111 Beechwood, Abilene, TX 79603 101 East Marland, Hobbs, NM 88240
(915) 673-7001 Fax (915) 673-7020 (505) 393-2326 Fax (505) 393-2476

Page 1 of 1

CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

Company Name: JPL Landfarm Inc.		BILL TO		PO #:		ANALYSIS REQUEST											
Project Manager: Lee M. Roberts		Company: Same															
Address: P.O. Box 356		Attn:															
City: Hobbs		Address:															
Phone #: 505-393-9697		City:															
Fax #: 505-393-8537		State:															
Project #: Cell Test		Phone #:															
Project Name: Cell Test		Fax #:															
Project Location: Sec. 9																	
FOR LAB USE ONLY																	

LAB I.D.	Sample I.D.	(G)RAB OR (C)OMP.	# CONTAINERS	MATRIX						PRES.	SAMPLING	DATE	TIME
				GROUNDWATER	WASTEWATER	SOIL	OIL	SLUDGE	OTHER :				
HL674-1	Cell Test	G	1			X						4/12/02	
-2	# 2	G	1			X							
-3	# 3	G	1			X							
-4	# 4	G	1			X							
-5	# 4	G	1			X							
-6	# 9	G	1			X							
-7	# 15	G	1			X							

Relinquished By:	Date: 4/12/02	Received By: (Lab Staff)	Sample Condition	CHECKED BY:
Joe M. Roberts	12:00 AM	LMU	Cool <input checked="" type="checkbox"/> Intact <input checked="" type="checkbox"/>	ALL
Relinquished By:	Date:	Received By:	Phone Result: <input type="checkbox"/> Yes <input type="checkbox"/> No	Additional Fax #: <input type="checkbox"/> Yes <input type="checkbox"/> No
			REMARKS:	

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Terms and Conditions: Interest will be charged on all accounts more than 30 days past due at the rate of 24% per annum from the original date of invoice, and all costs of collections, including attorney's fees.



PHONE (915) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

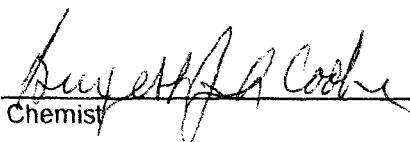
ANALYTICAL RESULTS FOR
J&L LANDFARM INC.
ATTN: LEE M. ROBERTS
P.O. BOX 356
HOBBS, NM 88241
FAX TO: (505) 393-8537


Receiving Date: 04/12/02
Reporting Date: 04/16/02
Project Number: NOT GIVEN
Project Name: CELL TEST
Project Location: SEC. 9

Sampling Date: 04/12/02
Sample Type: SOIL
Sample Condition: COOL & INTACT
Sample Received By: AH
Analyzed By: BC

LAB NUMBER	SAMPLE ID	BENZENE (mg/Kg)	TOLUENE (mg/Kg)	ETHYL BENZENE (mg/Kg)	TOTAL XYLENES (mg/Kg)
ANALYSIS DATE		04/15/02	04/15/02	04/15/02	04/15/02
H6674-1	CELL TEST #1	<0.005	<0.005	<0.005	<0.015
H6674-2	CELL TEST #2	<0.005	<0.005	<0.005	<0.015
H6674-3	CELL TEST #3	<0.005	<0.005	<0.005	<0.015
H6674-4	CELL TEST #4	<0.005	<0.005	<0.005	<0.015
H6674-5	CELL TEST #6	<0.005	<0.005	<0.005	<0.015
H6674-6	CELL TEST #9	<0.005	<0.005	<0.005	<0.015
H6674-7	CELL TEST #15	<0.005	<0.005	<0.005	<0.015
Quality Control		0.105	0.103	0.106	0.303
True Value QC		0.100	0.100	0.100	0.300
% Recovery		105	103	106	101
Relative Percent Difference		2.7	3.7	4.9	5.2

METHOD: EPA SW-846 8260


Chemist


Date

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H6674.XLS

J&L Landfarm, Inc.
 Subject: Qtr Test
 Cells: B-1, 11,12,13,14
 Date: 4/21/2002

non-exempt cells:

exempt cells:
 B-1, 11, 12, 13, 14

N
 ~~~  
 S

|             |         |         |         |         |         |        |        |        |
|-------------|---------|---------|---------|---------|---------|--------|--------|--------|
| DMS PENDING |         |         |         |         |         |        |        |        |
| Active      |         |         |         |         |         |        |        |        |
| DMS         |         |         |         |         |         |        |        |        |
| cell 1      | cell 2  | cell 3  | cell 4  | cell 5  | cell 6  | cell 7 | cell 8 | cell 9 |
|             |         |         |         |         |         |        |        |        |
| cell 10     | cell 11 | cell 12 | cell 13 | cell 14 | cell 15 | B-1    |        |        |
|             |         |         |         |         |         |        |        |        |





2111 Beechwood, Abilene, TX 79603 101 East Marland, Hobbs, NM 88240  
(915) 673-7001 Fax (915) 673-7020 (505) 393-2326 Fax (505) 393-2476

Page 1 of 1

## CHAIN-OF-CUSTODY AND ANALYSIS REQUEST

|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|-----------------------------------------|--|----------------------|--|-------------------|--|--------------|--|-------------|--|------------|--|------|--|-----|--|--------|--|--------|--|-------|--|------------|--|--------|--|--------------|--|------|--|--------|--|--|--|--|--|--|--|--|--|--|--|
| Company Name: <u>Th. Landscare Inc.</u> |  | <b>BILTO</b> PO #:   |  | ANALYSIS REQUEST  |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Project Manager: <u>July L. Roberts</u> |  | Company: <u>Same</u> |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Address: <u>P.O. Box 356</u>            |  | Attn:                |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| City: <u>Abbeville</u>                  |  | Address:             |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Phone #: <u>505-393-9697</u>            |  | City:                |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Fax #: <u>505-393-8537</u>              |  | State:               |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Project #: <u>See-9</u>                 |  | Zip:                 |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Project Name: <u>Well Test</u>          |  | Phone #:             |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| Project Location: <u>See-9</u>          |  | Fax #:               |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| FOR LAB USE ONLY                        |  | MATRIX               |  | PRES.             |  | SAMPLING     |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| LAB I.D.                                |  | Sample I.D.          |  | (G)RAB OR (C)OMP. |  | # CONTAINERS |  | GROUNDWATER |  | WASTEWATER |  | SOIL |  | OIL |  | SLUDGE |  | OTHER: |  | ACID: |  | ICE / COOL |  | OTHER: |  | DATE         |  | TIME |  |        |  |  |  |  |  |  |  |  |  |  |  |
| M6663-1                                 |  | #1                   |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  | 4/9/02 11:00 |  |      |  | T.R.H. |  |  |  |  |  |  |  |  |  |  |  |
| -2                                      |  | #2                   |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| -3                                      |  | #3                   |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| -4                                      |  | #4                   |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| -5                                      |  | #5                   |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| -6                                      |  | #6                   |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
| -7                                      |  | #7                   |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |
|                                         |  |                      |  |                   |  |              |  |             |  |            |  |      |  |     |  |        |  |        |  |       |  |            |  |        |  |              |  |      |  |        |  |  |  |  |  |  |  |  |  |  |  |



# ARDINAL LABORATORIES

PHONE (915) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

ANALYTICAL RESULTS FOR  
J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM 88240  
FAX TO: (505) 393-3537

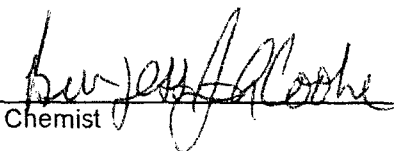
Receiving Date: 04/09/02  
Reporting Date: 04/10/02  
Project Number: NOT GIVEN  
Project Name: CELL TEST  
Project Location: SEC-9

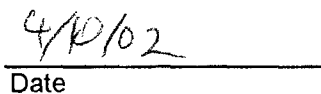
Analysis Date: 04/09/02  
Sampling Date: 04/09/02  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: BC  
Analyzed By: BC

LAB NUMBER      SAMPLE ID      TPH  
(mg/Kg)

|                             |              |      |
|-----------------------------|--------------|------|
| H6663-1                     | CELL TEST #1 | 30.0 |
|                             |              |      |
|                             |              |      |
|                             |              |      |
|                             |              |      |
|                             |              |      |
|                             |              |      |
| Quality Control             |              | 218  |
| True Value QC               |              | 240  |
| % Recovery                  |              | 90.8 |
| Relative Percent Difference |              | 7.0  |

METHOD: EPA 418.1

  
Chemist

  
Date

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H6663-1.XLS





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ANALYTICAL RESULTS FOR  
J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM 88240  
FAX TO: (505) 393-3537

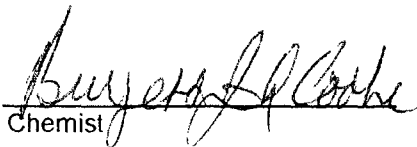
Receiving Date: 04/09/02  
Reporting Date: 04/10/02  
Project Number: NOT GIVEN  
Project Name: CELL TEST  
Project Location: SEC-9

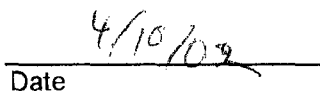
Analysis Date: 04/09/02  
Sampling Date: 04/09/02  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: BC  
Analyzed By: BC

LAB NUMBER      SAMPLE ID      TPH  
(mg/Kg)

|                             |              |      |
|-----------------------------|--------------|------|
| H6663-2                     | CELL TEST #2 | 37.7 |
|                             |              |      |
|                             |              |      |
|                             |              |      |
|                             |              |      |
|                             |              |      |
| Quality Control             |              | 218  |
| True Value QC               |              | 240  |
| % Recovery                  |              | 90.8 |
| Relative Percent Difference |              | 7.0  |

METHOD: EPA 418.1

  
Chemist

  
Date

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H6663-2.XLS



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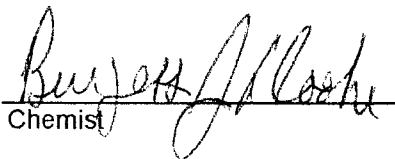
ANALYTICAL RESULTS FOR  
J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM 88240  
FAX TO: (505) 393-3537

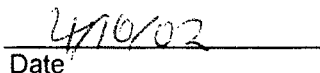
Receiving Date: 04/09/02  
Reporting Date: 04/10/02  
Project Number: NOT GIVEN  
Project Name: CELL TEST  
Project Location: SEC-9

Analysis Date: 04/09/02  
Sampling Date: 04/09/02  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: BC  
Analyzed By: BC

| LAB NUMBER                  | SAMPLE ID    | TPH<br>(mg/Kg) |
|-----------------------------|--------------|----------------|
| H6663-3                     | CELL TEST #3 | 25.9           |
|                             |              |                |
|                             |              |                |
|                             |              |                |
|                             |              |                |
|                             |              |                |
| Quality Control             |              | 218            |
| True Value QC               |              | 240            |
| % Recovery                  |              | 90.8           |
| Relative Percent Difference |              | 7.0            |

METHOD: EPA 418.1

  
Chemist

  
Date

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H6663-3.XLS



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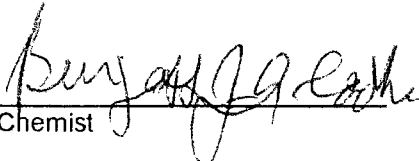
ANALYTICAL RESULTS FOR  
J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM 88240  
FAX TO: (505) 393-3537


Receiving Date: 04/09/02  
Reporting Date: 04/10/02  
Project Number: NOT GIVEN  
Project Name: CELL TEST  
Project Location: SEC-9

Analysis Date: 04/09/02  
Sampling Date: 04/09/02  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: BC  
Analyzed By: BC

| LAB NUMBER                  | SAMPLE ID    | TPH<br>(mg/Kg) |
|-----------------------------|--------------|----------------|
| H6663-4                     | CELL TEST #4 | 25.5           |
|                             |              |                |
|                             |              |                |
|                             |              |                |
|                             |              |                |
|                             |              |                |
| Quality Control             |              | 218            |
| True Value QC               |              | 240            |
| % Recovery                  |              | 90.8           |
| Relative Percent Difference |              | 7.0            |

METHOD: EPA 418.1

  
Chemist

  
Date

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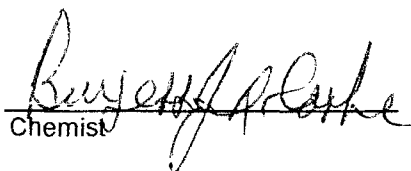
ANALYTICAL RESULTS FOR  
J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM 88240  
FAX TO: (505) 393-3537

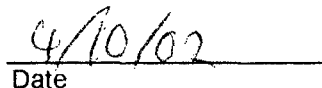
Receiving Date: 04/09/02  
Reporting Date: 04/10/02  
Project Number: NOT GIVEN  
Project Name: CELL TEST  
Project Location: SEC-9

Analysis Date: 04/09/02  
Sampling Date: 04/09/02  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: BC  
Analyzed By: BC

| LAB NUMBER                  | SAMPLE ID    | TPH<br>(mg/Kg) |
|-----------------------------|--------------|----------------|
| H6663-5                     | CELL TEST #6 | 20.5           |
|                             |              |                |
|                             |              |                |
|                             |              |                |
|                             |              |                |
|                             |              |                |
| Quality Control             |              | 218            |
| True Value QC               |              | 240            |
| % Recovery                  |              | 90.8           |
| Relative Percent Difference |              | 7.0            |

METHOD: EPA 418.1

  
Chemist

  
Date

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J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM 88240  
FAX TO: (505) 393-3537

Receiving Date: 04/09/02  
Reporting Date: 04/10/02  
Project Number: NOT GIVEN  
Project Name: CELL TEST  
Project Location: SEC-9

Analysis Date: 04/09/02  
Sampling Date: 04/09/02  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: BC  
Analyzed By: BC

| LAB NUMBER | SAMPLE ID | TPH<br>(mg/Kg) |
|------------|-----------|----------------|
|------------|-----------|----------------|

|                             |              |      |
|-----------------------------|--------------|------|
| H6663-6                     | CELL TEST #9 | 24.6 |
|                             |              |      |
|                             |              |      |
|                             |              |      |
|                             |              |      |
|                             |              |      |
|                             |              |      |
| Quality Control             |              | 218  |
| True Value QC               |              | 240  |
| % Recovery                  |              | 90.8 |
| Relative Percent Difference |              | 7.0  |

METHOD: EPA 418.1

  
Chemist

4/10/02  
Date

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H6663-6.XLS



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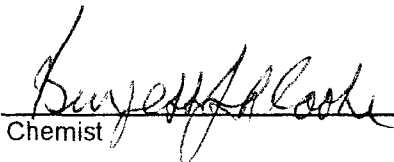
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J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM 88240  
FAX TO: (505) 393-3537

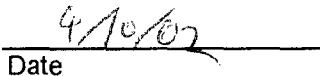
Receiving Date: 04/09/02  
Reporting Date: 04/10/02  
Project Number: NOT GIVEN  
Project Name: CELL TEST  
Project Location: SEC-9

Analysis Date: 04/09/02  
Sampling Date: 04/09/02  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: BC  
Analyzed By: BC

| LAB NUMBER                  | SAMPLE ID     | TPH<br>(mg/Kg) |
|-----------------------------|---------------|----------------|
| H6663-7                     | CELL TEST #15 | 48.2           |
|                             |               |                |
|                             |               |                |
|                             |               |                |
|                             |               |                |
|                             |               |                |
| Quality Control             |               | 218            |
| True Value QC               |               | 240            |
| % Recovery                  |               | 90.8           |
| Relative Percent Difference |               | 7.0            |

METHOD: EPA 418.1

  
Chemist

  
Date

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H6663-7.XLS



# NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON  
Governor  
Jennifer A. Salisbury  
Cabinet Secretary

November 26, 2001

Lori Wrotenbery  
Director  
Oil Conservation Division

**CERTIFIED MAIL**  
**RETURN RECEIPT NO. 7099-3220-0000-5051-2689**

Ms. Judy L. Roberts  
J&L Landfarm, Inc.  
P.O. Box 356  
Hobbs, NM 88241-0356

**RE: Approval To Recycle Soil**  
**J&L Landfarm, Inc., Permit NM-01-0023**  
**N/2 N/2 of Section 9 and the N/2 N/2 of Section 10, Township 20 South, Range 38 East,**  
**NMPM, Lea County, New Mexico**

The New Mexico Oil Conservation Division (OCD) has received J&L Landfarm, Inc.'s (J&L) letter of November 1, 2001 requesting to recycle soil from Cell 8 that has already been approved for discontinued maintenance status on October 17, 2001. J&L's request to recycle approximately 335 cubic yards of soil located in Cell-8 all generated by Rice Operating Company is hereby approved with the following recycling uses:

1. Soil backfill for Rice Operating Company oil and gas projects such as refilling pits and building berms.

Application of these soils in the approved projects listed above must not result in run-off into any waters of the U.S. If J&L wants to move the soils from Cell 8 for any other use than those approved here separate OCD authorization must be granted.

Please be advised that OCD approval does not relieve J&L of liability should their operation result in pollution of the ground water, surface water of the environment. In addition, OCD approval does not relieve J&L of the responsibility for compliance with other federal state and/or local regulations.

If you have any further questions please do not hesitate to contact me at (505) 476-3488.

Sincerely,

Martyne J. Kieling  
Environmental Geologist

xc: OCD Hobbs Office

**J&L LANDFARM, INC.**

P.O. BOX 356  
8301 EUNICE HWY.  
HOBBS, NEW MEXICO 88241-0356

Phone (505) 393-9697  
Fax (505) 393-8537

RECEIVED

NOV 19 2001

Environmental Bureau  
Oil Conservation Division

November 1, 2001

Martyne J. Kieling  
NM Energy, Minerals & Natural Resources, OCD  
1220 South St. Francis Drive  
Santa Fe, New Mexico 87505

**Re: Authorization to Move Soil**

Dear Ms. Kieling:

J&L Landfarm, Inc. would like to submit this request for authorization to move specific remediated soils from our facility and to a specified location for use as backfill.

The remediated soil was removed from three separate Rice Operating Company locations during 1999 and 2000 (see attached Cell Status Data). The contaminated soil was deposited in our facility in Cell #8 and remediated according to State of New Mexico OCD guidelines. Cell #8 has been approved for discontinue maintenance status.

Rice Operating Company has requested the use of this soil for backfill on one of their pending remediation projects (see attached letter from Donnie Anderson, Project Leader for Rice).

If you need any other information, please call me at (505) 393-9697.

Thank you for your attention in this matter.

Sincerely,



Judy L. Roberts

att  
xc Hobbs OCD  
Donnie Anderson, Rice Operating Co.



[illegible]

CELL STATUS DATA

CELL: #8 EXEMPT

**ACCUM**

Job Total Yardage

255

Accumulative total Cell Yds

255

Job Total Yardage

20

Accumulative total Cell Yds

275

Job Total Yardage

60

Accumulative total Cell Yds

335

# RICE Operating Company

122 West Taylor • Hobbs, New Mexico 88240  
Phone: (505)393-9174 • Fax: (505) 397-1471

November 1, 2001

J & L Landfarm, Inc.  
Lee Roberts  
P. O. Box356  
Hobbs, NM 88240

RE: Use of Remediated Soil

Mr. Roberts,

Per our discussion this morning, Rice Operating Company (ROC) will use the remediated soil from J & L Landfarm, Cell #8 in the Hobbs East SWD System. It is ROC's understanding this 335 cubic yards of soil meets all requirements of the State of New Mexico for release from the landfill and this soil originated from sites in the Eunice Monument Eumont (EME) SWD System.

This soil will be used on the Hobbs East N-29 as backfill once this site is remediated. Hobbs East N-29 is located in the SE/4 SW/4 Section 29, T18S, R39E. The ground water in this area is 82' bgs. The surface is primarily grazing land and the surface owner is Enerquest Resources, LLC.

We appreciate your efforts on this project. If you have any questions, please call.

Rice Operating Company



Donnie Anderson  
Project Leader-Environmental

Cc: CDH, file



# NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON

Governor

Jennifer A. Salisbury

Cabinet Secretary

October 17, 2001

Lori Wrotenbery

Director

Oil Conservation Division

**CERTIFIED MAIL**

**RETURN RECEIPT NO. 7099-3220-0000-5051-2436**

Ms. Judy L. Roberts  
J&L Landfarm, Inc.  
P.O. Box 356  
Hobbs, NM 88241-0356

**RE: Approval of Discontinued Maintenance Status and Application of Additional Lifts  
J&L Landfarm, Inc., Permit NM-01-0023  
N/2 N/2 of Section 9 and the N/2 N/2 of Section 10, Township 20 South, Range 38 East,  
NMPM, Lea County, New Mexico**

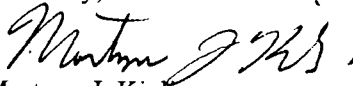
Dear Ms. Roberts:

The New Mexico Oil Conservation Division (OCD) has received J&L Landfarm, Inc's (J&L) letter dated August 8, 2000 for discontinue maintenance, authorization to remove remediated soil for use within the landfarm on berms and to subsequently apply an additional lift of contaminated soil. Based on the information provided, Cell 5, Cell 7, Cell 8 and Cell 10 are **hereby approved** for discontinued maintenance status. The remediated soil within Cell 5, Cell 7, Cell 8 and Cell 10 are **approved** for use within the landfarm on berms. Note that with the addition of successive lifts J&L must resume maintenance and treatment zone monitoring. If J&L wants to move the soils from the facility separate OCD authorization must be granted.

Please be advised that OCD approval does not relieve J&L of liability should their operation result in pollution of the ground water, surface water or the environment. In addition, OCD approval does not relieve J&L of the responsibility for compliance with other federal, state, local laws and/or regulations.

If you have any questions please do not hesitate to contact me at (505) 476-3488.

Sincerely,

  
Martyne J. Kieling  
Environmental Geologist

xc: OCD Hobbs Office

**J&L LANDFARM, INC.**

P.O. BOX 356  
8301 EUNICE HWY.  
HOBBS, NEW MEXICO 88241-0356

Phone (505) 393-9697  
Fax (505) 393-8537

RECEIVED

August 8, 2001

OCT 17 2001

Environmental Bureau  
Oil Conservation Division

New Mexico Energy, Minerals & Natural  
Resources Dept. (OCD)  
1220 South St. Francis Drive  
Santa Fe, New Mexico 87505

**Attn: Roger Anderson**

Mr. Anderson:

J&L Landfarm, Inc. is requesting a **Discontinued Maintenance Status** for four (4) of the current open and active cells being landfarmed.

We are requesting this status for **cells five (5) and seven (7), non-exempt soils, and eight (8) and ten (10), exempt soils.**

If approved we will be relocating the soils from these cells for purposes of rebuilding and reinforcing berms around other cells within the landfarm. After this first lift of remediated soils is removed from each cell we would be spreading another six-inch (6") lift of contaminated soil directly on top of the native soil.

Attached are analytical testing results for TPH, BTEX and benzene levels for cells 5, 7, 8, and 10. Also, attached is a map showing cell location area.

If you need other information, please call me at (505) 393-9697.

Thank you,



Judy L. Roberts

att  
xc Hobbs OCD





# ARDINAL LABORATORIES

PHONE (915) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

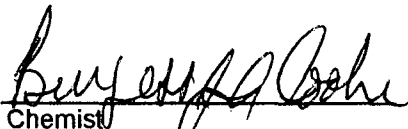
ANALYTICAL RESULTS FOR  
J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM. 88241-0356  
FAX TO:

Receiving Date: 07/25/01  
Reporting Date: 07/27/01  
Project Number: NOT GIVEN  
Project Name: TPH CHECK  
Project Location: SEC 9&10

Analysis Date: 07/26/01  
Sampling Date: 07/25/01  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: BC

| LAB NUMBER                  | SAMPLE ID | TPH<br>(mg/Kg) |
|-----------------------------|-----------|----------------|
| H6018-3                     | CELL 5    | <10            |
|                             |           |                |
|                             |           |                |
|                             |           |                |
|                             |           |                |
|                             |           |                |
| Quality Control             |           | 233            |
| True Value QC               |           | 240            |
| % Recovery                  |           | 97.1           |
| Relative Percent Difference |           | 5.9            |

METHOD: EPA 600/4-79-020 418.1

  
Chemist

7/27/01  
Date

H6018-3.XLS

PLEASE NOTE: **Liability and Damages.** Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services hereunder by Cardinal, regardless of whether such claim is based upon any of the above-stated reasons or otherwise.



PHONE (915) 873-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

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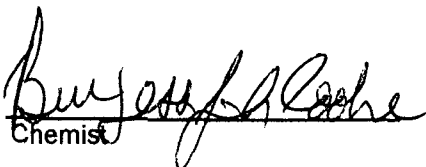
ANALYTICAL RESULTS FOR  
J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM. 88241-0356  
FAX TO:

Receiving Date: 07/25/01  
Reporting Date: 07/27/01  
Project Number: NOT GIVEN  
Project Name: TPH CHECK  
Project Location: SEC 9&10

Analysis Date: 07/26/01  
Sampling Date: 07/25/01  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: BC

| LAB NUMBER                  | SAMPLE ID | TPH<br>(mg/Kg) |
|-----------------------------|-----------|----------------|
| H6018-5                     | CELL 7    | 34.5           |
|                             |           |                |
|                             |           |                |
|                             |           |                |
|                             |           |                |
|                             |           |                |
|                             |           |                |
| Quality Control             |           | 233            |
| True Value QC               |           | 240            |
| % Recovery                  |           | 97.1           |
| Relative Percent Difference |           | 5.9            |

METHOD: EPA 600/4-79-020 418.1

  
Chemist

7/27/01  
Date

H6018-5.XLS

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# ARDINAL LABORATORIES

PHONE (915) 873-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

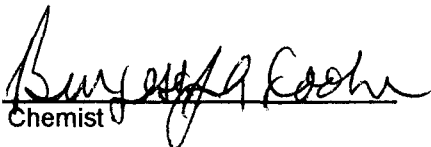
ANALYTICAL RESULTS FOR  
J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM. 88241-0356  
FAX TO:

Receiving Date: 07/25/01  
Reporting Date: 07/27/01  
Project Number: NOT GIVEN  
Project Name: TPH CHECK  
Project Location: SEC 9&10

Analysis Date: 07/26/01  
Sampling Date: 07/25/01  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: BC

| LAB NUMBER                  | SAMPLE ID | TPH<br>(mg/Kg) |
|-----------------------------|-----------|----------------|
| H6018-6                     | CELL 8    | 82.9           |
|                             |           |                |
|                             |           |                |
|                             |           |                |
|                             |           |                |
|                             |           |                |
|                             |           |                |
| Quality Control             |           | 233            |
| True Value QC               |           | 240            |
| % Recovery                  |           | 97.1           |
| Relative Percent Difference |           | 5.9            |

METHOD: EPA 600/4-79-020 418.1

  
Chemist

7/27/01  
Date

H6018-6.XLS

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# ARDINAL LABORATORIES

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PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

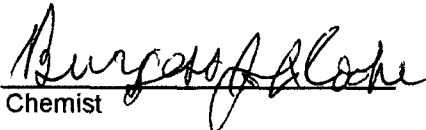
ANALYTICAL RESULTS FOR  
J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM. 88241-0356  
FAX TO:

Receiving Date: 07/25/01  
Reporting Date: 07/27/01  
Project Number: NOT GIVEN  
Project Name: TPH CHECK  
Project Location: SEC 9&10

Analysis Date: 07/26/01  
Sampling Date: 07/25/01  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: BC

| LAB NUMBER                  | SAMPLE ID | TPH<br>(mg/Kg) |
|-----------------------------|-----------|----------------|
| H6018-8                     | CELL 10   | 35.9           |
|                             |           |                |
|                             |           |                |
|                             |           |                |
|                             |           |                |
|                             |           |                |
| Quality Control             |           | 233            |
| True Value QC               |           | 240            |
| % Recovery                  |           | 97.1           |
| Relative Percent Difference |           | 5.9            |

METHOD: EPA 600/4-79-020 418.1

  
Chemist

7/27/01  
Date

H6018-8.XLS

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2111 Beechwood, Abilene, TX 79603 101 East Marland, Hobbs, NM 88240  
(915) 673-7001 Fax (915) 673-7020 (505) 393-2326 Fax (505) 393-2476

## Page 1 of 1

† Cardinal cannot accept verbal changes. Please fax written changes to 505-393-2476.



# ARDINAL LABORATORIES

PHONE (915) 873-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

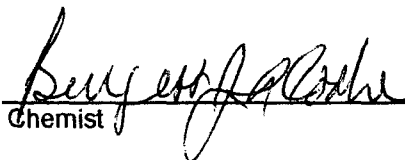
ANALYTICAL RESULTS FOR  
J&L LANDFARM, INC.  
ATTN: JUDY L. ROBERTS  
P.O. BOX 356  
HOBBS, NM 88241-0356  
FAX TO:


Receiving Date: 07/31/01  
Reporting Date: 08/01/01  
Project Number: NOT GIVEN  
Project Name: SEC. 9&10  
Project Location: NOT GIVEN

Sampling Date: 07/31/01  
Sample Type: SOIL  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: BC

| LAB NO.                     | SAMPLE ID | BENZENE<br>(mg/Kg) | TOLUENE<br>(mg/Kg) | ETHYL<br>BENZENE<br>(mg/Kg) | TOTAL<br>XYLENES<br>(mg/Kg) |
|-----------------------------|-----------|--------------------|--------------------|-----------------------------|-----------------------------|
| ANALYSIS DATE               |           | 07/31/01           | 07/31/01           | 07/31/01                    | 07/31/01                    |
| H6027-1                     | CELL #5   | <0.005             | <0.005             | <0.005                      | <0.015                      |
| H6027-2                     | CELL #7   | <0.005             | <0.005             | <0.005                      | <0.015                      |
| H6027-3                     | CELL #8   | <0.005             | <0.005             | <0.005                      | <0.015                      |
| H6027-4                     | CELL #10  | <0.005             | <0.005             | <0.005                      | <0.015                      |
|                             |           |                    |                    |                             |                             |
|                             |           |                    |                    |                             |                             |
|                             |           |                    |                    |                             |                             |
|                             |           |                    |                    |                             |                             |
|                             |           |                    |                    |                             |                             |
| Quality Control             |           | 0.101              | 0.090              | 0.091                       | 0.271                       |
| True Value QC               |           | 0.100              | 0.100              | 0.100                       | 0.300                       |
| % Recovery                  |           | 101                | 89.6               | 90.9                        | 90.4                        |
| Relative Percent Difference |           | <0.1               | 2.6                | 5.6                         | 5.1                         |

METHOD: EPA SW-846 8260

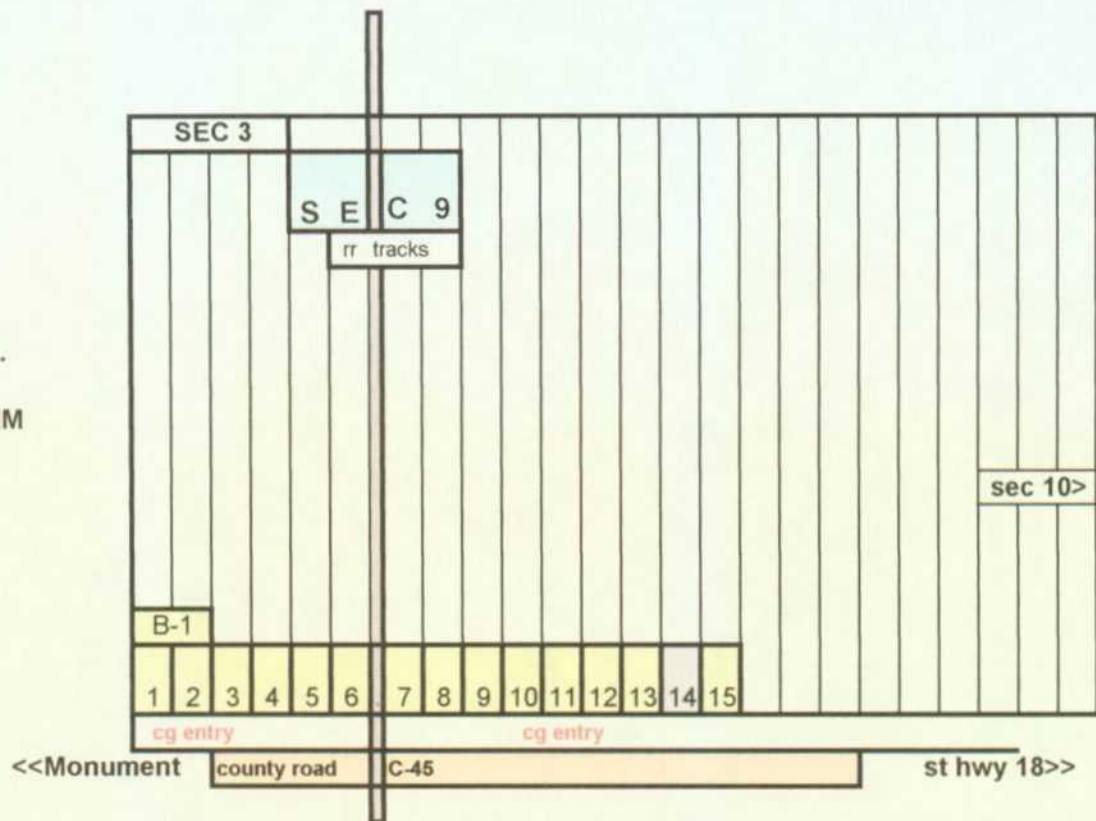
  
Chemist

  
Date

H6027.XLS

PLEASE NOTE: **Liability and Damages.** Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services hereunder by Cardinal, regardless of whether such claim is based upon any of the above-stated reasons or otherwise.

J&L Landfarm, Inc.  
TS 20S R38E  
Nadine, Lea Co., NM  
N/2 N/2 Sec 9  
N/2 N/2 Sec 10





# NORM DECON SERVICES, LLC

OFFICE: 1910 North Big Spring  
Midland, Texas 79705  
915-682-4559 • Fax 915-682-3946

YARD: 2809 S. County Rd. #1257  
Midland, Texas 79706  
915-563-1123 • Fax 915-563-1823

ALL: MARTYNE  
FOR YOUR FILES!

RP

August 24, 2001

Mr. Wayne Price  
New Mexico Oil Conservation Division  
1220 S. St. Francis Dr.  
Santa Fe, NM 87504

Dear Mr. Price:

Thank you for meeting with myself, Ms. Haynes and Mr. Curtis this past Wednesday. Per your request, I have enclosed the waste receipt tickets for the material that went to Parabo and the waste certifications for material that went to Waste Management. I have also enclosed the laboratory results for the samples that were taken at J&L Landfarms which indicate that regulated NORM is not present. You also requested the amount of waste that went to Parabo. Approximately 2800 yds of waste were transported and disposed at Parabo.

Please contact me at 915-563-1123 should you have any questions or require additional information. Mr. Curtis can be reached at 505-393-9174.

Sincerely,

Mitchell W. Davis, RRPT  
Health Physicist

Analytical in  
Sundance File

# Public Regulation Commission

3/6/2000

J & L LANDFARM, INC.

## MAILING ADDRESS

8301 EUNICE HIGHWAY HOBBS NEW MEXICO 88240

---

SCC Number: 1988393

Tax & Revenue Number:

INCORPORATED ON FEBURARY 18, 1999 , IN NEW MEXICO.

CORPORATION IS A DOMESTIC PROFIT

CORPORATION IS ACTIVE  
GOOD STANDING THROUGH: 3/15/2002

PURPOSE OF THE CORPORATION  
COMMERCIAL SURFACE WASTE MANAGEMENT

## CORPORATION DATES

Taxable Year End Date: 12/31/01      Filing Date: 03/19/99  
Corporate Existence Expiration Date:

## SUPPLEMENTAL POST MARK DATES

Supplemental:      Name Change:      Purpose Change:

## PRINCIPAL ADDRESS

8301 EUNICE HIGHWAY HOBBS NEW MEXICO 88240

PRINCIPAL ADDRESS(Outside New Mexico)

---

## REGISTERED AGENT

JUDY ROBERTS

8301 EUNICE HIGHWAY HOBBS NEW MEXICO 88240

Designation date: 03/19/99      Agent Post Mark Date:      Resignation date:

## COOP LICENSE INFORMATION

Number:      Type:      Expiration Year:

ROBERTS, JUDY *President*

ROBERTS, JUDY *Vice President*

ROBERTS, LEE *Secretary*

**ROBERTS, JUDY *Treasurer***

---

***DIRECTORS***

***Date Election of Directors:***

**ROBERTS , JUDY**

8301 EUNICE HWY HOBBS , NM 88240

**New Search Inquiry Page**

MEMORANDUM OF MEETING OR CONVERSATION

|                                                                                                                                                                                                                            |                          |                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------|
| <input checked="" type="checkbox"/> Telephone <input type="checkbox"/> Personal                                                                                                                                            | Time<br>2:00             | Date<br>10-4-99      |
| <u>Originating Party</u><br>Judy Roberts<br>393-5697                                                                                                                                                                       |                          | <u>Other Parties</u> |
| <u>Subject</u><br>Land Farm<br>EOTT Exempt Soil                                                                                                                                                                            |                          |                      |
| <u>Discussion</u><br>Get verification from District Supervisor on Exempt Status.<br><del>Judy</del> Judy is Hearing Second Hand rumors that "She's taking material without the correct Documentation."<br>"Land Farm wars" |                          |                      |
| <u>Conclusions or Agreements</u><br><del>Judy</del> Judy will talk to Chris & Donna with the <del>the</del> Documentation in hand                                                                                          |                          |                      |
| <u>Distribution</u>                                                                                                                                                                                                        | Signed<br>Mary Kay Keith |                      |





**NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT**

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

May 21, 1999

**CERTIFIED MAIL  
RETURN RECEIPT NO. P-326-936-536**

Ms. Judy L. Roberts  
J&L Landfarm, Inc.  
P.O. Box 356  
Hobbs, NM 88240

**RE: J&L Landfarm, Inc. Permit NM-01-0023  
Commercial Landfarm  
N/2 N/2 of Section 9 and the N/2 N/2 of Section 10, Township 20 South, Range 38 East,  
NMPM, Lea County, New Mexico**

Dear Ms. Roberts:

The New Mexico Oil Conservation Division (OCD) has identified an oil well located within the J&L Landfarm, Inc.(J&L) commercial landfarm that was not disclosed in the original permit application. J&L must submit a modification to their permit NM-01-0023 that discloses the location of all operating or plugged and abandon oil/gas wells, operational or abandoned pits, lease roads, flow lines, pipelines or other oil/gas related structures located within the permitted facility boundary.

The permit modification request must include a written description of the 20 foot set back and landfarm berms that must be constructed to separate contaminated soil from any non-landfarm activities. In addition, J&L must include a map disclosing the location of these features.

Enclosed are the Forms C-103 and C-137. **Please sign and return the Form C-137, attachments and required copies to the OCD Santa Fe office and Hobbs District office by June 25, 1999.** Please note that the Hobbs District office address has to 1625 N. French Drive, Hobbs, NM 87240.

If you have any questions please do not hesitate to contact me at (505) 827-7153.

Sincerely,

Martyne J. Kieling  
Environmental Geologist

xc with attachments:  
Hobbs OCD Office

MEMORANDUM OF MEETING OR CONVERSATION

|                                                                                 |                              |                                                         |
|---------------------------------------------------------------------------------|------------------------------|---------------------------------------------------------|
| <input checked="" type="checkbox"/> Telephone <input type="checkbox"/> Personal | Time<br>10:40                | Date<br>5-21-99 Left message                            |
| <u>Originating Party</u><br>Martyne Kieling                                     |                              | <u>Other Parties</u><br>Judy Roberts<br>J & L Land Farm |
| <u>Subject</u><br>Modification to Land Farm Well Head Pad Pit 20' Set Back      |                              |                                                         |
| <u>Discussion</u><br>Please send modification                                   |                              |                                                         |
| <u>Conclusions or Agreements</u><br>Will Process at some later date             |                              |                                                         |
| <u>Distribution</u>                                                             | Signed<br>Martyne J. Kieling |                                                         |

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

Tamarack Petroleum Company, Inc.

3. Address of Operator

500 W. Texas, Suite 1485, Midland, TX 79701

4. Well Location

Unit Letter D : 660 Feet From The North Line and 660 Feet From The West Line

Section 9 Township 20S Range 38E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3588' RKB

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Open additional Blinebry pay ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Ran bit & scraper to 6609', circ frac sand out of hole.
2. Perforated additional Blinebry pay as follows: 5879'-5932' (10 holes), 5942'-5943' (6 holes), 6107'-6137' (9 holes), 6194'-6263' (13 holes), 6308'-6332' (6 holes), 6383'-6413' (8 holes).
3. Acidized new & old perfs with 10,550 gals 15% NEFE acid, isolating selected zones with RBP plus packer.
4. Swabbed back load, pulled RBP and packer.
5. Ran tubing, pump & rods - returned well to prod.

Note: Work was completed 10/14/95. Notice of intention was not given.  
Please excuse this oversight.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TITLE

District Engineer

DATE

5/20/96

TYPE OR PRINT NAME

Hal Gill

(915) 683-5474  
TELEPHONE NO.

(This space for State Use)

DISTRICT 1 SUPERVISOR

MAY 23 1996

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

**NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-1  
Supersedes  
Effective

All distances must be from the outer boundaries of the Section

|                                                  |                                        |                                           |                         |                                |                      |
|--------------------------------------------------|----------------------------------------|-------------------------------------------|-------------------------|--------------------------------|----------------------|
| Operator<br><b>Tammerack Petroleum Co, Inc.,</b> |                                        |                                           | Lease<br><b>Speight</b> |                                | Well No.<br><b>1</b> |
| Tract Letter<br><b>D</b>                         | Section<br><b>9</b>                    | Township<br><b>20 South</b>               | Range<br><b>38 East</b> | County<br><b>Lea</b>           |                      |
| Actual Portage Location of Well:                 |                                        |                                           |                         |                                |                      |
| <b>660</b> feet from the <b>North</b> line and   |                                        | <b>660</b> feet from the <b>West</b> line |                         |                                |                      |
| Ground Level Elev.<br><b>3575</b>                | Producing Formation<br><b>Drinkard</b> | Pool<br><b>Undesignated</b>               |                         | Dedicated Acreage<br><b>40</b> |                      |

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to well interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes    ☐ No    If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.

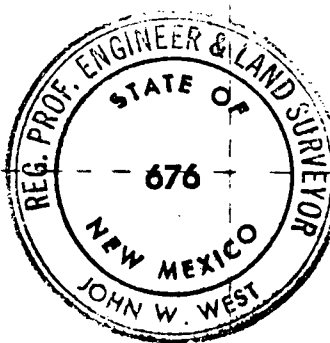
660' —○— 660'

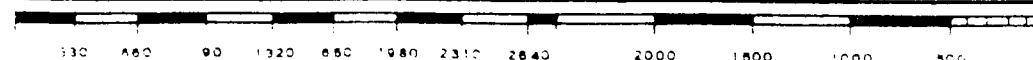
**RECEIVED**

**AUG 22 1980**

**OIL CONSERVATION DIVISION**

**SANTA FE**





**CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name *C. A. Fitzmaurice*  
 Position **Prod. Supt.**

Company **Tammerack Petroleum Co**  
 Date **August 19, 1980**

I hereby certify that the well location shown on this plat was plotted from notes of actual surveys made by me under my supervision and that the information is true and correct to the best of my knowledge and belief.

Date Surveyed **August 19, 1980**

Registered Professional Engineer and or Land Surveyor

*John W. West*  
 Certificate No. **JOHN W. WEST**  
**PATRICK A. ROMERO**  
**Ronald J. Eldson**

**Petroleum Information**

© Copyrighted. Reproduction Prohibited

COUNTY LEA FIELD Wildcat STATE NM  
 OPR TAMARACK PETROLEUM CO., INC. API 30-025-27006  
 NO 1 LEASE Speight MAP  
Sec 9, T20S, R38E COORD  
660 FNL, 660 FWL of Sec 11-4-19 NM  
3 mi SW/Nadine SPD 8-27-80 CMP 10-28-80

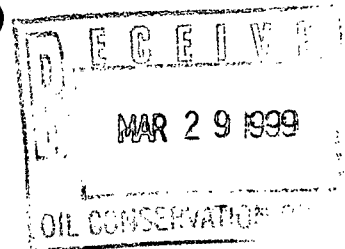
|                                                             |                                     |       |           |       |
|-------------------------------------------------------------|-------------------------------------|-------|-----------|-------|
| CSC<br>8 5/8-1600-775 sx<br>4 1/2-7120-750 sx<br>2 3/8-6079 | WELL CLASS: INIT D FINWSD LSE. CODE |       |           |       |
|                                                             | FORMATION                           | DATUM | FORMATION | DATUM |
|                                                             |                                     |       |           |       |
|                                                             |                                     |       |           |       |
|                                                             |                                     |       |           |       |
|                                                             | ID 7120 (DRKD)                      |       | PBD 7067  |       |

IP (Blainebery) Perfs 6008-51 P 33 BOPD + 35 BW. Pot based  
 on 24 hr test. GOR 1212; gty NR

CONTR Tom Brown OPRSELEV 3575 GL PD 7100 RT

F.R. 8-25-80  
 (Blainebery)  
 11-22-80 AMEND FIELD & ZONE: Formerly reported as  
 Undesignated (Drinkard)  
 9-2-80 Drlg 3235 lm  
 9-8-80 Drlg 5388  
 DST (San Andres) 3020-3120 op 1 hr 15 mins,  
 (Sampler rec.7 CFT GAS w/tr MUD) 1 hr ISIP  
 632, FP 175-149, 2 hr FSIP 792, HP 1592-1597  
 9-16-80 Drlg 6510 lm & sh  
 9-23-80 TD 7120; PBD 7067; WOCT  
 10-7-80 TD 7120; PBD 7067; Prep Acid  
 Perf (Blainebery) 6008-51 (overall)  
 11-4-80 TD 7120; PBD 7067; RUP  
 Acid (6008-51) 2000 gals  
 Frac (6008-51) 25,000# sd  
 Ppd 30 BO + 18 BW in 24 hrs (6008-51)  
 11-17-80 TD 7120; PBD 7067; Complete  
 Blainebery Discovery; No suggested Field Name  
 LOG RUN: CORL  
 Rig Released 9-22-80 11-4-19 NM  
 11-22-80 COMPLETION ISSUED IC 30-025-70422-80

**TO: Martyne J. Kieling  
Environmental Geologist  
Energy, Minerals and  
Natural Resources Dept.**



**FROM: Judy L. Roberts  
J&L Landfarm, Inc.**

Dear Ms. Kieling:

Attached is a letter composed by my attorney assigning a change of name for my company. Mr. Holloman spoke with you and Roger Anderson regarding the name change. The bond has been submitted in J&L Landfarm, Inc.

Thank you,  
*Judy L. Roberts*  
Judy L. Roberts

JUDY L. ROBERTS

J & L Landfarm, Inc.  
8301 Eunice Highway  
Hobbs, New Mexico 88240

March 25, 1999

State of New Mexico  
Energy, Minerals and  
Natural Resources Department  
Oil Conservation Division  
Attention: Lori Wrotenbery  
2040 S. Pacheco  
Santa Fe, New Mexico 87505

Certified Return Receipt Requested

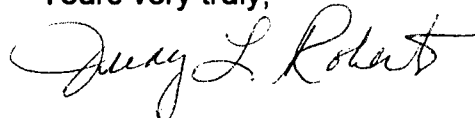
RE: OCD Rule 711 Permit Approval NM-01-0023, J & L Landfarm  
Commercial Land farm N/2 N/2 of Section 9 and the N/2 N/2 of  
Section 10, Township 20 South, Range 38 East, NMPM, Lea  
County, New Mexico.

Dear Ms. Wrotenbery:

Please be advised that I have assigned the above referenced permit to J & L Landfarm, Inc., a New Mexico corporation. I would request that you note this change of name on the permit itself and all other documents related to this permit.

The bond required for the above referenced permit has been previously submitted in the name of J & L Landfarm, Inc. Should you have any questions or comments, please do not hesitate to contact me.

Yours very truly,



Judy Roberts

JR/nlm

Enc. As stated

ASSIGNMENT OF PERMIT

Judy Roberts ("Roberts") does hereby assign, bargain, sell and convey unto J & L Landfarm, Inc., a New Mexico corporation all Roberts' right, title and interest in and to OCD Rule 711 Permit No. NM-01-0023 covering N/2 N/2 of Section 9 and the N/2 N/2 of Section 10, Township 20 South, Range 38 East, NMPM Lea County, New Mexico.

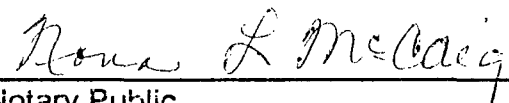
This Assignment shall be binding upon and inure to the benefit of the parties, their personal representatives, heirs, successors and assigns.

Dated: Effective March 1, 1999.

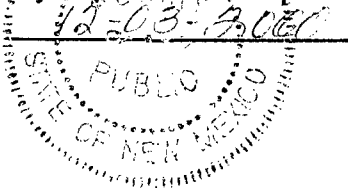
  
JUDY ROBERTS

STATE OF NEW MEXICO     )  
                                          )SS.  
COUNTY OF LEA            )

The foregoing instrument was acknowledged before me this 25<sup>th</sup> day of March, 1999, by Judy Roberts.

  
Notary Public

My Commission Expires:





MEMORANDUM OF MEETING OR CONVERSATION

|                                                         |                                              |                                                                                    |                 |
|---------------------------------------------------------|----------------------------------------------|------------------------------------------------------------------------------------|-----------------|
| <input checked="" type="checkbox"/> Telephone           | <input checked="" type="checkbox"/> Personal | Time<br>11:45                                                                      | Date<br>3-10-99 |
| <u>Originating Party</u><br>Martyne Kicking             |                                              | <u>Other Parties</u><br>Roger Anderson, Wayne Price,<br>Lori Wrotenberg, Gary Wink |                 |
| <u>Subject</u><br>J&L Land Farm Landowner Notification. |                                              |                                                                                    |                 |

Discussion

As Gary Wink Recalls Robert McCasland Did mention that He was concerned about The Land Farm J&L, Back in the Summer But it was prior to receiving the Certified letter from J&L. Gary told Robert McCasland that he could Protest Formally. Gary Never said that He would tell Wayne and Wayne would call. And Wayne <sup>recalls that</sup> he Never was told anything about a protest against J&L. No written Protest was Received By the Santa Fe office or Hobbs District office From Robert McCasland.

Conclusions or Agreements

To call and Speak to Robert McCasland about The Permit Conditions to Be Protective of GW. via treatment zone Monitoring.

Distribution

J&L File.

Signed

Martyne J. Kicking



**NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT**

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7151

March 4, 1999

**CERTIFIED MAIL**  
**RETURN RECEIPT NO. P-326-936-514**

Mr. Robert McCasland  
Box 206  
Eunice, NM 88231

RE: **J&L Landfarm**  
**Commercial Landfarm Application and Permit Approval**  
**N/2 of N/2 Section 9 and the N/2 of N/2 Section 10, Township 20 South, Range 38**  
**East, NMPM, Lea County, New Mexico**

Dear Mr. Robert McCasland:

The New Mexico Oil Conservation Division (OCD) permits commercial surface waste management facilities which receive oil field related waste. Enclosed is the application and supplemental information submitted by J & L Landfarm along with the approved permit with permit conditions. We would like to discuss the permit with you after you have had a chance to review the permit conditions.

If you have any questions please do not hesitate to contact me at (505) 827-7153 or Roger Anderson at (505) 827-7152.

Sincerely,

Martyne J. Kieling  
Environmental Geologist

xc: Hobbs OCD Office  
Judy L. Roberts, J&L Landfarm



NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

January 12, 1999

**CERTIFIED MAIL**  
**RETURN RECEIPT NO. P-326-936-494**

Ms. Judy L. Roberts  
J&L Landfarm.  
8301 Eunice highway  
Hobbs, NM 88240

**RE: J&L Landfarm**  
**Commercial Landfarm Application Review**  
**N/2 of N/2 Section 9 and the N/2 of N/2 Section 10, Township 20 South, Range 38 East,**  
**NMPM, Lea County, New Mexico**

Dear Ms Roberts:

The New Mexico Oil Conservation Division (OCD) has reviewed the J&L Landfarm (J&L) Permit application dated May 10, 1998 and the closure cost estimates, additional information and attachments provided on July 20, 1998 and November 12, 1998. Upon this review the OCD has revised the closure cost estimate for J&L according to the enclosed attachment 1.

In addition, please find enclosed a copy of the letter to Mr. Bill and Ms. Wilma Hazelwood. The above letter gives notice to all intervenors that the J&L proposed commercial surface waste management facility has been determined to be approvable subject to the attached conditions.

If no further objections are put fourth by any intervenors by January 15, 1998. The new J&L 711 waste management facility permit will go to the Director for approval.

If you have any questions please do not hesitate to contact me at (505) 827-7153.

Sincerely,

Martyne J. Kielling  
Environmental Geologist

xc with attachments:  
Hobbs OCD Office

**ATTACHMENT 1**  
**Revised**  
**OCD Environmental Bureau Closure Cost Estimate**  
**For**  
**J&L Landfarm, 280 acres**  
**January 12, 1999**

**Quarterly Analytical Analysis for two years on fourty-three (43) five (5 acre cells**

**State Contract Laboratory Prices per analysis:**

|        |          |   |            |   |          |   |                               |
|--------|----------|---|------------|---|----------|---|-------------------------------|
| BTEX   | \$ 40.00 | x | 8 quarters | x | 43 cells | = | \$13,760.00                   |
| TPH    | \$ 50.00 | x | 8 quarters | x | 43 cells | = | \$17,200.00                   |
| Metals | \$200.00 | x | 2 years    | x | 43 cells | = | <u>\$17,200.00</u>            |
|        |          |   |            |   |          |   | <b>\$48,160.00 Analytical</b> |

---

**Quarterly Sampling Time and Labor for 43 Cells**

Labor \$55.00/hour  
Sample 30 min per cell  
Travel 1 hour  
Delivery & Paperwork 1 hour

Total Time = (30min/cell x 43 cells) + 1 hours + 1 hours = 23.5 hours

23.5 hours x \$55.00/hour = \$1,292.50/sampling event

\$1,292.50/sampling event x 8 quarters = **\$10,340.00 Labor**

---

**Disking/Tilling for Two Years Every Two Weeks for 215 acres**  
**Price and Time Quotes from Equipment Operators and Landfarm Operators:**

Small Tractor and Operator \$30.00 /hour  
5 acres per hour = 12 min per acre  
215 acres x 43 hours x 52 weeks = 2236 hours

2236 hours x \$30.00/hour = **\$ 67,080.00 Disking/Tilling**

---

## **Water for Bioremediation**

### **Price Quotes from Equipment Operators**

Water Truck \$120.00/load

$$\text{\$120.00/load} \times 10 \text{ loads} \times 12 \text{ Events in Two Years} = \text{\$14,400.00 Water}$$

---

## **Level Landfarm Berms**

### **Price and Time Quotes from Equipment Operators**

D-6 Dozer and Operator \$85.00/hour

$$\text{\$85.00/hour} \times 30 \text{ min/acre} \times 20 \text{ acres} = \text{\$11,900.00 Level Landfarm}$$

---

## **Revegetation for 280 Acres**

Equipment an labor cost

$$\text{Tractor and seed drill } \$30.00/\text{hour} @ 15 \text{ min/acre for 280 acres} = \$2,100.00$$

Materials Cost

$$\text{Seed } \$10.00/\text{lb} @ 5 \text{ lb/acre for 280 acres} = \$14,000.00$$

$$\text{\$2,100.00} + \text{\$14,000.00} = \text{\$16,100 Revegetation}$$

---

$$\text{Total Closure and Revegetation Cost of an 280 acre Landfarm} = \text{\$168,000.00}$$



NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

January 12, 1999

**CERTIFIED MAIL**  
**RETURN RECEIPT NO. P-326-936-495**

Mr. Bill and Ms. Wilma Hazelwood  
RR69, 42380 State Hwy 18  
Hobbs, NM 88240

RE: **J&L Landfarm**  
**Commercial Landfarm Application**  
**N/2 of N/2 Section 9 and the N/2 of N/2 Section 10, Township 20 South, Range 38 East,**  
**NMPM, Lea County, New Mexico**

Dear Mr. and Ms. Hazelwood:

The New Mexico Oil Conservation Division (OCD) permits commercial surface waste management facilities which receive oil field related waste. The application and supplemental information submitted are open for public inspection at the OCD Santa Fe and Hobbs District Office. The J&L Landfarm proposed commercial surface waste management facility application and supplemental information has been reviewed by the OCD and it has been determined that it is in compliance with all Division rules and regulations and could be administratively approvable subject to the attached conditions in the event that the request for public hearing is withdrawn.

An objection to the application of J&L Landfarm was filed by you. If your objections to the application have not been addressed and you wish to present testimony at a hearing, please submit a request for hearing within 15 days of the date of this letter or by January 28, 1999. The request should include a concise statement of objections or concerns and a summary of the evidence you will present at hearing. If the Director determines that intervenors have significant additional information to offer, the matter will be set for hearing. At the hearing the applicant and intervenors will present technical testimony to an examiner. Based on the merits of the testimony the examiner will make an independent decision regarding the permit application. Please be advised that the OCD cannot consider land use or zoning requirements when evaluating surface waste management applications.

If no request for hearing is received by January 28, 1999 then the application will be administratively approved. If you have any questions please do not hesitate to contact me at (505) 827-7152.

Sincerely,

Roger Anderson  
Environmental Bureau Chief

xc with attachments: Hobbs OCD Office  
Judy L. Roberts, J&L Landfarm

## **DRAFT PERMIT APPROVAL CONDITIONS**

### **J & L LANDFARM**

**N/2 of N/2 Section 9 and the N/2 of N/2 Section 10, Township 20 South, Range 38 East,  
NMPM, Lea County, New Mexico  
(January 12, 1999)**

### **LANDFARM CONSTRUCTION**

1. The facility will be fenced and have a sign at the entrance. The sign will be legible from at least fifty (50) feet and contain the following information: a) name of the facility, b) location by section, township and range, and c) emergency phone number.
2. Contaminated soils will not be placed within one hundred (100) feet of the boundary of the facility.
3. Contaminated soils will not be placed within twenty (20) feet of any pipelines crossing the landfarm. In addition, no equipment will be operated within ten (10) feet of a pipeline. All pipelines crossing the facility will have surface markers identifying the location of the pipelines.
4. The portion of the facility containing contaminated soils will be bermed to prevent runoff and runon. A perimeter berm no less than five (5) feet above grade with a base of eight (8) feet and a crown of two (2) feet will be constructed and maintained such that it is capable of containing precipitation from a one-hundred year flood for the specific region. Individual cells will be contained with a berm five (5) feet above grade with a base of eight (8) feet and a crown of two (2) feet.
5. The collection of diverted storm water runon will be held in above ground tanks. The water may be stored and applied to the landfarm as added moisture for dust suppression and enhance bioremediation.
6. All above ground tanks located at the facility and containing materials other than fresh water must be placed on an impermeable type pad. The tanks will be labeled as to contents and hazards and will be bermed to contain one and one-third the volume of the largest tank or all interconnected tanks

### **LANDFARM OPERATION**

1. Disposal will only occur when an attendant is on duty. The facility will be secured when no attendant is present.

2. All contaminated soils received at the facility will be spread and disked within 72 hours of receipt.
3. Soils will be spread on the surface in six inch lifts or less.
4. Soils will be disked a minimum of one time every two weeks (biweekly) to enhance biodegradation of contaminants.
5. Exempt contaminated soils will be placed in the landfarm so that they are physically separate (*i.e.*, bermed) from non-exempt contaminated soils. There will be no mixing of exempt and non-exempt soils.
6. Successive lifts of contaminated soils will not be spread until a laboratory measurement of total petroleum hydrocarbons (TPH) in the previous lift is less than 100 parts per million (ppm), the sum of all aromatic hydrocarbons (BTEX) is less than 50 ppm, and benzene is less than 10 ppm. Comprehensive records of the laboratory analyses and the sampling locations will be maintained at the facility. Authorization from the OCD will be obtained prior to application of successive lifts and/or removal of the remediated soils.
7. Moisture will be added as necessary to enhance bioremediation and to control blowing dust. There will be no ponding, pooling or run-off of water allowed. Any ponding of precipitation will be removed within twenty-four (24) hours of discovery.
8. Enhanced bio-remediation through the application of microbes (bugs) and/or fertilizers will only be permitted after prior approval from the OCD. Request for application of microbes will include the location of the area designated for the bio-remediation program, the composition of additives, and the method, amount and frequency of application.
9. Comprehensive records of all material disposed of at the facility will be maintained at the facility. The records for each load will include: 1) generator, 2) origin, 3) date received, 4) quantity, 5) certification of exempt status or analysis for hazardous constituents if non-exempt, 6) NORM status declaration 7) transporter, 8) exact cell location, and 9) any addition of microbes, moisture, fertilizers, etc.

## WASTE ACCEPTANCE CRITERIA



1. The facility is authorized to accept only:
  - a. Oilfield wastes that are exempt from RCRA Subtitle C regulations. All loads of these wastes received at the facility shall be accompanied by an OCD Form C-144 "Generator Certificate of Waste Status" signed by the generator.
  - b. "Non-hazardous" non-exempt oilfield wastes on a case-by-case basis after conducting a hazardous waste characterization including corrosivity, reactivity, ignitability, and toxic constituents. The samples for these analyses will be obtained from the wastes prior to removal from the generator's facility and without dilution in accordance with EPA SW-846 sampling procedures. All "non-hazardous" non-exempt wastes received at the facility shall be accompanied by:
    - i. An approved OCD Form C-138 "Request For Approval To Accept Solid Waste."
    - ii. A "Generator Certificate of Waste Status" signed by the generator.
    - iii. A verification of waste status issued by the appropriate agency, for wastes generated outside OCD jurisdiction. The agency verification is based on specific information on the subject waste submitted by the generator and demonstrating the exempt or non-hazardous classification of the waste.
  - c. Non-oilfield wastes that are non-hazardous by testing if ordered by the Department of Public Safety in a public health emergency. OCD approval must be obtained prior to accepting the wastes.
2. At no time will any OCD-permitted surface waste management facility accept wastes that are hazardous by either testing or listing.
3. No free liquids or soils with free liquids will be accepted at the facility.
4. The transporter of any wastes to the facility will supply a certification that wastes delivered are those wastes received from the generator and that no additional materials have been added.

#### TREATMENT ZONE MONITORING

1. One (1) background soil sample will be taken from the center portion of the landfarm two (2) feet below the native ground surface prior to operation. The sample will be analyzed for total petroleum hydrocarbons (TPH), major cations/anions, volatile aromatic organics (BTEX), and heavy metals using approved EPA methods.
2. A treatment zone not to exceed three (3) feet beneath the landfarm native ground surface will be monitored. A minimum of one random soil sample will be taken from each individual cell, with no cell being larger than five (5) acres, six (6) months after the first contaminated soils are received in the cell and then quarterly thereafter. The sample will be taken at two (2) to three (3) feet below the native ground surface.
3. The soil samples will be analyzed using approved EPA methods for TPH and BTEX quarterly, and for major cations/anions and heavy metals annually.
4. After obtaining the soil samples the boreholes will be filled with an impermeable material such as cement or bentonite.

## **REPORTING**

1. Analytical results from the treatment zone monitoring will be submitted to the OCD Santa Fe office **within thirty (30) days** of receipt from the laboratory.
2. Background sample analytical results from new landfarm cells will be submitted to the OCD Santa Fe office **within thirty (30) days** of receipt from the laboratory..
3. The applicant will notify the **OCD Hobbs District office within 24 hours** of any break, spill, blow out, or fire or any other circumstance that could constitute a hazard or contamination in accordance with OCD Rule 116.
4. Authorization from the OCD Santa Fe office will be obtained prior to application of successive lifts and/or removal of the remediated soils.
5. The OCD will be notified prior to the installation of any pipelines or wells or other construction within the boundaries of the facility.
6. The OCD Santa Fe and Hobbs District offices will be notified when operation of the facility is discontinued for a period in excess of six (6) months or when the facility is to be dismantled. A closure plan for the facility will be provided.

## **FINANCIAL ASSURANCE**

1. Financial assurance in the amount of **\$168,000** (the estimated cost of closure) in the form of a surety or cash bond or a letter of credit, which is approved by the Division, is required from J&L Landfarm for the commercial surface waste management facility.

**By February 28, 1999**, J&L Landfarm must submit financial assurance in the amount of **\$42,000**

**By February 28, 2000**, J&L Landfarm must submit financial assurance in the amount of **\$84,000**.

**By February 28, 2001**, J&L Landfarm must submit financial assurance in the amount of **\$126,000**

**By February 28, 2002**, J&L Landfarm must submit financial assurance in the amount of **\$168,000**

2. The facility is subject to periodic inspections by the OCD. The conditions of this permit and the facility will be reviewed no later than five (5) years from the date of this approval. In addition, the closure cost estimate will be reviewed according to prices and remedial work estimates at the time of review. The financial assurance may be adjusted to incorporate any closure cost changes.

## **CLOSURE**

1. The OCD Santa Fe and Hobbs District offices will be notified when operation of the facility is discontinued for a period in excess of six (6) months or when the facility is to be dismantled. Upon cessation of landfarming operations for six (6) consecutive months, the operator shall complete cleanup of constructed facilities and restoration of the facility site within the following six (6) months, unless an extension of time is granted by the Director.
2. A closure plan for the facility will be provided including the following OCD closure procedures:
  - a. When the facility is to be closed no new material will be accepted.
  - b. Existing landfarm soils will be remediated until they meet the OCD standards in

effect at the time of closure.

- c. The soils beneath the landfarm cells will be characterized as to the total petroleum hydrocarbons (TPH) and volatile aromatic organics (BTEX) content in order to determine potential migration of contamination beneath the facility.
- d. Contaminated soils exceeding OCD closure standards for the site will be removed or remediated according to a site specific remediation plan to be developed by the owner/operator.
- e. The area will be contoured, seeded with native grasses and allowed to return to its natural state. If the landowner desires to keep existing structures, berms, or fences for future alternative uses the structures, berms, or fences may be left in place.
- f. Closure will be pursuant to all OCD requirements in effect at the time of closure, and any other applicable local, state and/or federal regulations.

### **CERTIFICATION**

J&L Landfarm by the officer whose signature appears below, accepts this permit and agrees to comply with all terms and conditions contained herein. J&L Landfarm further acknowledges that these conditions and requirements of this permit may be changed administratively by the Division for good cause shown as necessary to protect fresh water, human health and the environment.

Accepted:

J & L LANDFARM

by \_\_\_\_\_ title \_\_\_\_\_ date \_\_\_\_\_

---

Phone (505) 393-9697

JUN - 8

June 01, 1999

New Mexico Energy, Minerals  
& Natural Resources Department, OCD  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505

Attn: Martyne J. Kieling  
Environmental Geologist

Dear Ms. Kieling:

As you requested I am attaching all information for modification to permit NM-01-0023.


Included is a written description for setbacks and construction of berms to accommodate the separation of all non-landfarm activities from deposits of all contaminated soils and a map denoting the location of the Tamarack Petroleum Co., operating well.

The above mentioned well is the only oil well, working, plugged, or abandoned, to be drilled in section 9 which has been permitted for the landfarm operation.

There is an underground pit, adjacent to the Tamarack Petroleum well site, which was never properly disposed of. This is an issue Tamarack Petroleum needs to address and restore as per their original agreement.

If you need any other information, please let me know.

Sincerely,

  
Judy L. Roberts

xc Hobbs OCD office  
att

**District I** - (505) 393-6161  
P. O. Box 1980  
Hobbs, NM 88241-1980  
**District II** - (505) 748-1283  
811 S. First  
Artesia, NM 88210  
**District III** - (505) 334-6178  
1000 Rio Brazos Road  
Aztec, NM 87410  
**District IV** - (505) 827-7131

New Mexico  
Energy Minerals and Natural Resources Department  
Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

Form C-137  
Originated 8/8/95  
Revised 6/25/97

Submit Original  
Plus 1 Copy  
to Santa Fe  
1 Copy to appropriate  
District Office

APPLICATION FOR WASTE MANAGEMENT FACILITY

(Refer to the OCD Guidelines for assistance in completing the application)

☒ Commercial

☐ Centralized

1. Type: ☐ Evaporation ☐ Injection ☐ Other \_\_\_\_\_  
☒ Solids/Landfarm ☐ Treating Plant

2. Operator: JFL LAND FARM, INC.

Address: P.O. Box 356 8301 Eunice Hwy. Hobbs, NM 88241-0356

Contact Person: JUDY L. ROBERTS Phone: 505-393-9697

3. Location: N/2 N/2 & N/2 N/2 Section 9 E 10 Township 20 S Range 38 E  
Submit large scale topographic map showing exact location

4. Is this a modification of an existing facility? ☒ Yes ☐ No

5. Attach the name and address of the landowner of the facility site and landowners of record within one mile of the site.

6. Attach description of the facility with a diagram indicating location of fences, pits, dikes, and tanks on the facility.

7. Attach designs prepared in accordance with Division guidelines for the construction/installation of the following: pits or ponds, leak-detection systems, aerations systems, enhanced evaporation (spray) systems, waste treating systems, security systems, and landfarm facilities.

8. Attach a contingency plan for reporting and clean-up for spills or releases.

9. Attach a routine inspection and maintenance plan to ensure permit compliance.

10. Attach a closure plan.

11. Attach geological/hydrological evidence demonstrating that disposal of oil field wastes will not adversely impact groundwater. Depth to and quality of ground water must be included.

12. Attach proof that the notice requirements of OCD Rule 711 have been met.

13. Attach a contingency plan in the event of a release of H<sub>2</sub>S.

14. Attach such other information as necessary to demonstrate compliance with any other OCD rules, regulations and orders.

15. CERTIFICATION

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: JUDY L. ROBERTS

Title: OWNER / OPERATOR

Signature: Judy L. Roberts

Date: 6-1-99

**J&L LANDFARM, INC.**

**JUDY L. ROBERTS**

**8301 Eunice Hwy.**

**P.O. Box 356**

**Hobbs, NM 88241-0356**

**(505) 393-9697**

Tamarack Petroleum Co, Inc.

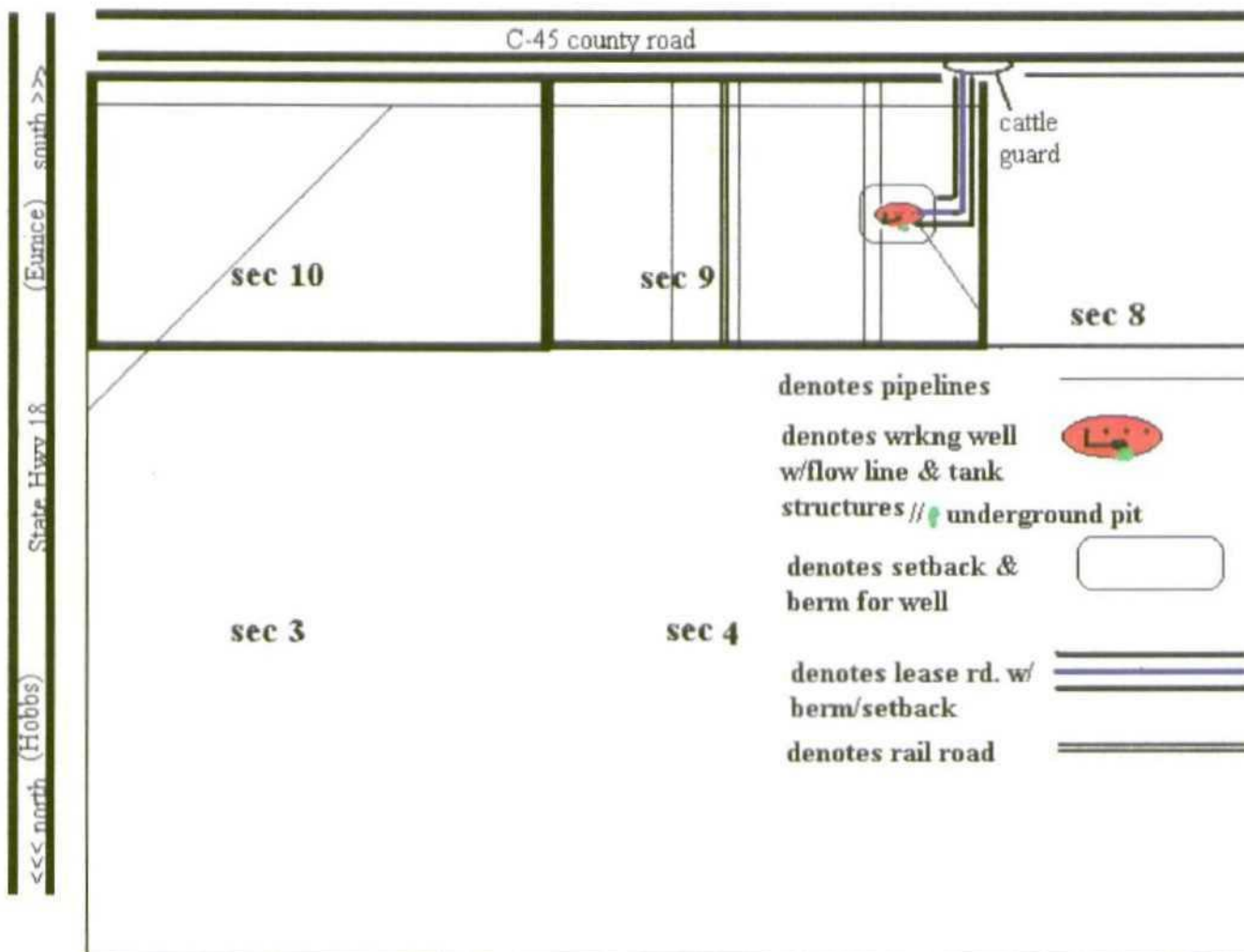
Speight #1

W. Nadine Blinebry

Location of operating well is shown on attached map, along with lease road. Berms will be constructed around pad of well as outlined in the construction of facility from Santa Fe OCD. Berms will be constructed down lease road leading to well site, as well.

Berms will be constructed from at least a 20 foot setback from all tanks, flow lines, and operating equipment of well.

Berms will be 5 feet high to contain any standing precipitation and diversionary dykes will be installed to divert run-off. Secondary containment ditches will be dug to the inside of the berms leading to a collection area as another precautionary measure. Berms will be maintained in above manner to keep landfarming operations separate from the operation of the working well.



J&L Landfarm, Inc. TS 20S R38E, Lea County, NM  
 N/2 N/2 Sec 9  
 N/2 N/2 Sec 10



# Proposed J & L Land Farm Facility

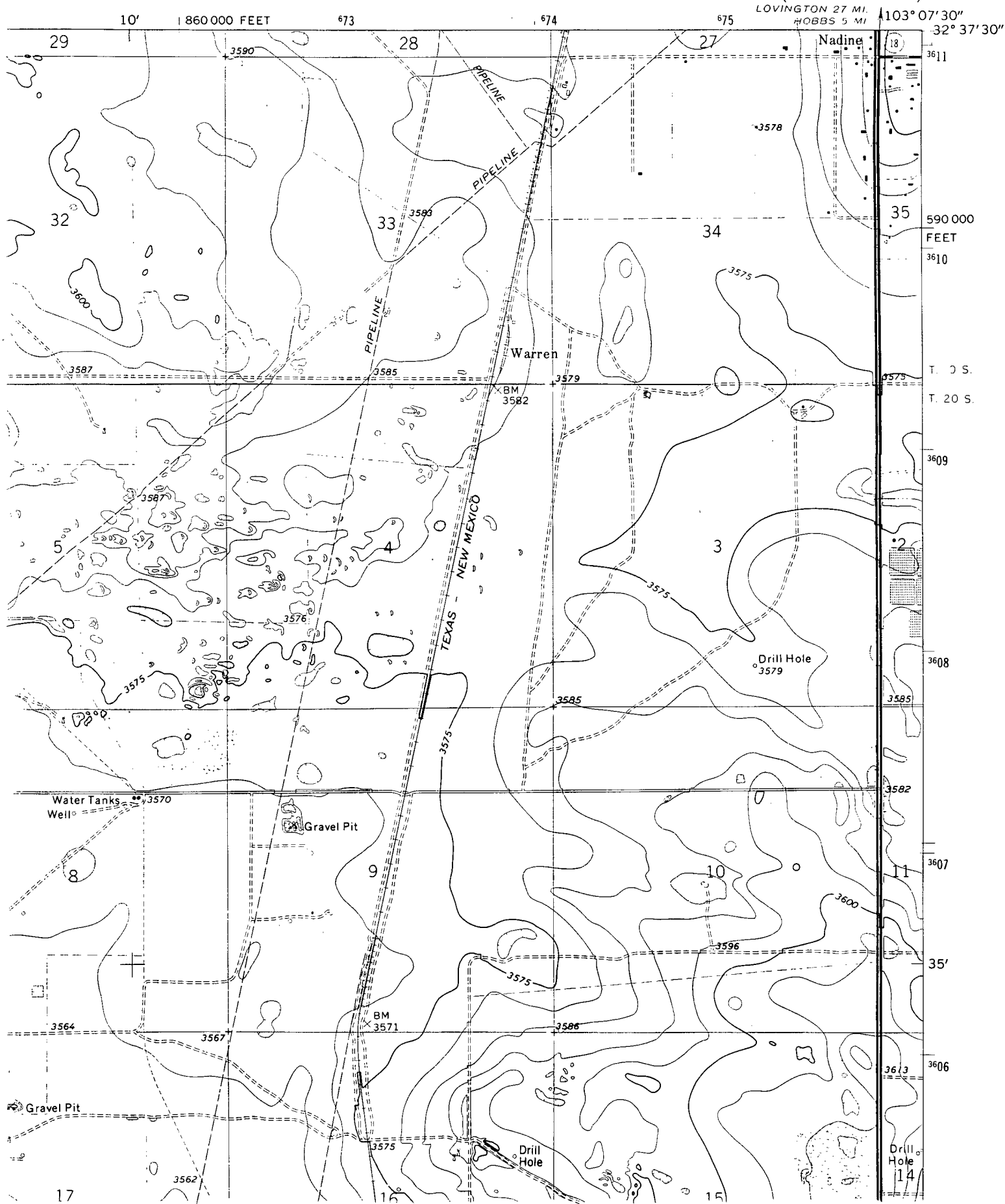
## CHECKLIST FOR RULE 711 PERMIT APPLICATION COMPLETENESS

1. ✓ FACILITY TYPE *NEW LAND FARM 280 acres including 43 Boreholes*
2. ✓ OPERATOR NAME, ADDRESS, CONTACT PERSON AND PHONE# *Judy L. Roberts*
3. ✓ LEGAL LOCATION *N2 N2, Sec 9/10, T 20 W, R 38 E*
4. ✓ MODIFICATION OR NEW FACILITY *NEW*
5. ✓ NAME AND ADDRESS OF THE FACILITY SITE LANDOWNER *Same*
- 13 19 6. ~~✓~~ NAME AND ADDRESS OF ALL LANDOWNERS OF RECORD WITHIN ONE MILE OF FACILITY SITE. *All Return Receipts Accounted For Someone Returns to Sec 9 3.2 acres*
7. ✓ NOTIFICATION OF ALL LANDOWNERS OF RECORD WITHIN ONE MILE OF FACILITY SITE RETURN RECEIPT SUBMITTED *All Return Receipts Accounted For. Some Returns to Sec 9.*
8. ✓ PUBLIC NOTICE IN TWO NEWSPAPERS ORIGINAL AFFIDAVIT OF PUBLICATION SUBMITTED. *SF New Mercury, Lovington Daily Leader Feb 5, 1998*
9. ✓ FACILITY DESCRIPTION WITH DIAGRAMS INDICATING ALL PERTINENT FEATURES (FENCES, BERM, ROADS, PITS, DIKES, TANKS, MONITORING WELLS ....) *5 planned Holding For Remote Containment.*
10. ✓ CONSTRUCTION INSTALLATION DESIGNS FOR PITS, PONDS, LEAK-DETECTION SYSTEMS, AERATION SYSTEMS, ENHANCED EVAPORATION SYSTEMS, WASTE TREATING SYSTEMS, SOLIDIFICATION SYSTEMS, SECURITY SYSTEMS, AND LANDFARM FACILITIES.
11. ✓ GEOLOGICAL/HYDROLOGICAL EVIDENCE THAT FACILITY WILL NOT IMPACT *Background Water Sample* GROUNDWATER. DEPTH TO AND QUALITY OF GROUNDWATER INCLUDED. *Depth 69.6' TDS 1038 mg/L Hazchwoodwell Flow Direction NW → SE State En. Office*
12. CONTINGENCY PLAN FOR REPORTING AND CLEAN-UP OF SPILLS OR RELEASES.
13. ✓ H2S CONTINGENCY PLAN *NA*
14. ✓ ROUTINE INSPECTION AND MAINTENANCE PLAN TO ENSURE PERMIT COMPLIANCE
15. ✓ CLOSURE PLAN
16. CLOSURE COST ESTIMATE *746.66 per cell For 2 years \$ 33,600.00 (43,5 acre cells)*
17. BONDING AMOUNT # TYPE DATE APPROVED
18. ANY OTHER INFORMATION AS NECESSARY TO DEMONSTRATE COMPLIANCE WITH ANY OTHER OCD RULES REGULATIONS AND ORDERS.  
*? Collection Area Tanks or Holding Pond*
19. CERTIFICATION SIGNATURE AND DATE ON PERMIT

Add to Permit  
Ability to Have  
Tanks.

*Martyn J. Kelly 12-17-98*

5349 11 NE  
(HOBBS EAST)



# The Santa Fe New Mexican

Since 1849. We Read You.

NOV 25 1998

JUDY L. ROBERTS  
8301 EUNICE HWY  
HOBBS, NM 88240

AD NUMBER: 55282 ACCOUNT: 01001  
LEGAL NO: 64435 P.O.#:  
174 LINES 1 time(s) at \$ 111.36  
AFFIDAVITS: 5.25  
TAX: 7.29  
TOTAL: 123.90

## AFFIDAVIT OF PUBLICATION

### NOTICE OF PUBLICATION STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT OIL CONSERVATION DIVISION

Notice is hereby given that pursuant to the New Mexico Oil Conservation Division Regulations, the following application has been submitted to the Director of the Oil Conservation Division, 2040 S. Pacheco, Santa Fe, New Mexico 87505, Telephone (505) 827-7131:

J&L Landfarm, Judy L. Robert, Landowner, 8301 Eunice Highway, Hobbs, New Mexico, 88240, has submitted for approval an application to construct and operate a Rule 711 commercial solids landfarm remediation facility located in the N/2 of N/2 of Section 9 and the N/2 of N/2 or Section 10, Township 20 South, Range 38 East, NMPM, Lea County, New Mexico. Hydrocarbon contaminated soils associated with oil and gas production will be remediated by spreading them on the ground surface in 6 inch lifts or less and periodically disking them to enhance biodegradation of contaminants. Ground water most likely to be affected by any accidental discharges at the surface is estimated to be at a depth of 42 to 69 feet with a total dissolved solids concentration estimated to be at 1038 parts per million. The facility is underlain by the Triassic red beds. The permit application addresses the construction, operations, spill/leak prevention and monitoring procedures to be incorporated at the proposed

site.

Any interested person may obtain further information from the Oil Conservation Division and may submit written comments to the Director of the Oil Conservation Division at the address given above. The application may be viewed at the above address between 8:00 a.m. and 4:00 p.m., Monday thru Friday. Prior to ruling on any proposed application, the Director of the Oil Conservation Division shall allow at least thirty (30) days after the date of publication of this notice during which comments may be submitted to her and public hearing may be requested by any interested person. Request for public hearing shall set forth the reasons why a hearing shall be held. A hearing will be held if the director determines that there is significant public interest.

If no hearing is held, the Director will approve or disapprove the application based on the information available. If a public hearing is held, the Director will approve the application based on the information in the application and information presented at the hearing.

GIVEN under the Seal of New Mexico Oil Conservation Commission at Santa Fe, New Mexico, on this 2nd day of November, 1998.

STATE OF NEW MEXICO  
OIL CONSERVATION  
DIVISION

LORI WROTENBERY,  
Director

Legal #64435  
Pub. November 10, 1998

STATE OF NEW MEXICO  
COUNTY OF SANTA FE

I, B. Reimer being first duly sworn declare and say that I am Legal Advertising Representative of THE SANTE FE NEW MEXICAN, a daily newspaper published in the English language, and having a general circulation in the Counties of Santa Fe and Los Alamos, State of New Mexico and being a Newspaper duly qualified to publish legal notices and advertisements under the provisions of Chapter 167 on Session Laws of 1937; that the publication #64435 a copy of which is hereto attached was published in said newspaper 1 day(s) between 11/10/1998 and 11/10/1998 and that the notice was published in the newspaper proper and not in any supplement; the first publication being on the 10 day of November, 1998 and that the undersigned has personal knowledge of the matter and things set forth in this affidavit.

/S/

Betsy Reimer  
LEGAL ADVERTISEMENT REPRESENTATIVE

Subscribed and sworn to before me on this  
10 day of November A.D., 1998

Notary

Commission Expires

3-13-2001



OFFICIAL SEAL  
B MATHIE  
NOTARY PUBLIC  
STATE OF NEW MEXICO

My Commission Expires

3-13-2001

# Affidavit of Publication

STATE OF NEW MEXICO )  
 ) ss.  
COUNTY OF LEA )

Joyce Clemens being first duly sworn on oath deposes and says that he is Adv. Director of THE LOVINGTON DAILY LEADER, a daily newspaper of general paid circulation published in the English language at Lovington, Lea County, New Mexico; that said newspaper has been so published in such county continuously and uninterruptedly for a period in excess of Twenty-six (26) consecutive weeks next prior to the first publication of the notice hereto attached as hereinafter shown; and that said newspaper is in all things duly qualified to publish legal notices within the meaning of Chapter 167 of the 1937 Session Laws of the State of New Mexico.

That the notice which is hereto attached, entitled  
Notice of Publication

~~xxxxxx~~ in ~~the~~  
~~xxxxxx~~ Court of Lea  
~~xxxxxx~~, was published in a regular and  
entire issue of THE LOVINGTON DAILY LEADER and  
not in any supplement thereof, ~~xxxxxx~~  
~~xxxxxx~~ for One(1) Day  
~~xxxxxx~~ consecutive weeks, beginning with the issue of  
November 5, 19 98

and ending with the issue of  
November 5, 19 98

And that the cost of publishing said notice is the  
sum of \$ 52.21

which sum has been (Paid) (~~xxxxxx~~) as Court Costs

*Joyce Clemens*

Subscribed and sworn to before me this

day of November 5, 19 98

*Debbie Schilling*  
Notary Public Lea County, New Mexico

My Commission Expires June 22, 2002

## LEGAL NOTICE NOTICE OF PUBLICATION STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION  
DIVISION  
Notice is hereby given that pursuant to the New Mexico Oil Conservation Division Regulations, the following application has been submitted to the Director of the Oil Conservation Division, 2040 S. Pacheco, Santa Fe, New Mexico 87505, Telephone (505) 827-7131:

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Lea County, New Mexico. Hydrocarbon contaminated soils associated with oil and gas production will be remediated by spreading them on the ground surface in 6 inch lifts or less and periodically disking them to enhance biodegradation of contaminants. Ground water most likely to be affected by any accidental discharges at the surface is estimated to be at a depth of 42 to 69 feet with a total dissolved solids concentration estimated to be at 1038 parts per million. The facility is underlain by the Triassic red beds. The permit application addresses the construction, operations, spill/leak prevention and monitoring procedures to be incorporated at the proposed site.

Any interested person may obtain further information from the Oil Conservation Division and may submit written comments to the Director of the Oil Conservation Division at the address given above. The application may be viewed at the above address between 8:00 a.m. and 4:00 p.m., Monday thru Friday. Prior to ruling on any proposed application, the Director of the Oil Conservation Division shall allow at least thirty (30) days after the date of publication of this notice during which comments may be submitted to her and public hearing may be requested by any interested person. Request for public hearing shall set forth the reasons why a hearing shall be held. A hearing will be held if the director deter-

mines that there is significant public interest.

If no hearing is held, the Director will approve or disapprove the application based on the information available. If a public hearing is held, the Director will approve the application based on the information in the application and information presented at the hearing.

GIVEN under the Seal of New Mexico Oil Conservation Commission at Santa Fe, New Mexico, on this 2nd day of November, 1998.

STATE OF  
NEW MEXICO  
OIL CONSERVATION  
DIVISION  
Roger Anderson for  
LORI WROTENBERY,  
Director

(SEAL)  
Published in the Lovington Daily Leader November 5, 1998.

To: Martyne J. Kieling  
Environment Geologist  
New Mexico Energy, Minerals &  
Natural Resources Department

NOV 12 1998

From: Judy L. Roberts  
J&L Landfarm

RECEIVED

NOV 12 1998

Environmental Bureau  
Oil Conservation Division

Dear Ms. Kieling:

Attached please find additional information concerning my landfarm application. In addition, I am sending the laboratory results on water analysis of the groundwater.

I have received most of the signed postal return receipts for the neighboring landowners and am enclosing a copy of each. I will send all others when I receive them.

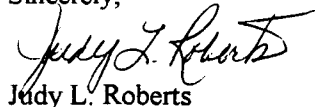
Also, attached are detailed diagrams and drawings of how I propose to construct the initial cells of the landfarm, beginning in section 9.

I have taken some pictures of the southeast corner of the proposed landfarm site. Hopefully, they will help in addressing the issue of the corner where there seems to be a question of a lakebed or depression. This area is addressed in #4 of the additional information you required. I hope this also helps.

The legal notification was placed in the Lovington Leader Newspaper and the Santa Fe New Mexican. As soon as I receive the original certified affidavit of publication I will send them to you.

I am sending a copy of all of the above information to the Hobbs OCD office.

Sincerely,



Judy L. Roberts

attachments

cc: Hobbs OCD office

**TO: New Mexico Energy, Minerals &  
Natural Resources Department**

**FROM: Martyne J. Kieling  
Environment Geologist**

**RE: J&L Landfarm Application**

**RECEIVED**

NOV 13 1998

Environmental Sciences  
Oil Conservation Division

1. Total dissolved solids. Please see attached copy from Cardinal Labs. The water sample submitted was taken from Mr. & Mrs. Hazelwood's well.
2. Lea County's ground water flow is from the northwest (the High Plains) to the southeast (towards Texas). Lea County derives it's water from underground aquifer in the Ogallala Water Basin. The geological flow of the water is determined from the study of U.S. underground geological maps and from studies of State Engineering Office of the underground aquifer and the formations of this area.  
The source of this information was referenced from the State Engineering Office in Roswell, New Mexico. Contact person was Johnny Hernandez.
3. Lab tests for water quality analysis were conducted on the ground water most likely affected. Please see attached copy of tests from Cardinal Labs. This water sample was also taken from Mr. & Mrs. Hazelwood's well.
4. Attached is a diagram and description of measures that will be taken, along with alternative measures for flood protection and preventing run-on or run-off of precipitation. I have enclosed pictures of the southeast corner. The depression spoken of is on the shoulder of County Road C-45 and Highway 18. I don't believe this to be a lakebed. Dirt, for purposes of road repair, has been stacked and stored for periods of time. It is a small low spot caused by the digging and spreading of this dirt to repair the county road. In any case, water does not run off or run on the southeast corner of proposed landfarm site. Due to county road work, the part of my property bordering County Road C-45 has already been somewhat bermed from dirt being pushed up and against the fence line. With the required 100 feet facility buffer zone constructed and the berming of the landfarm, run-off or run-on will be contained and controlled.

If, in the event of a 100 year flood or such as to cause ponding or washout, alternative measures such as installing water holding tanks can and will be implemented. Water will be held in tanks til such a time the moisture can be added or re-introduced to the active part of the landfarm to control blowing dust or during dry spells. Also, see attached diagrams of how the berms will be constructed and alternative ways in which water can or will be channeled off of the active cells of the landfarm.

The diagram shows how each containment cell will contain 5 acres or less of surface area. Containment dykes will be five feet (5') in height with a base of eight feet (8') and crown of two feet (2'). Since the flow of surface water is from the northwest to the southeast in general, diversionary dykes will be installed to divert any rapid flowing

surface water from the containment areas. All containment areas will be levelled by equipment such as dozers or motor graders so as to have a level saturation area. A secondary containment will be a cut drainage ditch on the north side of the containment area leading to a collection area. As more area is needed the diversion and secondary containment areas are moved further and a new collection area is established.

5. Odors from the landfarm should be almost non-existent. I contacted a transporter of the type of solid waste dirt that will be held in the landfarm. No chemical additives, odor-causing fluids, or semi-solids will be hauled into the landfarm. Also, any "moist" or "heavy solids" will first be stabilized or blended on location at the point of generation before loading and hauling into the landfarm.

After "solid waste" has been transported into landfarm all material will be plowed and disked to a 6" lift within a 24 hour period ( the OCD requirement is a 72 hour period). This same procedure will be repeated one (1) time weekly until the total completion of the biodegradation process.

Disking and plowing during the above process will be carefully planned as not to cause dust particles or hydro-carbons to be circulated in air during windy conditions. For dry and windy conditions, moisture will be added to active cells to control the possibility of airborne particles. If odors do become a problem, I will contact the OCD office or EPA for any suggestions on other control procedures.

As my permanent residence is located on and adjacent to the proposed landfarm site, (see Diagram A), I have a strong and definite desire to see that this facility is not or does not become a hazard to the environment. I will monitor the site to see that this facility does not become offensive, odor-wise, or as an unappealing eyesore to my neighbors or myself.

Diagram A



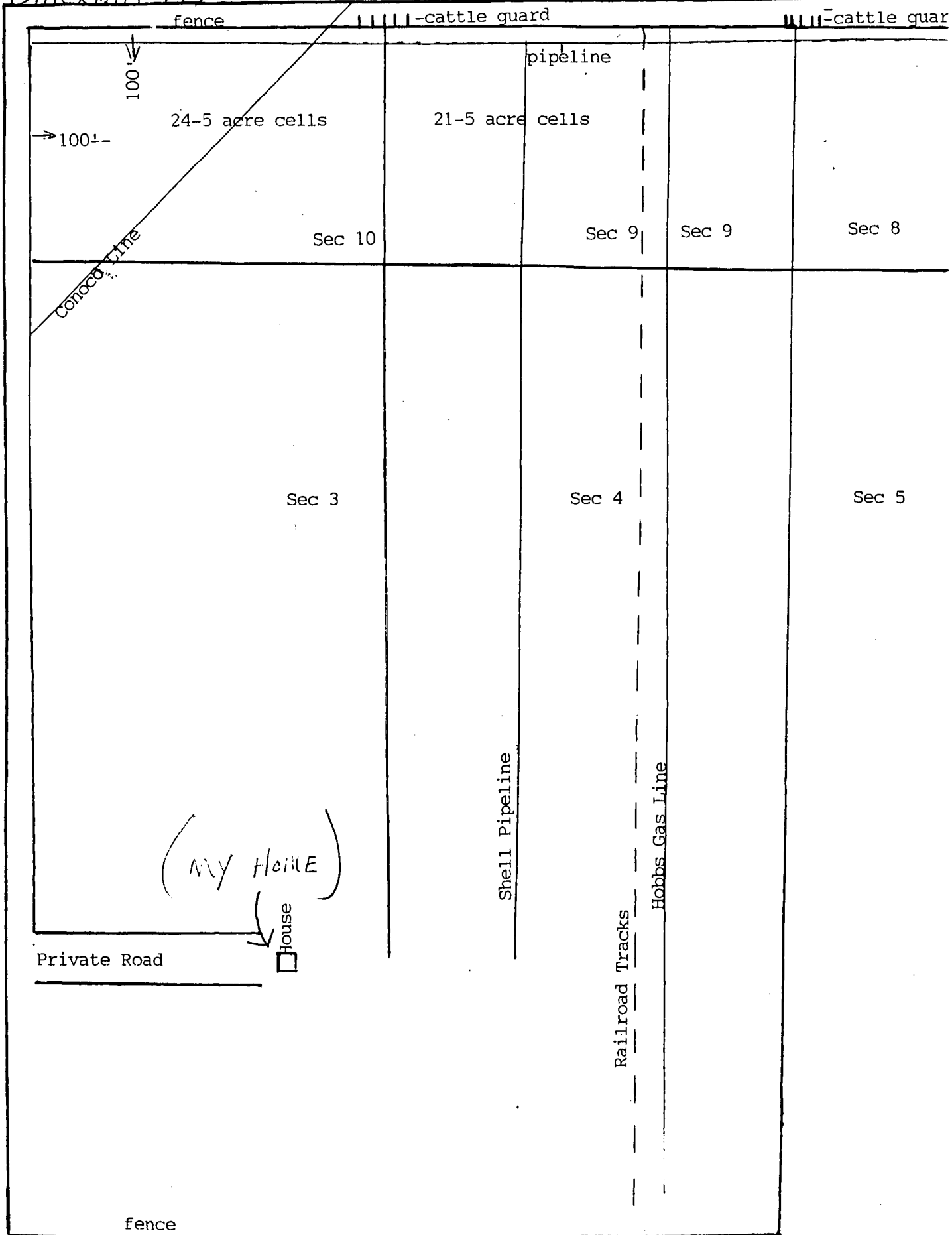
Eunice

State Hwy 18

Hobbs



(North)





RECEIVED

NOV 12 1998

Environmental Bureau  
Oil Conservation Division

Photographs #1, #2, #3 show the low spot area where County Road and Highway 18 intersect. Dirt or gravel is stacked now for re-surfacing of county road. Landfarm site is to northwest of this area across county road.

Photographs #4 and #5 show where due to grading and maintaining of county road dirt has been pushed against fence line. This view is looking northwest to where the site will be constructed.

51



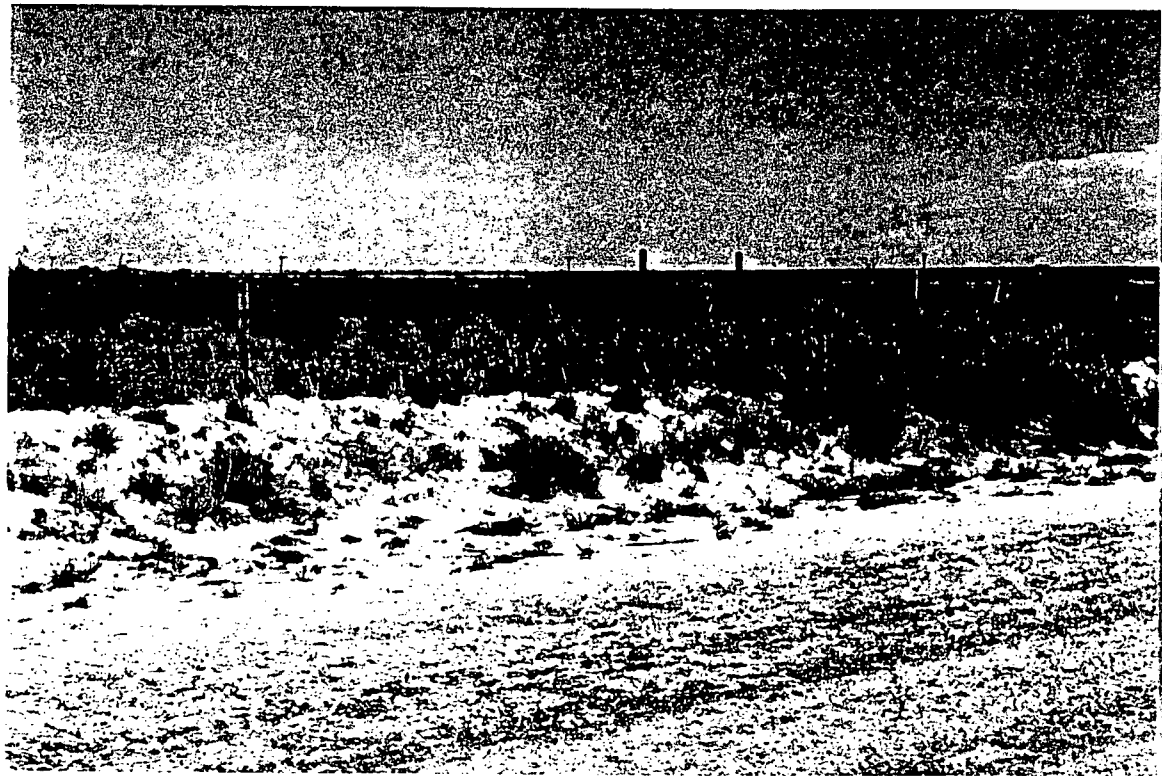
#  
2



#  
3



#4



#5





# ARDINAL LABORATORIES

PHONE (915) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2328 • 101 E. MARLAND • HOBBS, NM 88240

ANALYTICAL RESULTS FOR  
J & L LANDFARM  
ATTN: JUDY ROBERTS  
8301-EUNICE HWY  
HOBBS, NM 88240  
FAX TO:

Receiving Date: 10/28/98  
Reporting Date: 10/29/98  
Project Number: NOT GIVEN  
Project Name: NOT GIVEN  
Project Location: NOT GIVEN

Analysis Date: 10/28/98  
Sampling Date: 10/28/98  
Sample Type: GROUNDWATER  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: AH

| LAB NUMBER                  | SAMPLE ID | TDS<br>(mg/L) |
|-----------------------------|-----------|---------------|
| H3901-1                     | NOT GIVEN | 1038          |
|                             |           |               |
|                             |           |               |
|                             |           |               |
|                             |           |               |
|                             |           |               |
|                             |           |               |
| Quality Control             |           | NR            |
| True Value QC               |           | NR            |
| % Recovery                  |           | NR            |
| Relative Percent Difference |           | 0.7           |

SAMPLE TAKEN FROM  
WATER WELL OF  
Bill & Wilma HAZELWOOD  
10/28/98

METHOD: EPA 600/4-79-020, 160.1

  
\_\_\_\_\_  
Chemist

10/29/98  
\_\_\_\_\_  
Date

PLEASE PRINT NAME AND Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services hereunder by Cardinal, regardless of whether such claim is based upon any of the above-stated reasons or otherwise.



PHONE (915) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

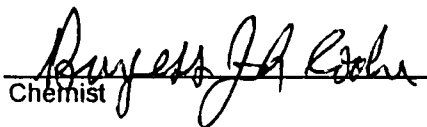
ANALYTICAL RESULTS FOR  
J & L LANDFARM  
ATTN: JUDY ROBERTS  
8301 EUNICE HWY  
HOBBS, NM 88240  
FAX TO:

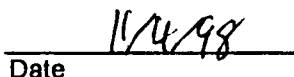
Receiving Date: 10/28/98  
Reporting Date: 11/04/98  
Project Number: NOT GIVEN  
Project Name: HAZELWOOD WW.  
Project Location: NOT GIVEN

Sampling Date: 10/28/98  
Sample Type: GROUNDWATER  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: BC

| LAB NO.                     | SAMPLE ID  | TPH<br>(mg/kg) | BENZENE<br>(mg/kg) | TOLUENE<br>(mg/kg) | ETHYL<br>BENZENE<br>(mg/kg) | TOTAL<br>XYLENES<br>(mg/kg) |
|-----------------------------|------------|----------------|--------------------|--------------------|-----------------------------|-----------------------------|
| ANALYSIS DATE:              |            | 11/02/98       | 11/02/98           | 11/02/98           | 11/02/98                    | 11/02/98                    |
| H3901-1                     | WATER WELL | 0.55           | <0.002             | <0.002             | <0.002                      | <0.006                      |
|                             |            |                |                    |                    |                             |                             |
|                             |            |                |                    |                    |                             |                             |
|                             |            |                |                    |                    |                             |                             |
|                             |            |                |                    |                    |                             |                             |
|                             |            |                |                    |                    |                             |                             |
| Quality Control             |            | 152            | 0.099              | 0.109              | 0.106                       | 0.315                       |
| True Value QC               |            | 150            | 0.100              | 0.100              | 0.100                       | 0.300                       |
| % Recovery                  |            | 101            | 99.2               | 109                | 106                         | 105                         |
| Relative Percent Difference |            | 1.6            | 6.7                | 8.3                | 10.2                        | 7.6                         |

METHODS: TRPHC - EPA 600/7-79-020, 418.1; BTEX - EPA SW846-8020, 8260

  
Chemist

  
Date

H3901-4.XLS

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services hereunder by Cardinal, regardless of whether such claim is based upon any of the above-stated reasons or otherwise.



# ARDINAL LABORATORIES

PHONE (915) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2328 • 101 E. MARLAND • HOBBS, NM 88240

ANALYTICAL RESULTS FOR  
J & L LANDFARM  
ATTN: JUDY ROBERTS  
8301 EUNICE HWY  
HOBBS, NM 88240  
FAX TO:

Receiving Date: 10/28/98  
Reporting Date: 11/03/98  
Project Number: NOT GIVEN  
Project Name: HAZELWOOD WW.  
Project Location: NOT GIVEN

Sampling Date: 10/28/98  
Sample Type: GROUNDWATER  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: AH

| LAB NUMBER | SAMPLE ID | Na<br>(mg/L) | Ca<br>(mg/L) | Mg<br>(mg/L) | K<br>(mg/L) | Conductivity<br>(u mhos/cm) | T-Alkalinity<br>(mgCaCO <sub>3</sub> /L) |
|------------|-----------|--------------|--------------|--------------|-------------|-----------------------------|------------------------------------------|
|------------|-----------|--------------|--------------|--------------|-------------|-----------------------------|------------------------------------------|

|                             |         |         |         |         |         |         |         |
|-----------------------------|---------|---------|---------|---------|---------|---------|---------|
| ANALYSIS DATE:              | 11/3/98 | 11/3/98 | 11/3/98 | 11/3/98 | 11/3/98 | 11/3/98 | 11/3/98 |
| H3901-1                     | 131     | 107     | 37      | 4.39    | 1217    |         | 180     |
|                             | 0       |         |         |         |         |         |         |
| Quality Control             | NR      | 48      | 46      | 4.96    | 1402    |         | NR      |
| True Value QC               | NR      | 50      | 50      | 5.00    | 1413    |         | NR      |
| % Accuracy                  | NR      | 96      | 92      | 99      | 99.2    |         | NR      |
| Relative Percent Difference | NR      | 0       | 12.0    | -       | 0.1     |         | NR      |

|          |             |           |      |       |       |
|----------|-------------|-----------|------|-------|-------|
| METHODS: | SM3500-Ca-D | 3500-Mg E | 8049 | 120.1 | 310.1 |
|----------|-------------|-----------|------|-------|-------|

| Cl <sup>-</sup><br>(mg/L) | SO <sub>4</sub><br>(mg/L) | CO <sub>3</sub><br>(mg/L) | HCO <sub>3</sub><br>(mg/L) | pH<br>(s.u.) | TDS<br>(mg/L) |
|---------------------------|---------------------------|---------------------------|----------------------------|--------------|---------------|
|---------------------------|---------------------------|---------------------------|----------------------------|--------------|---------------|

|                             |         |         |         |         |         |          |
|-----------------------------|---------|---------|---------|---------|---------|----------|
| ANALYSIS DATE:              | 11/3/98 | 11/3/98 | 11/3/98 | 11/3/98 | 11/3/98 | 10/28/98 |
| H3901-1                     | 274     | 139     | 0       | 220     | 7.96    | 1038     |
|                             |         |         |         |         |         |          |
| Quality Control             | 1298    | 48.92   | 112     | 221     | 7.03    | NR       |
| True Value QC               | 1319    | 50.00   | 124     | 259     | 7.00    | NR       |
| % Accuracy                  | 98      | 98      | 90.3    | 85.4    | 100     | NR       |
| Relative Percent Difference | 6.8     | 3.1     | -       | -       | 0       | 0.7      |

|          |             |       |       |       |       |       |
|----------|-------------|-------|-------|-------|-------|-------|
| METHODS: | SM4500-Cl-B | 375.4 | 310.1 | 310.1 | 150.1 | 160.1 |
|----------|-------------|-------|-------|-------|-------|-------|

Chemist

Date



PHONE (915) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

ANALYTICAL RESULTS FOR  
J & L LANDFARM  
ATTN: JUDY ROBERTS  
8301 EUNICE HWY  
HOBBS, NM 88240  
FAX TO:

Receiving Date: 10/28/98  
Reporting Date: 11/04/98  
Project Number: NOT GIVEN  
Project Name: HAZELWOOD WW.  
Project Location: NOT GIVEN

Sampling Date: 10/28/98  
Sample Type: GROUNDWATER  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: AH

RCRA METALS

LAB NUMBER SAMPLE ID

As ppm Ag ppm Ba ppm Cd ppm Cr ppm Pb ppm Hg ppm Se ppm

| ANALYSIS DATE:              | 11/03/98 | 11/02/98 | 11/02/98 | 11/02/98 | 11/02/98 | 11/02/98 | 11/02/98 | 11/03/98 |
|-----------------------------|----------|----------|----------|----------|----------|----------|----------|----------|
| H3901-1 WATER WELL          | 0.012    | 0.014    | 6.786    | <0.01    | 0.075    | <0.01    | <0.02    | <0.1     |
|                             |          |          |          |          |          |          |          |          |
|                             |          |          |          |          |          |          |          |          |
|                             |          |          |          |          |          |          |          |          |
|                             |          |          |          |          |          |          |          |          |
|                             |          |          |          |          |          |          |          |          |
|                             |          |          |          |          |          |          |          |          |
| Quality Control             | 0.061    | 4.715    | 21.93    | 3.942    | 4.484    | 4.902    | 0.0047   | 0.058    |
| True Value QC               | 0.050    | 5.000    | 20.00    | 4.000    | 5.000    | 5.000    | 0.0050   | 0.050    |
| % Recovery                  | 122      | 94       | 110      | 99       | 90       | 98       | 94       | 116      |
| Relative Percent Difference | 12.01    | 0.32     | 4.07     | 0.53     | 4.66     | 1.58     | -        | 0.88     |

|                           |       |       |       |       |       |       |       |       |
|---------------------------|-------|-------|-------|-------|-------|-------|-------|-------|
| METHODS: EPA 600/4-79-020 | 206.2 | 272.1 | 208.1 | 213.1 | 218.1 | 239.1 | 245.1 | 270.2 |
| METHODS: SW-846           | 7060A | 7760A | 7080A | 7130  | 7190  | 7420  | 7470A | 7740  |

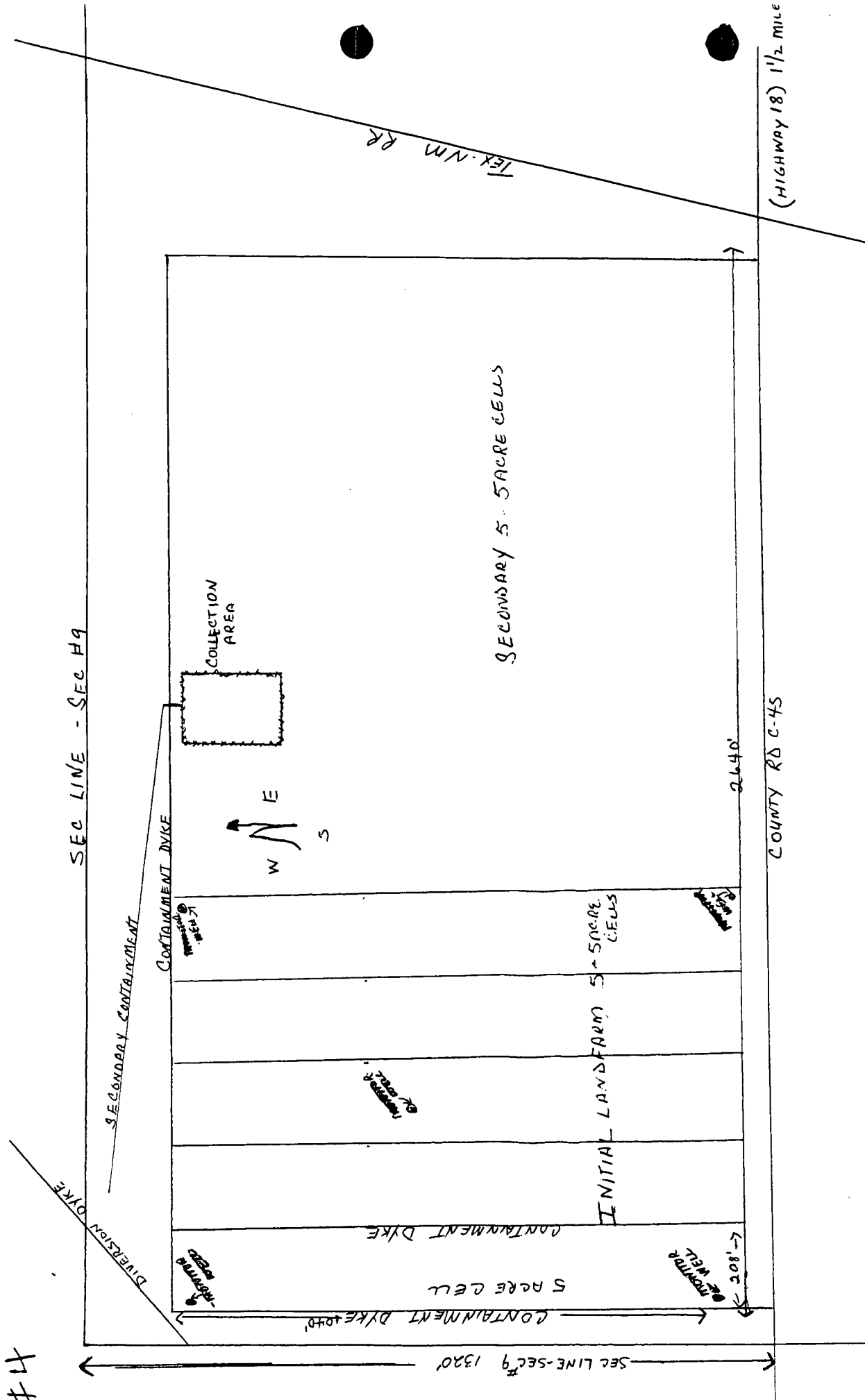
Chemist

Date 11/4/98

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services hereunder by Cardinal, regardless of whether such claim is based upon any of the above-stated reasons or otherwise.



#4



SEC LINE - SEC 9

1 1/2 MILE

15X-NM RR

2640'

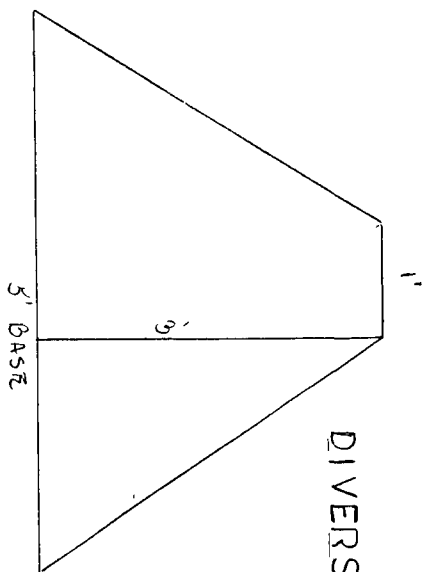
2640'

2640'

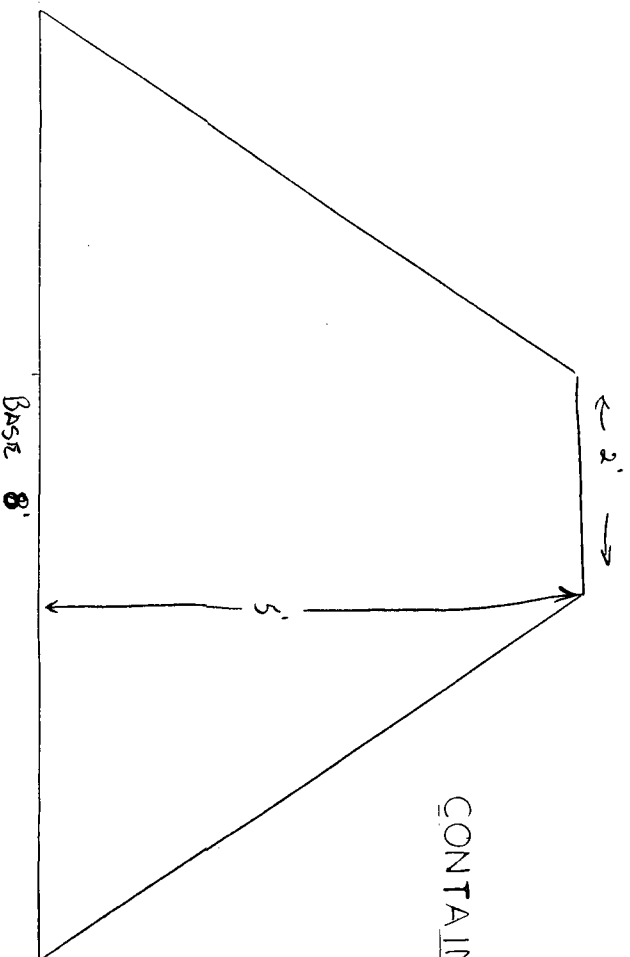
2640'

2640'

2640'



DIVERSION DYKE



CONTAINMENT DYKE PROFILE



NOV 13 1998  
Environmental Bureau  
Oil Conservation Division

**NOTIFICATION OF APPLICATION TO STATE OF NEW MEXICO TO INSTALL  
LANDFARM WASTE MANAGEMENT FACILITY.**

This is to notify all landowners within one (1) mile of proposed facility that application has been made to State of New Mexico to construct a landfarm waste management facility.

**DESCRIPTION OF FACILITY:**

Facility will be a surface impoundment for the disposal of solid oil treated dirt. Area to be designated for facility will be two-hundred & eighty (280) acres.

**LOCATION OF FACILITY:**

Legal description of area: N2/4 N2/4 Section 9/10 Township 20 Range 38, Lea County, New Mexico.

**OPERATOR OF FACILITY:** J&L Landfarm

**CONTACT PERSON:** Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240  
Tele(505-393-9697

For a viewing of the completed application, you may call or write me at the above address or contact the local Oil Conservation Division at 1000 W. Broadway, Hobbs, New Mexico, (505)393-6161.

Judy L. Roberts

**NOTIFICATION OF APPLICATION TO STATE OF NEW MEXICO TO INSTALL  
LANDFARM WASTE MANAGEMENT FACILITY.**

This is to notify all landowners within one (1) mile of proposed facility that application has been made to State of New Mexico to construct a landfarm waste management facility.

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Facility will be a surface impoundment for the disposal of solid oil treated dirt. Area to be designated for facility will be two-hundred & eighty (280) acres.

**LOCATION OF FACILITY:**

Legal description of area: N2/4 N2/4 Section 9/10 Township 20 Range 38, Lea County, New Mexico.

**OPERATOR OF FACILITY:** J&L Landfarm

**CONTACT PERSON:** Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240  
Tele(505-393-9697)

For a viewing of the completed application, you may call or write me at the above address or contact the local Oil Conservation Division at 1000 W. Broadway, Hobbs, New Mexico, (505)393-6161.

Judy L. Roberts

Z 576 998 029

Z 576 995 39

Z 576 998 028

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
LEON NOWALSKI + CHARLES CABBI

Street & Number  
711 AURORA AVE STE. A

Post Office, State, & ZIP Code  
METAIRIE, LOUISIANA 70005-0040

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 27

Postmark or Date

PS Form 3800, April 1995

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
D. K. RANDOLPH

Street & Number  
1000 W. BATA DR

Post Office, State, & ZIP Code  
HOBBS NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 27

Postmark or Date

PS Form 3800, April 1995

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
CARL GREENWOOD

Street & Number  
6021 GREENWOOD PK

Post Office, State, & ZIP Code  
HOBBS, NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 27

Postmark or Date

PS Form 3800, April 1995

Z 576 998 029

Z 576 998 026

Z 576 998 032

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
M. H. McGRATH + E. KORMEGAYTOST

Street & Number  
DONATIONS BANK

Post Office, State, & ZIP Code  
500 N. MAIN ROSWELL NM 88201

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 27

Postmark or Date

PS Form 3800, April 1995

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
ANTONIO CERVANTES

Street & Number  
405 E. LEP

Post Office, State, & ZIP Code  
HOBBS NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 27

Postmark or Date

PS Form 3800, April 1995

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
CLYDE ARSBON

Street & Number  
219 W. STANN PK

Post Office, State, & ZIP Code  
HOBBS NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 27

Postmark or Date

PS Form 3800, April 1995

Z 576 998 034

Z 576 998 036

Z 576 998 038

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
BILL HAZELWOOD

Street & Number  
RT. 69-42380 HWY. 18

Post Office, State, & ZIP Code  
HOBBS NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 27

Postmark or Date

PS Form 3800, April 1995

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
R. N. MAGEE

Street & Number  
8830 FURICE HWY

Post Office, State, & ZIP Code  
HOBBS NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 27

Postmark or Date

PS Form 3800, April 1995

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
CHARLES MEYERS

Street & Number  
3700 TIPTON DR.

Post Office, State, & ZIP Code  
HOBBS NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 27

Postmark or Date

PS Form 3800, April 1995

Z 576 998 027

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                     |
|-------------------------------------------------------------|---------------------|
| Sent to                                                     | ROBERT A. MCCASLAND |
| Street & Number                                             | 1000 AVE N          |
| Post Office, State, & ZIP Code                              | ELUNICE, NM 88231   |
| Postage                                                     | \$ L                |
| Certified Fee                                               | \$ 3.50             |
| Special Delivery Fee                                        | SEP                 |
| Restricted Delivery Fee                                     | 1000                |
| Return Receipt Showing to Whom & Date Delivered             | L                   |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                     |
| <b>TOTAL Postage &amp; Fees</b>                             | <b>\$ 2.77</b>      |
| Postmark or Date                                            |                     |

PS Form 3800, April 1995

Z 576 998 037

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                           |
|-------------------------------------------------------------|---------------------------|
| Sent to                                                     | RUTH G. THOMPSON          |
| Street & Number                                             | 2700 WINDSOR BLVD         |
| Post Office, State, & ZIP Code                              | OKLAHOMA CITY, OKLA 73127 |
| Postage                                                     | \$ L                      |
| Certified Fee                                               | \$ 3.50                   |
| Special Delivery Fee                                        | SEP                       |
| Restricted Delivery Fee                                     | 1000                      |
| Return Receipt Showing to Whom & Date Delivered             | L                         |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                           |
| <b>TOTAL Postage &amp; Fees</b>                             | <b>\$ 2.77</b>            |
| Postmark or Date                                            |                           |

PS Form 3800, April 1995

Z 576 998 039

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                 |
|-------------------------------------------------------------|-----------------|
| Sent to                                                     | JUAN HUERTA     |
| Street & Number                                             | 300 W LEA       |
| Post Office, State, & ZIP Code                              | HOBBS, NM 88241 |
| Postage                                                     | \$ L            |
| Certified Fee                                               | \$ 3.50         |
| Special Delivery Fee                                        |                 |
| Restricted Delivery Fee                                     |                 |
| Return Receipt Showing to Whom & Date Delivered             | L               |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                 |
| <b>TOTAL Postage &amp; Fees</b>                             | <b>\$ 2.77</b>  |
| Postmark or Date                                            |                 |

PS Form 3800, April 1995

Z 576 998 033

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                          |
|-------------------------------------------------------------|--------------------------|
| Sent to                                                     | W.D. COLYNS, EST WARRICK |
| Street & Number                                             | 7632 PONTIAC BL SW       |
| Post Office, State, & ZIP Code                              | ALBUQUERQUE, NM 87105    |
| Postage                                                     | \$ L                     |
| Certified Fee                                               | \$ 3.50                  |
| Special Delivery Fee                                        | SEP                      |
| Restricted Delivery Fee                                     | 1000                     |
| Return Receipt Showing to Whom & Date Delivered             | L                        |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                          |
| <b>TOTAL Postage &amp; Fees</b>                             | <b>\$ 2.77</b>           |
| Postmark or Date                                            |                          |

PS Form 3800, April 1995

Landowner of Facility: Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240  
(505)393-9697

RECEIVED

APR 1 1998

Environmental Protection  
Oil Conservation Division

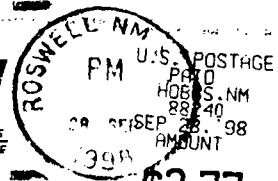
Landowners within one (1) mile of site:

- |                                                                                             |                                                                                            |
|---------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| ✓ Wilma Hardin ·<br>P.O. Box 5458<br>Hobbs, New Mexico 88240                                | ✓ Will N. Terry, Trust, et al. ·<br>Box 686<br>Hobbs, New Mexico 88240                     |
| ✓ Gary Don Henderson ·<br>P.O. 725<br>Lovington, New Mexico 88260                           | ✓ Lida B. Meyers ·<br>St. Rt. A Box 142<br>Hobbs, New Mexico 88240                         |
| ✓ R.E. Hudson ·<br>P.O. Box 1572<br>Edgewood, New Mexico 87015                              | ✓ Bruce Morris Holding Co. ·<br>6253 Hollywood Blvd. #614<br>Los Angeles, California 90028 |
| ✓ J. Marvin Haynes, et al. ·<br>2 Wisconsin Circle Suite 400<br>Chevy Chase, Maryland 20815 | ✓ Oswaldo Juarez, Sr. ·<br>514 E. Alston<br>Hobbs, New Mexico 88240                        |
| / Sabino Calvillo<br>1217 Landfill Dr.<br>Hobbs, New Mexico 88240                           | ✓ City of Eunice ·<br>Box 147<br>Eunice, New Mexico 88231                                  |
| ✓ Ruben Calvillo & Debbie Montoya<br>St. Rt. A Box 191<br>Hobbs, New Mexico 88240           | ✓ Adrian F. Zamora ·<br>8000 So. Eunice Highway<br>Hobbs, New Mexico 88240                 |
| / Dorse S. Carson ·<br>P.O. Box 25547<br>Albuquerque, New Mexico 87125                      | ✓ Jesus M. Batista ·<br>1730 N. Robert Lane<br>Hobbs, New Mexico 88240                     |
| / Chris M. Furneaux ·<br>Box 575<br>Walden, Colorado 80480                                  | ✓ Abe Neufeld, et al ·<br>2805 Rose Road<br>Hobbs, New Mexico 88240                        |
| / Larry Maddox ·<br>P.O. Box 93<br>Junction, Texas 76849                                    | ✓ Efrain Rodriguez ·<br>600 E. Mesquite<br>Hobbs, New Mexico 88240                         |
| ✓ Kevin Mattingly<br>221 Victoria Lane<br>Hobbs, New Mexico 88240                           |                                                                                            |

Roberts  
8301 Eunice Highway  
Hobbs, NM 88240

1m 10 2 98 6 9m

ATTEMPTED  
NOT KNOWN



0000

\$2.77

1st Notice 10-  
2nd Notice  
Return

Fold at line over top of envelope to  
the right of the return address

CERTIFIED

Wilma Hardin  
P.O. Box 5458  
Hobbs, New Mexico 88240

2 102 523 7132

MAIL

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                       |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>SENDER:</b> <ul style="list-style-type: none"><li>Complete items 1 and/or 2 for additional services.</li><li>Complete items 3, 4a, and 4b.</li><li>Print your name and address on the reverse of this form so that we can return this card to you.</li><li>Attach this form to the front of the mailpiece, or on the back if space does not permit.</li><li>Write "Return Receipt Requested" on the mailpiece below the article number.</li><li>The Return Receipt will show to whom the article was delivered and the date delivered.</li></ul> |  | I also wish to receive the following services (for an extra fee): <ul style="list-style-type: none"><li>1. <input type="checkbox"/> Addressee's Address</li><li>2. <input type="checkbox"/> Restricted Delivery</li></ul> Consult postmaster for fee. |  |
| 3. Article Addressed to:<br>WILMA HARDIN<br>P.O. Box 5458<br>HOBBS, NEW MEXICO<br>88240                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | 4a. Article Number 2102 523 713<br>RET REC REQ                                                                                                                                                                                                        |  |
| 4b. Service Type <ul style="list-style-type: none"><li><input type="checkbox"/> Registered</li><li><input type="checkbox"/> Express Mail</li><li><input checked="" type="checkbox"/> Return Receipt for Merchandise</li></ul>                                                                                                                                                                                                                                                                                                                       |  | <input checked="" type="checkbox"/> Certified<br><input type="checkbox"/> Insured<br><input type="checkbox"/> COD                                                                                                                                     |  |
| 5. Received By: (Print Name)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 7. Date of Delivery                                                                                                                                                                                                                                   |  |
| 6. Signature: (Addressee or Agent)<br>X                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | 8. Addressee's Address (Only if requested and fee is paid)                                                                                                                                                                                            |  |

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.



**SENDER:**

- Complete items 1 and/or 2 for additional services.  
■ Complete items 3, 4a, and 4b.  
■ Print your name and address on the reverse of this form so that we can return this card to you.  
■ Attach this form to the front of the mailpiece, or on the back if space does not permit.  
■ Write "Return Receipt Requested" on the mailpiece below the article number.  
■ The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

CITY OF EUNICE  
Box 147  
EUNICE, NEW MEXICO  
88231

4a. Article Number

RET REC REQUESTED

4b. Service Type

- ☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ Certified  
☐ Insured  
☐ COD

7. Date of Delivery

10/1/94

5. Received By: (Print Name)

Address (Only if requested)

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

**SENDER:**

- Complete items 1 and/or 2 for additional services.  
■ Complete items 3, 4a, and 4b.  
■ Print your name and address on the reverse of this form so that we can return this card to you.  
■ Attach this form to the front of the mailpiece, or on the back if space does not permit.  
■ Write "Return Receipt Requested" on the mailpiece below the article number.  
■ The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

GARY DON HENDERSON  
P.O. Box 725  
LOVINGTON, NEW MEXICO  
88260

4a. Article Number

RET REC REQ

4b. Service Type

- ☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ Certified  
☐ Insured  
☐ COD

7. Date of Delivery

10/1/94

5. Received By: (Print Name)

Address (Only if requested)

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.  
■ Complete items 3, 4a, and 4b.  
■ Print your name and address on the reverse of this form so that we can return this card to you.  
■ Attach this form to the front of the mailpiece, or on the back if space does not permit.  
■ Write "Return Receipt Requested" on the mailpiece below the article number.  
■ The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

CHRIS M. FURNEAUX  
Box 575  
WALDEN, COLORADO  
80480

4a. Article Number

RET REC REQ

4b. Service Type

- ☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ Certified  
☐ Insured  
☐ COD

7. Date of Delivery

10/1/94

5. Received By: (Print Name)

Address (Only if requested)

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

**SENDER:**

- Complete items 1 and/or 2 for additional services.  
■ Complete items 3, 4a, and 4b.  
■ Print your name and address on the reverse of this form so that we can return this card to you.  
■ Attach this form to the front of the mailpiece, or on the back if space does not permit.  
■ Write "Return Receipt Requested" on the mailpiece below the article number.  
■ The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

ABE NEUFELD, et al  
2805 ROSE ROAD  
HOBBS, NEW MEXICO  
88240

4a. Article Number

RET REC REQUESTED

4b. Service Type

- ☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ Certified  
☐ Insured  
☐ COD

7. Date of Delivery

10-01

5. Received By: (Print Name)

Address (Only if requested)

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
  - ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

SABINO CALVILLO  
1217 LANDFILL ROAD  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2102 523 715

RET REC REQ

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery 10/29/93

7029-7608

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *Sabino Calvillo*

PS Form 3811, December 1994

Domestic Return Receipt

102595-98-B-0229

Thank you for using Return Receipt Service.

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
  - ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

OSWALDO JUAREZ, SR.  
514 E. ALSTON  
HOBBS NEW MEXICO  
88240

4a. Article Number 2174 996 249

RET REC REQUESTED

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery 10/29/93

91-29-76

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *Oswaldo Juarez*

PS Form 3811, December 1994

Domestic Return Receipt

102595-98-B-0229

Thank you for using Return Receipt Service.

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
  - ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

R. E. HUDSON  
P.O. Box 1572  
EDGEWOOD, NEW MEXICO  
89105

4a. Article Number 2-577000 121

RET REC REQ

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *R. E. Hudson*

PS Form 3811, December 1994

Domestic Return Receipt

102595-98-B-0229

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
  - ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

LIDA B. MEYERS  
ST. RT. A BOX 142  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2102-523-121

RET REC REQUESTED

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery

10-1-93

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X *Lida B. Meyers*

PS Form 3811, December 1994

Domestic Return Receipt

102595-98-B-0229

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:  
**LARRY MADDOUX**  
**P.O. Box 93**  
**JUNCTION, TEXAS**  
**76849**

4a. Article Number **2102 523 723**

4b. Service Type  
☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ COD

7. Date of Delivery  
**10-1-98**

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)  
**X Laura Lopez**

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:  
**FRANK RODRIGUEZ**  
**600 E. MESQUITE**  
**HOBBS, NEW MEXICO**  
**88240**

4a. Article Number **2102 523 718**

4b. Service Type  
☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ COD

7. Date of Delivery  
**9-29-98**

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)  
**X Gerardo Rodriguez**

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:  
**WILL TERRY TRUST, et al**  
**Box 686**  
**HOBBS, NEW MEXICO**  
**88240**

4a. Article Number **2102 523 720**

4b. Service Type  
☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ COD

7. Date of Delivery  
**9-7-0**

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)  
**X Wm: J. J. J.**

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:  
**JESUS M. BATISTA**  
**1730 N. ROBERT LANE**  
**HOBBS, NEW MEXICO**  
**88240**

4a. Article Number **2102 523 711**

4b. Service Type  
☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ COD

7. Date of Delivery  
**9-29**

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)  
**X Mountha Bawell**

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

■ Complete items 1 and/or 2 for additional services.

■ Complete items 3, 4a, and 4b.

■ Print your name and address on the reverse of this form so that we can return this card to you.

■ Attach this form to the front of the mailpiece, or on the back if space does not permit.

■ Write "Return Receipt Requested" on the mailpiece below the article number.

■ The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address  
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

ADRIAN F. ZAMORA  
8000 SO. EUNICE HWY  
HOBBS, NEW MEXICO 88240

4a. Article Number

RET REC REQUESTED  
218674648

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☒ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9-29-98 69 M

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

*[Signature]*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- ☐ Complete items 1 and/or 2 for additional services.
- ☐ Complete items 3, 4a, and 4b.
- ☐ Print your name and address on the reverse of this form so that we can return this card to you.
- ☐ Attach this form to the front of the mailpiece, or on the back if space does not permit.
- ☐ Write "Return Receipt Requested" on the mailpiece below the article number.
- ☐ The Return Receipt will show to whom the article was delivered and the date delivered.

- I also wish to receive the following services (for an extra fee):
- 1. ☐ Addressee's Address
  - 2. ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

J. MARVIN HAYNES, et al

2 WISCONSIN CIRCLE

SUITE 400

CHEVY CHASE, MD 20815

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

4a. Article Number 2102523717

RET REC REQ

4b. Service Type

☐ Registered

☐ Express Mail

☒ Return Receipt for Merchandise

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102695 90-9-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Fold at line over top of envelope to the right of the return address

**CERTIFIED**

Z 102 523 717

**MAIL**

88240-3533 63  
20815-7003 61

J. MARVIN HAYNES, et al  
2 Wisconsin Circle Suite 400  
Chevy Chase, MD 20815

1st Notice 10-7-98  
2nd Notice

OSTAGE  
D  
S. NH  
40  
198  
INT  
77  
430-03

Z 102 523 714

US Postal Service

# Receipt for Certified Mail

No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

|                                                             |                         |
|-------------------------------------------------------------|-------------------------|
| Sent to RUBEN CALVILLO 3                                    |                         |
| DEBBIE MONTANA                                              |                         |
| Street & Number                                             | ST. A. BUL 141          |
| Post Office, State, & ZIP Code                              | HOBBS, NEW MEXICO 88240 |
| Postage                                                     | \$ NM 628               |
| Certified Fee                                               | ✓                       |
| Special Delivery Fee                                        | ✓                       |
| Restricted Delivery Fee                                     | ✓                       |
| Return Receipt Showing to Whom & Date Delivered             | ✓                       |
| Return Receipt Showing to Whom, Date, & Addressee's Address | ✓                       |
| TOTAL Postage & Fees                                        | \$ 27                   |
| Postmark or Date                                            |                         |

PS Form 3800, April 1995



Sorry We Missed You!  
We ReDeliver For You!

Item ☐ Post Office (see reverse)  
is at: ☐

☐ IF CHECKED, YOU MUST BE PRESENT AT TIME OF DELIVERY TO SIGN FOR ITEM.

☒ Letter ☐ Express Mail (redelivery next delivery day unless you call to hold at post office)

☐ Large envelope, magazine, catalog, etc.

☐ Parcel ☐ Certified ☐ Insured

☐ Delivery Restricted to Addressee ☐ Registered ☐ Return Receipt for Merchandise

☐ Perishable Item ☐ Recorded Delivery (International) ☐ Special Delivery

Delivered By *[Signature]* Date *12/27/94*

Customer: Describe any Visible Damage

PS Form 3849, December 1994

Delivery Notice/Reminder/Receipt

Article No. *5102523714*

Today's Date *12/29*

Sender's Name *Pobito*

We ReDeliver or you can pick up, see back

Article Requiring Payment: ☐ FINAL NOTICE

☐ Postage Due ☐ Article will be returned to sender on:

☐ COD ☐ Customs

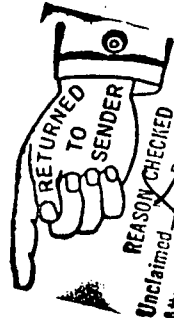
Amount Due \$ *628*

Addressee Name (Print) *Ruben Calvillo*

Address *Box 191*

Received By (Print Name and Sign) *Xilipalukin 27/23/94*

Roberts  
8301 Eunice Hwy  
Hobbs, NM 88240



REASON CHECKED  
Unclaimed ☒  
Attempted but known ☐  
Insufficient Address ☐  
No such street or number ☐  
Do not recognize ☐

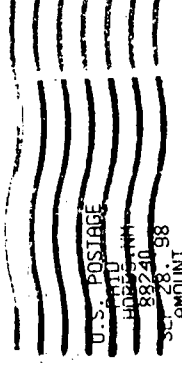
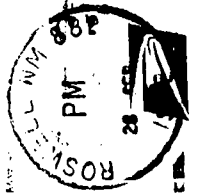
Borse S. Carson  
P.O. Box 25547  
Albuquerque, New Mexico 87125

Fold at line over top of envelope to  
the right of the return address.

**CERTIFIED**

Z 102 523 725

**MAIL**



\$2.77  
00035430-03

NAME 9-29  
1st Notice 10-30  
2nd Notice 10/17  
Return 10/25



Is your RETURN ADDRESS completed on the reverse side?

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                              |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>SENDER:</b><br><input type="checkbox"/> Complete items 1 and/or 2 for additional services.<br><input type="checkbox"/> Complete items 3, 4a, and 4b.<br><input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you.<br><input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit.<br><input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number.<br><input type="checkbox"/> The Return Receipt will show to whom the article was delivered and the date delivered. |  | I also wish to receive the following services (for an extra fee):<br>1. <input type="checkbox"/> Addressee's Address<br>2. <input type="checkbox"/> Restricted Delivery<br>Consult postmaster for fee.                                                       |  |
| 3. Article Addressed to:<br><br>DORSE S. CARSON<br>P.O. BOX 25547<br>ALBUQUERQUE, NEW MEXICO 87125                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | 4a. Article Number<br>2102 533725<br>RET REL REQ                                                                                                                                                                                                             |  |
| 5. Received By: (Print Name)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 4b. Service Type<br><input type="checkbox"/> Registered <input type="checkbox"/> Certified<br><input type="checkbox"/> Express Mail <input type="checkbox"/> Insured<br><input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD |  |
| 6. Signature: (Addressee or Agent)<br><br>X                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | 7. Date of Delivery<br>87125                                                                                                                                                                                                                                 |  |
| 8. Addressee's Address (Only if requested and fee is paid)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                              |  |

Thank you for using Return Receipt Service.



Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BRUCE MORRIS HOLDING,  
CO.  
6253 HOLLYWOOD BLVD.  
#614  
LOS ANGELES, CALIF.

4a. Article Number 210252372  
RET REC REQUESTED

4b. Service Type

- |                                                                    |                                               |
|--------------------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Registered                                | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                              | <input type="checkbox"/> Insured              |
| <input checked="" type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

10/13/98 Pr

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 274 796 249

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| OSWALDO JUAREZ, SR.                                         |        |
| Street & Number                                             |        |
| 514 E. ALSTON                                               |        |
| Post Office, State, & ZIP Code                              |        |
| HOBBS, NEW MEXICO 88240                                     |        |
| Postage                                                     | \$ C   |
| Certified Fee                                               | C      |
| Special Delivery Fee                                        |        |
| Restricted Delivery Fee                                     |        |
| Return Receipt Showing to Whom & Date Delivered             |        |
| Return Receipt Showing to Whom, Date, & Addressee's Address |        |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

Z 1 523 715

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| SABINO CALVILLO                                             |        |
| Street & Number                                             |        |
| 1217 LANDFILL ROAD                                          |        |
| Post Office, State, & ZIP Code                              |        |
| HOBBS, NEW MEXICO 88240                                     |        |
| Postage                                                     | \$ C   |
| Certified Fee                                               | C      |
| Special Delivery Fee                                        |        |
| Restricted Delivery Fee                                     |        |
| Return Receipt Showing to Whom & Date Delivered             |        |
| Return Receipt Showing to Whom, Date, & Addressee's Address |        |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

Z 186 746 481

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| ADRIAN F. ZAMORA                                            |        |
| Street & Number                                             |        |
| 8000 SO. EUNICE HAY                                         |        |
| Post Office, State, & ZIP Code                              |        |
| HOBBS, NEW MEXICO 88240                                     |        |
| Postage                                                     | \$ C   |
| Certified Fee                                               | C      |
| Special Delivery Fee                                        |        |
| Restricted Delivery Fee                                     |        |
| Return Receipt Showing to Whom & Date Delivered             |        |
| Return Receipt Showing to Whom, Date, & Addressee's Address |        |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

Z 102 523 718

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| EFRAIN RODRIGUEZ                                            |        |
| Street & Number                                             |        |
| 600 E. MESQUITE                                             |        |
| Post Office, State, & ZIP Code                              |        |
| HOBBS, NEW MEXICO 88240                                     |        |
| Postage                                                     | \$ C   |
| Certified Fee                                               | C      |
| Special Delivery Fee                                        |        |
| Restricted Delivery Fee                                     |        |
| Return Receipt Showing to Whom & Date Delivered             |        |
| Return Receipt Showing to Whom, Date, & Addressee's Address |        |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

PS Form 3800, April 1995

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| JESUS M. BATISTA                                            |        |
| Street & Number                                             |        |
| 1730 N. ROBERT LA                                           |        |
| Post Office, State, & ZIP Code                              |        |
| HOBBS, NEW MEXICO 8                                         |        |
| Postage                                                     | \$ C   |
| Certified Fee                                               | C      |
| Special Delivery Fee                                        |        |
| Restricted Delivery Fee                                     |        |
| Return Receipt Showing to Whom & Date Delivered             |        |
| Return Receipt Showing to Whom, Date, & Addressee's Address |        |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

Z 102 523 711

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Z 102 73 724

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                                 |               |
|-----------------------------------------------------------------|---------------|
| Sent to<br><b>CHRIS M. FURNEAUX</b>                             |               |
| Street & Number<br><b>Box 575</b>                               |               |
| Post Office, State, & ZIP Code<br><b>WALDEN, COLORADO 80480</b> |               |
| Postage<br><b>SEP 28 1998</b>                                   | \$ <b>L</b>   |
| Certified Fee<br><b>SEP 28 1998</b>                             | <b>L</b>      |
| Special Delivery Fee                                            |               |
| Restricted Delivery Fee                                         |               |
| Return Receipt Showing to Whom & Date Delivered                 | <b>L</b>      |
| Return Receipt Showing to Whom, Date, & Addressee's Address     |               |
| <b>TOTAL Postage &amp; Fees</b>                                 | \$ <b>277</b> |
| Postmark or Date                                                |               |

PS Form 3800, April 1995

Z 86 746 482

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                                   |               |
|-------------------------------------------------------------------|---------------|
| Sent to<br><b>CITY OF EUNICE</b>                                  |               |
| Street & Number<br><b>Box 147</b>                                 |               |
| Post Office, State, & ZIP Code<br><b>EUNICE, NEW MEXICO 88231</b> |               |
| Postage<br><b>SEP 28 1998</b>                                     | \$ <b>820</b> |
| Certified Fee<br><b>SEP 28 1998</b>                               | <b>L</b>      |
| Special Delivery Fee                                              |               |
| Restricted Delivery Fee                                           |               |
| Return Receipt Showing to Whom & Date Delivered                   |               |
| Return Receipt Showing to Whom, Date, & Addressee's Address       |               |
| <b>TOTAL Postage &amp; Fees</b>                                   | \$ <b>277</b> |
| Postmark or Date                                                  |               |

PS Form 3800, April 1995

Z 102 523 722

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                                  |               |
|------------------------------------------------------------------|---------------|
| Sent to<br><b>LIDA B. MEYERS</b>                                 |               |
| Street & Number<br><b>ST. RT. A Box 142</b>                      |               |
| Post Office, State, & ZIP Code<br><b>HOBBS, NEW MEXICO 88240</b> |               |
| Postage<br><b>SEP 28 1998</b>                                    | \$ <b>L</b>   |
| Certified Fee<br><b>SEP 28 1998</b>                              | <b>L</b>      |
| Special Delivery Fee                                             |               |
| Restricted Delivery Fee                                          |               |
| Return Receipt Showing to Whom & Date Delivered                  | <b>L</b>      |
| Return Receipt Showing to Whom, Date, & Addressee's Address      |               |
| <b>TOTAL Postage &amp; Fees</b>                                  | \$ <b>277</b> |
| Postmark or Date                                                 |               |

PS Form 3800, April 1995

Z 577 000 121

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                                     |               |
|---------------------------------------------------------------------|---------------|
| Sent to<br><b>K.E. HUDSON</b>                                       |               |
| Street & Number<br><b>P.O. Box 1572</b>                             |               |
| Post Office, State, & ZIP Code<br><b>EDGEMOND, NEW MEXICO 87105</b> |               |
| Postage<br><b>SEP 28 1998</b>                                       | \$ <b>L</b>   |
| Certified Fee<br><b>SEP 28 1998</b>                                 | <b>L</b>      |
| Special Delivery Fee                                                |               |
| Restricted Delivery Fee                                             |               |
| Return Receipt Showing to Whom & Date Delivered                     | <b>L</b>      |
| Return Receipt Showing to Whom, Date, & Addressee's Address         |               |
| <b>TOTAL Postage &amp; Fees</b>                                     | \$ <b>277</b> |
| Postmark or Date                                                    |               |

PS Form 3800, April 1995

Z 102 23 720

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                                  |              |
|------------------------------------------------------------------|--------------|
| Sent to<br><b>WILL N. TERRY TRUST, et al</b>                     |              |
| Street & Number<br><b>Box 686</b>                                |              |
| Post Office, State, & ZIP Code<br><b>HOBBS, NEW MEXICO 88240</b> |              |
| Postage                                                          | \$ <b>✓</b>  |
| Certified Fee                                                    | <b>✓</b>     |
| Special Delivery Fee                                             |              |
| Restricted Delivery Fee                                          |              |
| Return Receipt Showing to Whom & Date Delivered                  | <b>✓</b>     |
| Return Receipt Showing to Whom, Date, & Addressee's Address      | <b>✓</b>     |
| TOTAL Postage & Fees                                             | \$ <b>27</b> |
| Postmark or Date                                                 |              |

PS Form 3800, April 1995

Z 102 523 723

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                                |              |
|----------------------------------------------------------------|--------------|
| Sent to<br><b>LARRY MADDOX</b>                                 |              |
| Street & Number<br><b>P.O. Box 93</b>                          |              |
| Post Office, State, & ZIP Code<br><b>JUNCTION, TEXAS 76844</b> |              |
| Postage                                                        | \$ <b>✓</b>  |
| Certified Fee                                                  | <b>✓</b>     |
| Special Delivery Fee                                           |              |
| Restricted Delivery Fee                                        |              |
| Return Receipt Showing to Whom & Date Delivered                | <b>✓</b>     |
| Return Receipt Showing to Whom, Date, & Addressee's Address    | <b>✓</b>     |
| TOTAL Postage & Fees                                           | \$ <b>27</b> |
| Postmark or Date                                               |              |

PS Form 3800, April 1995

Z 102 523 712

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                                       |              |
|-----------------------------------------------------------------------|--------------|
| Sent to<br><b>GARY DON HENDERSON</b>                                  |              |
| Street & Number<br><b>P.O. Box 725</b>                                |              |
| Post Office, State, & ZIP Code<br><b>LIVINGSTON, NEW MEXICO 88260</b> |              |
| Postage                                                               | \$ <b>✓</b>  |
| Certified Fee                                                         | <b>✓</b>     |
| Special Delivery Fee                                                  |              |
| Restricted Delivery Fee                                               |              |
| Return Receipt Showing to Whom & Date Delivered                       | <b>✓</b>     |
| Return Receipt Showing to Whom, Date, & Addressee's Address           | <b>✓</b>     |
| TOTAL Postage & Fees                                                  | \$ <b>27</b> |
| Postmark or Date                                                      |              |

PS Form 3800, April 1995

Z 102 523 719

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                                  |              |
|------------------------------------------------------------------|--------------|
| Sent to<br><b>ABE NEUFELD, et al</b>                             |              |
| Street & Number<br><b>2805 ROSE ROAD</b>                         |              |
| Post Office, State, & ZIP Code<br><b>HOBBS, NEW MEXICO 88240</b> |              |
| Postage                                                          | \$ <b>✓</b>  |
| Certified Fee                                                    | <b>✓</b>     |
| Special Delivery Fee                                             |              |
| Restricted Delivery Fee                                          |              |
| Return Receipt Showing to Whom & Date Delivered                  | <b>✓</b>     |
| Return Receipt Showing to Whom, Date, & Addressee's Address      | <b>✓</b>     |
| TOTAL Postage & Fees                                             | \$ <b>27</b> |
| Postmark or Date                                                 |              |

PS Form 3800, April 1995

Z 102 523 717  
US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

PS Form 3800, April 1995

|                                                             |                            |
|-------------------------------------------------------------|----------------------------|
| Sent to                                                     | J. MARVIN HAYNES, et al    |
| Street & Number                                             | 2 WILSON V CIRCLE, STE 400 |
| Post Office, State, & ZIP Code                              | CHEVY CHASE, MD 20815      |
| Postage                                                     |                            |
| Certified Fee                                               |                            |
| Special Delivery Fee                                        |                            |
| Restricted Delivery Fee                                     |                            |
| Return Receipt Showing to Whom & Date Delivered             |                            |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                            |
| TOTAL Postage & Fees                                        | \$ 27                      |
| Postmark or Date                                            |                            |

Z 102 523 713  
US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

PS Form 3800, April 1995

|                                                             |                         |
|-------------------------------------------------------------|-------------------------|
| Sent to                                                     | WILMA HARDIN            |
| Street & Number                                             | P.O. Box 5458           |
| Post Office, State, & ZIP Code                              | HOBBS, NEW MEXICO 88240 |
| Postage                                                     | \$                      |
| Certified Fee                                               |                         |
| Special Delivery Fee                                        |                         |
| Restricted Delivery Fee                                     |                         |
| Return Receipt Showing to Whom & Date Delivered             |                         |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                         |
| TOTAL Postage & Fees                                        | \$ 27                   |
| Postmark or Date                                            |                         |

Z 102 523 721  
US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

PS Form 3800, April 1995

|                                                             |                               |
|-------------------------------------------------------------|-------------------------------|
| Sent to                                                     | BRUCE MORRIS HOLDING CO       |
| Street & Number                                             | 6253 HOLLYWOOD BLVD, #614     |
| Post Office, State, & ZIP Code                              | LOS ANGELES, CALIFORNIA 90024 |
| Postage                                                     | \$                            |
| Certified Fee                                               |                               |
| Special Delivery Fee                                        |                               |
| Restricted Delivery Fee                                     |                               |
| Return Receipt Showing to Whom & Date Delivered             |                               |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                               |
| TOTAL Postage & Fees                                        | \$ 27                         |
| Postmark or Date                                            |                               |

Z 102 523 725  
US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

PS Form 3800, April 1995

|                                                             |                               |
|-------------------------------------------------------------|-------------------------------|
| Sent to                                                     | DORSE CARSON                  |
| Street & Number                                             | P.O. Box 25547                |
| Post Office, State, & ZIP Code                              | ALBUQUERQUE, NEW MEXICO 87125 |
| Postage                                                     | \$                            |
| Certified Fee                                               |                               |
| Special Delivery Fee                                        |                               |
| Restricted Delivery Fee                                     |                               |
| Return Receipt Showing to Whom & Date Delivered             |                               |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                               |
| TOTAL Postage & Fees                                        | \$ 27                         |
| Postmark or Date                                            |                               |

Landowner of Facility: Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240

Landowners within one (1) mile of site:

- |                                                                                                   |                                                                                              |
|---------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| ✓ Robert A. McCasland<br>1000 Ave. N<br>Eunice, New Mexico 88231                                  | ✓ Clyde Arsbom<br>219 W. Stann Plc.<br>Hobbs, New Mexico 88240                               |
| ✓ D.K. Randolph<br>1000 W. Baja Dr.<br>Hobbs, New Mexico 88240                                    | ✓ W.O. Collins, Est. % Peggy Wright<br>7632 Pontiac Plc. SW<br>Albuquerque, New Mexico 87105 |
| ✓ Carl Greenwood<br>6021 Greenwood Plc.<br>Hobbs, New Mexico 88240                                | ✓ Bill Hazelwood<br>Rt. 69-42380 St. Hwy. 18<br>Hobbs, New Mexico 88240                      |
| ✓ Antonio Cervantes<br>405 E. Lea<br>Hobbs, New Mexico 88240                                      | ✓ R.N. Magee<br>8830 Eunice Hwy.<br>Hobbs, New Mexico 88240                                  |
| ✓ Juan Huerta<br>300 E. Lea<br>Hobbs, New Mexico 88240                                            | ✓ Ruth G. Thompson<br>2700 Windsor Blvd.<br>Oklahoma City, Oklahoma 73127                    |
| ✓ Charles & Myra Meyers<br>3700 Tipton Dr.<br>Hobbs, New Mexico 88240                             | ✓ Leon Nowalsky & Charles Cabibi<br>711 Aurora Ave. Ste. A<br>Metairie, Louisiana 70005-0000 |
| ✓ M.H. McGrail &<br>E. Kornegay, Trust % Nations Bank<br>500 N. Main<br>Roswell, New Mexico 88201 |                                                                                              |

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

ROBERT H. MCCASLAND  
1000 AVE N  
EUNICE, NEW MEXICO  
88231

4a. Article Number 2 576 998 027

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9 SEP - 98  
1998

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Robert H. McCasland

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

RUTH G. THOMPSON  
2700 WINDSOR BLVD  
OKLAHOMA CITY, OKLA  
73127

4a. Article Number 2 576 998 037

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9-8-98  
1998

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Ruth G. Thompson

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

CHARLES MEYERS  
3700 TIPTON DR.  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2 576 998 038

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9/10/98  
1998

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Charles Meyers

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

W.O. COLLINS, EST.  
710 PEGGY WRIGHT  
7632 PONTIAC PK. SW  
ALBUQUERQUE, NEW MEXICO 87105

4a. Article Number

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Roberto  
8301 Eunice Highway  
Hobbs, New Mexico 88240



**REASON CHECKED**

- Incorrect ☐ Falsed ☐  
Addressee unknown ☐  
Insufficient Address ☐  
No such street number ☐  
No such office in state ☐  
No post marked in ☐

- REASON CHECKED**
- ☐ Moved, Left No Address  
☐ Unable To Forward  
☐ Attempted - No  
☐ Unclaimed - No

Fold at the top of envelope to the right of the return address

**CERTIFIED**

Such Number

Z 576 998 033

**MAIL**

2 71-2503-1-A24 28 60 4

W.O. Collins, EST. % Peggy Wright  
7632 Pontiac Plc. SW  
Albuquerque, New Mexico 87105



0000

U.S. POSTAGE  
PAID  
HOBBS, NM  
88240  
SEP 04, '98  
AMOUNT  
**\$2.77**  
00035430-03

9/8/98

1st  
2nd  
Retn



Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

CARL GREENWOOD  
6021 GREENWOOD PIC  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2-576998 038

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery 9/8/98

5. Received By: (Print Name)

CARL GREENWOOD

6. Signature: (Addressee or Agent)

X CARL GREENWOOD

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

M. H. THE GRAIL - E. KERNES  
TRUST BANK  
500 N. MAIN  
ROSWEEL, NEW MEXICO  
88201

4a. Article Number 2-576998 039

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery 9/8/98

5. Received By: (Print Name)

X Betty Sanders

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

102595-98-B-0229

Is your RETURN ADDRESS completed on the reverse side?

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                               |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>SENDER:</b> <ul style="list-style-type: none"><li>■ Complete items 1 and/or 2 for additional services.</li><li>■ Complete items 3, 4a, and 4b.</li><li>■ Print your name and address on the reverse of this form so that we can return this card to you.</li><li>■ Attach this form to the front of the mailpiece, or on the back if space does not permit.</li><li>■ Write "Return Receipt Requested" on the mailpiece below the article number.</li><li>■ The Return Receipt will show to whom the article was delivered and the date delivered.</li></ul> |  | <p>I also wish to receive the following services (for an extra fee):</p> <ol style="list-style-type: none"><li><input type="checkbox"/> Addressee's Address</li><li><input type="checkbox"/> Restricted Delivery</li></ol> <p>Consult postmaster for fee.</p> |  |
| 3. Article Addressed to:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 4a. Article Number 2-576998 038                                                                                                                                                                                                                               |  |
| RETURN RECEIPT REQUESTED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | 4b. Service Type                                                                                                                                                                                                                                              |  |
| <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured                                                                                                                                                                                        |  |
| <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | 7. Date of Delivery 9/8/98                                                                                                                                                                                                                                    |  |
| 5. Received By: (Print Name)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | 8. Addressee's Address (Only if requested and fee is paid)                                                                                                                                                                                                    |  |
| X CARL GREENWOOD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                               |  |
| 6. Signature: (Addressee or Agent)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                               |  |
| X CARL GREENWOOD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                                                               |  |

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

D. K. RANDOLPH  
1000 W. BATA DR.  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2 526 445 341

RETURN REC. REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9/5/98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X D. K. Randolph

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

JUAN HUERTA  
300 E. LEA  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2 576 448 031

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9/5/98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X Juan Huerta

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

CLYDE ARSBON  
219 W. STANN PK.  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2 576 448 032

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X Clyde Arson

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

ANTONIO CERVANTES  
405 E. LEA  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2576 998 036

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

8/5/88

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

*Antonio Cervantes*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

R.N. Magee  
8830 EUNICE HWY.  
HOBBS, NEW MEXICO  
88240

4a. Article Number

2576 998 036

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9/8

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

*Roy Magee*  
*X Roy Magee*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BILL HAZELWOOD  
Rt. 69-42380 ST. HWY 18  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2576 998 034

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9/8

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

*Billy D. Hazelwood*  
*X B.D. Hazelwood*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

2 576 998 029

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
 LEON NOWALSKI + CHARLES CABBI

Street & Number  
 711 AURORA AVE STE. A

Post Office, State, & ZIP Code  
 METAIRIE, LOUISIANA 70005-0001

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 277

Postmark or Date

PS Form 3800, April 1995

2 576 995 391

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
 D. K. RANDOLPH

Street & Number  
 1000 W. BATA DR

Post Office, State, & ZIP Code  
 HOBBS NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 277

Postmark or Date

PS Form 3800, April 1995

2 576 998 026

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
 CARL GREENWOOD

Street & Number  
 6021 GREENWOOD PK

Post Office, State, & ZIP Code  
 HOBBS, NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 277

Postmark or Date

PS Form 3800, April 1995

2 576 998 026

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
 M. H. MCGRAIL + E. KORMEGAY TRUST

Street & Number  
 500 N. MAIN

Post Office, State, & ZIP Code  
 ROSWELL, NM 88201

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 277

Postmark or Date

PS Form 3800, April 1995

2 576 998 026

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
 ANTONIO CERVANTES

Street & Number  
 405 E. LER

Post Office, State, & ZIP Code  
 HOBBS, NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 277

Postmark or Date

PS Form 3800, April 1995

2 576 998 032

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
 CLYDE ARSBON

Street & Number  
 219 W. STANN PK

Post Office, State, & ZIP Code  
 HOBBS NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 277

Postmark or Date

PS Form 3800, April 1995

2 576 998 034

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
 BILL HOZELWOOD

Street & Number  
 RT. 69-42380 STHWY. 18

Post Office, State, & ZIP Code  
 HOBBS NM 88240

Postage \$ C

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 277

Postmark or Date

PS Form 3800, April 1995

2 576 998 036

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
 R. N. MAGEE

Street & Number  
 8830 FUNICE HWY

Post Office, State, & ZIP Code  
 HOBBS NM 88240

Postage \$ 2

Certified Fee C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 277

Postmark or Date

PS Form 3800, April 1995

2 576 998 038

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to  
 CHARLES MEYERS

Street & Number  
 3700 TIPTON DR.

Post Office, State, & ZIP Code  
 HOBBS NM 88240

Postage \$ C

Certified Fee NM C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered C

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees \$ 277

Postmark or Date

PS Form 3800, April 1995

Z 576 998 027

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                       |
|-------------------------------------------------------------|-----------------------|
| Sent to                                                     | ROBERT P. MCCASLAND   |
| Street & Number                                             | 1000 AVE N            |
| Post Office, State, & ZIP Code                              | ALBUQUERQUE, NM 88231 |
| Postage                                                     | \$ L                  |
| Certified Fee                                               | \$ 2.35 NM            |
| Special Delivery Fee                                        | SEP                   |
| Restricted Delivery Fee                                     | 1000                  |
| Return Receipt Showing to Whom & Date Delivered             | L                     |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                       |
| TOTAL Postage & Fees                                        | \$ 2.77               |
| Postmark or Date                                            | SEP 10 1995           |

PS Form 3800, April 1995

Z 576 998 037

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                           |
|-------------------------------------------------------------|---------------------------|
| Sent to                                                     | RUTH G. THOMPSON          |
| Street & Number                                             | 2700 WINDSOR BLVD         |
| Post Office, State, & ZIP Code                              | OKLAHOMA CITY, OKLA 73127 |
| Postage                                                     | \$ L                      |
| Certified Fee                                               | \$ 2.35 NM                |
| Special Delivery Fee                                        | SEP                       |
| Restricted Delivery Fee                                     | 1000                      |
| Return Receipt Showing to Whom & Date Delivered             | L                         |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                           |
| TOTAL Postage & Fees                                        | \$ 2.77                   |
| Postmark or Date                                            | SEP 10 1995               |

PS Form 3800, April 1995

Z 576 998 039

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                 |
|-------------------------------------------------------------|-----------------|
| Sent to                                                     | JUAN HUERTA     |
| Street & Number                                             | 300 W LEA       |
| Post Office, State, & ZIP Code                              | HOBBS, NM 88241 |
| Postage                                                     | \$ L            |
| Certified Fee                                               | \$ 2.35 NM      |
| Special Delivery Fee                                        | SEP             |
| Restricted Delivery Fee                                     | 1000            |
| Return Receipt Showing to Whom & Date Delivered             | L               |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                 |
| TOTAL Postage & Fees                                        | \$ 2.77         |
| Postmark or Date                                            | SEP 10 1995     |

PS Form 3800, April 1995

Z 576 998 033

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                          |
|-------------------------------------------------------------|--------------------------|
| Sent to                                                     | W. D. COLYNS, EST WRIGHT |
| Street & Number                                             | 7632 PONTIAC BL SW       |
| Post Office, State, & ZIP Code                              | ALBUQUERQUE, NM 87105    |
| Postage                                                     | \$ L                     |
| Certified Fee                                               | \$ 2.35 NM               |
| Special Delivery Fee                                        | SEP                      |
| Restricted Delivery Fee                                     | 1000                     |
| Return Receipt Showing to Whom & Date Delivered             | L                        |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                          |
| TOTAL Postage & Fees                                        | \$ 2.77                  |
| Postmark or Date                                            | SEP 10 1995              |

PS Form 3800, April 1995

Z 576 997 031

US Postal Service

# Receipt for Certified Mail

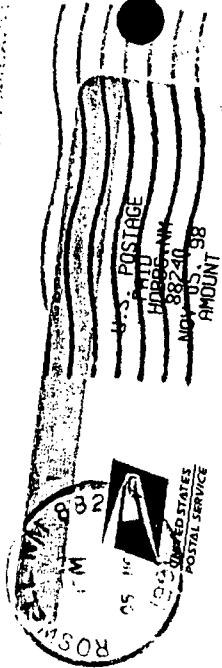
No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                    |
|-------------------------------------------------------------|--------------------|
| Sent to<br><b>KEVIN MATTINGLY</b>                           |                    |
| Street & Number<br><b>221 VICTORIA LANE</b>                 |                    |
| Post Office, State, & ZIP Code<br><b>HOBBS NM 88240</b>     |                    |
| Postage                                                     | \$ <b>2.77</b>     |
| Certified Fee                                               | <b>✓</b>           |
| Special Delivery Fee                                        |                    |
| Restricted Delivery Fee                                     |                    |
| Return Receipt Showing to Whom & Date Delivered             | <b>✓</b>           |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                    |
| TOTAL Postage & Fees                                        | \$ <b>2.77</b>     |
| Postmark or Date                                            | <b>NOV 11 1998</b> |

PS Form 3800, April 1995

NICE NOV  
NM 88240



\$2.77  
00034487-01

UNCLAIMED  
KEVIN MATTINGLY  
221 VICTORIA LANE  
HOBBS, NM 88240

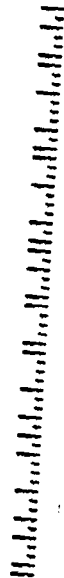
Fold at line over top of envelope to  
the right of the return address

**CERTIFIED**

Z 576 997 031

**MAIL**

MATTINGLY, KEVIN  
PO BOX 1294  
HOBBS NM 88241-1294  
NOTIFY SENDER OF NEW ADDRESS  
1998 04 11/07/98



MEMORANDUM OF MEETING OR CONVERSATION

☒ Telephone

☐ Personal

Time

10:35

Date

10-30-98

Originating Party

Marilyn Kirby

Other Parties

John & Robert

Subject

Sample Hazlewoods well  
For BTEX TPH

Discussion

For Ar Ba cd Cr Pb Hg Se Ag Zn Fe  
Major Cations Anions Ca Mg Na K Hco<sub>3</sub> Cl SO<sub>4</sub>  
TDS PH Conductivity  
✓ 1038 mg/l

Conclusions or Agreements

Distribution

Signed

Marilyn Kirby



NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

October 27, 1998

**CERTIFIED MAIL**  
**RETURN RECEIPT NO. P-326-936-473**

Mr. Bill and Ms. Wilma Hazlewood  
Rt. 69, 42380 State Hwy 18  
Hobbs, NM 88240

Re: **Commercial Landfarm Permit Application**  
**L&J Landfarm**  
**N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South, Range 38**  
**East, NMPM, Lea County, New Mexico**

Dear Mr. and Ms. Hazelwood:

The Oil Conservation Division (OCD) has received your protest to the above referenced landfarm application received by the OCD on September 21, 1998. The OCD has included your name on the list of intervenors in this case and as such you will receive copies of all correspondence concerning the application. The OCD will continue to process the application until it is determined to be administratively approvable or denied. If the permit is administratively denied, the applicant will be notified and it will be its responsibility to request a hearing appealing the denial if it so desires. If the application is determined to be administratively approvable, the OCD will notify the applicant and all intervenors of the conditions under which the permit could be issued. All intervenors will be allowed fifteen (15) days from receipt of the determination to submit final comments on the conditions or request a public hearing in lieu of administrative approval. A request for a public hearing must be in writing and must include the reasons why a hearing should be held.

The OCD would appreciate your input on all environmental and public health issues relating to the application. Please be advised that land use concerns are not within the jurisdiction of the OCD and cannot be considered. Land use issues are the sole jurisdiction of local or county governments. In addition, the movement of goods and materials across state lines is protected by the commerce clause of the U.S. Constitution and may not be subject to OCD regulation.

If you have any questions or comments, please do not hesitate to contact me at (505) 827-7152.

Sincerely:

*Monty Kelly for Roger Anderson*

Roger C. Anderson, Chief  
Environmental Bureau

xc: **OCD Hobbs**  
**L&J Landfarm**



SEP 21 1998

September 15, 1998

Energy Minerals and Natural Resources Department  
Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, N. M. 87505

Attention: Lori Wrotenbery

Dear Ms. Wrotenbery,

I am writing concerning the Application for Waste Management Facility submitted by J. & L. Landfarm, 8301 Eunice Highway, Hobbs, N. M. 88240, contact person Judy L. Roberts, located N2/4, N2/4 Section 9/10 Township 20 Range 38.

I am against the installation of this facility for the following reasons. I believe it will contaminate the water supply and have a bad odor.

In attachment #11 of the application, it states the depth of the water to be 80 to 120 feet and hardly any water, if any. I disagree with this because I have a water well within at least 300 feet of the proposed site used for domestic purposes. Water is at a depth of 42 feet. Enclosed is a copy of the well record. Within 600 feet or more of the proposed site, Mr. Zamora has a water well for his livestock. The depth of this well is about the same as mine. I know of another well a little over a quarter of a mile from the site. In all, counting the three wells I just mentioned, I know of at least 9 domestic water wells in section 11 which is east of the proposed site. The underground water supply flows from the northwest to the southeast so any contamination would get in our wells. Also, the city of Eunice has wells that supply part of their city water within a mile of the proposed site.

J. & L. Landfarm state that two dry holes were drilled in the 1960s. They say both were dry and still open. However, oil companies consider a well dry if there is not enough water to supply a drilling rig. Perhaps they are not really dry, but have a low amount of water.

The city of Hobbs is being forced to close the local landfill because the water table is too close to the surface. Why should J. & L. Landfarm be able to contaminate the underground water?

J. & L. Landfarm state in #7 that there is no watercourse, lakebed, sinkhole or other depression on the proposed site. This is not true because the southeast corner of the landfarm will be on the west edge of a dry lakebed. I have enclosed a topographic map the area. Rainwater from the proposed site drains into this lakebed, and at times water stands in it.

I am very concerned about the odor. I know of a waste facility about 35 miles West of Hobbs on the Carlsbad Highway that has an odor that would gag a maggot. My home is located within 300 feet of the proposed site. I should not be forced to move because some one has put a fowl unbearable odor across from my home.

In item #12 Notice Requirements, J. & L. Landfarm gives a list of landowners notified within one mile of the proposed site. They did not notify all the landowners. They did not notify:

Kevin Mattingly  
Wilma Hardin  
Adrian Zamora  
Rubin Calvillo  
Debbie Dominguez  
Victor Reza  
Gary Henderson  
R.E. Hudson

I got these names from a map on file at the County Assessors Office. This is only the people east of the site. I do not have a map of the area Northwest, South, or Southeast of the site, so I am sure there are more people that should be notified. I also believe the city of Eunice should be notified.

There is a discrepancy between J. & L. Landfarm's letter of notification to us and the application,. The application states the landfarm will be 240 acres and the letter states the landfarm will be 280 acres.

Please do not grant their request for a landfarm. I believe this landfarm will contaminate my well water and cause an unbearable stench. As a result ,

I won't be able to live on my land and it will be worthless.. Thank you for your time.

Sincerely,

B.D. Hazelwood

Wilma Hazelwood

Bill & Wilma Hazelwood

Rt. 69 N2380 St Hwy 18

Hobbs N.M. 88240

505-393-5998

*Received Sept. 8, 1998*

**NOTIFICATION OF APPLICATION TO STATE OF NEW MEXICO TO INSTALL  
LANDFARM WASTE MANAGEMENT FACILITY.**

This is to notify all landowners within one (1) mile of proposed facility that application has been made to State of New Mexico to construct a landfarm waste management facility.

**DESCRIPTION OF FACILITY:**

Facility will be a surface impoundment for the disposal of solid oil treated dirt. Area to be designated for facility will be two-hundred & eighty (280) acres.

**LOCATION OF FACILITY:**

Legal description of area: N2/4 N2/4 Section 9/10 Township 20 Range 38, Lea County, New Mexico.

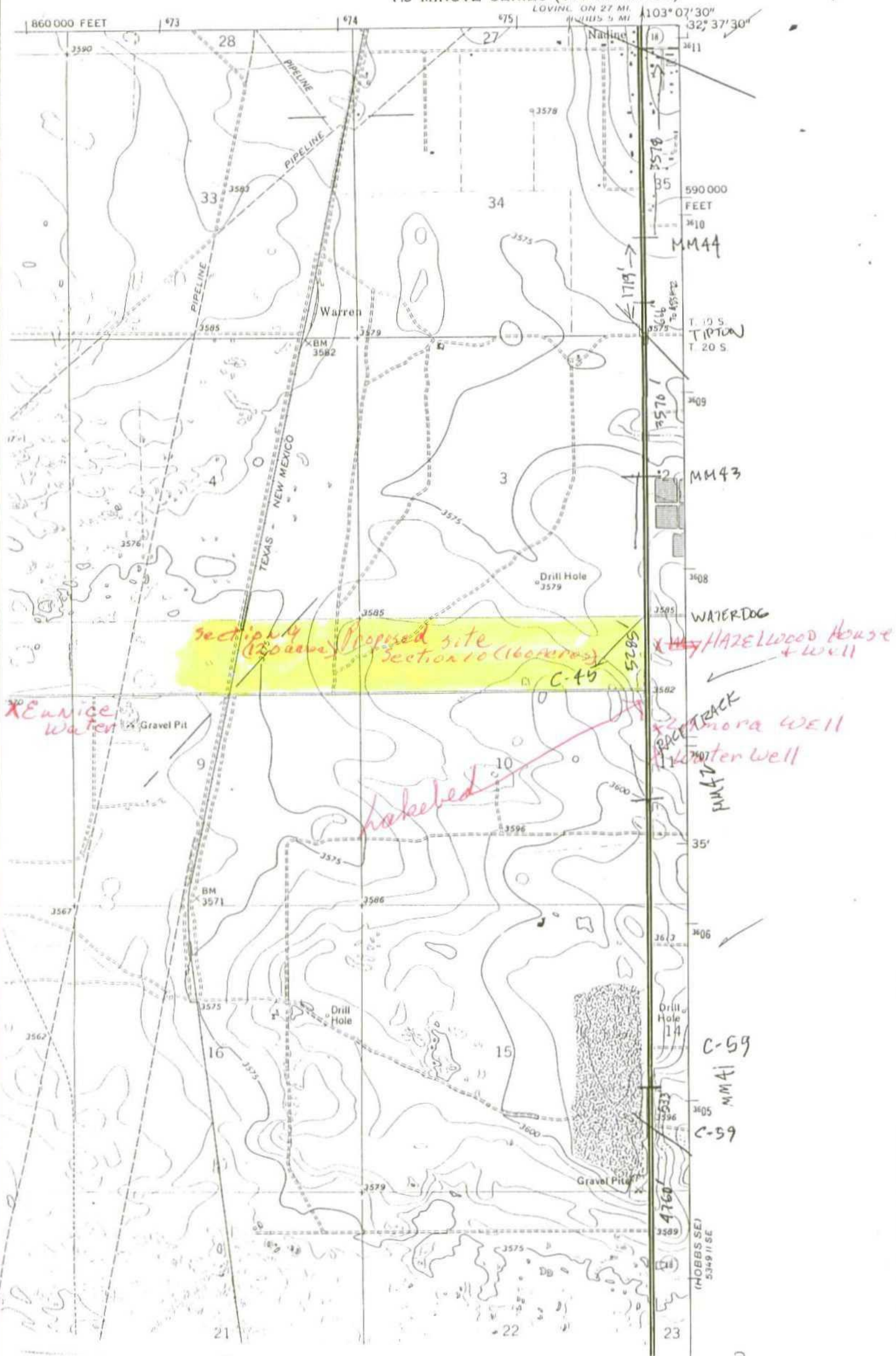
**OPERATOR OF FACILITY:** J&L Landfarm

**CONTACT PERSON:** Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240  
Tele(505-393-9697)

For a viewing of the completed application, you may call or write me at the above address or contact the local Oil Conservation Division at 1000 W. Broadway, Hobbs, New Mexico, (505)393-6161.

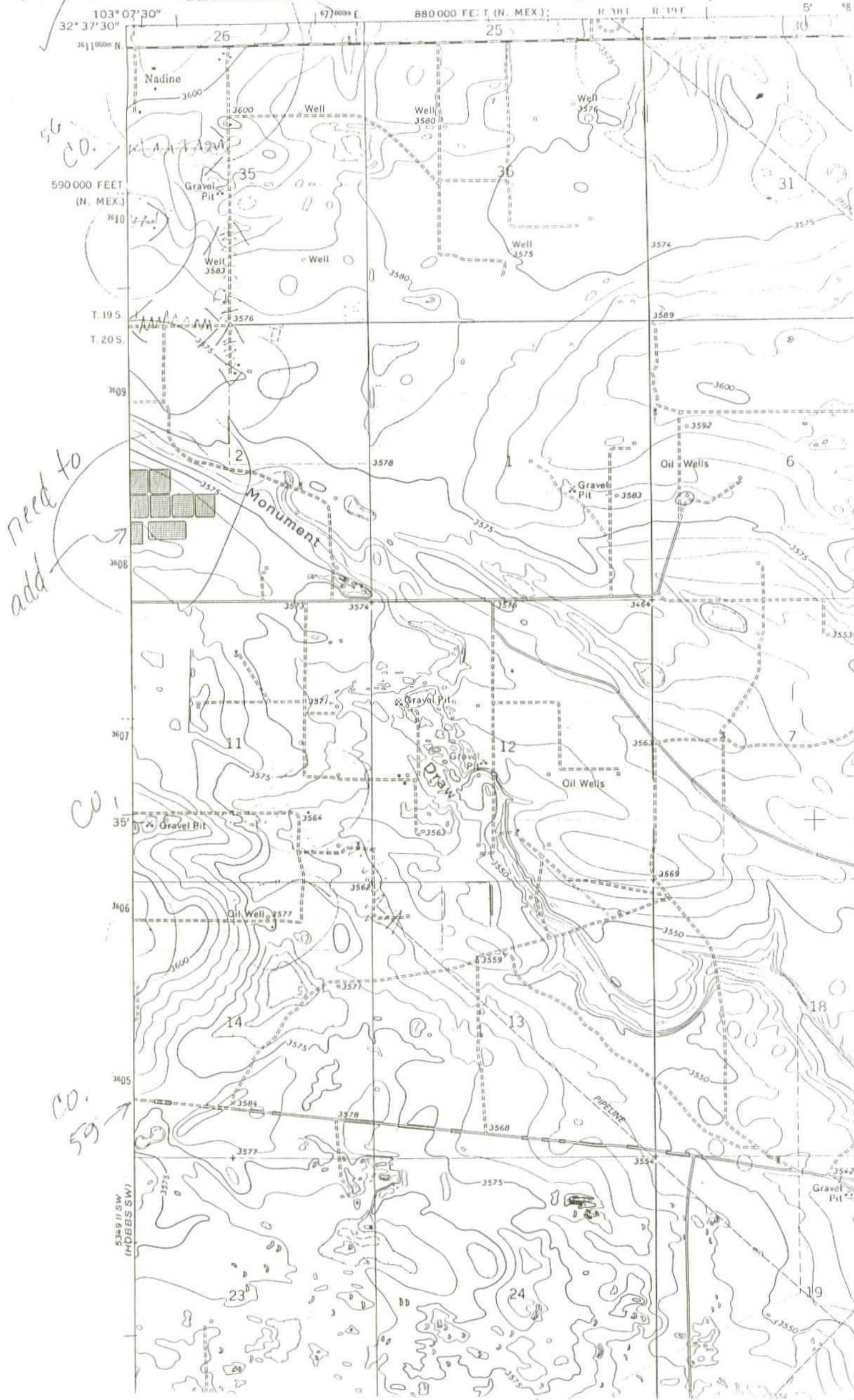
Judy L. Roberts

5349 (LINE  
(HOBBS EAST)





DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY



need to  
add

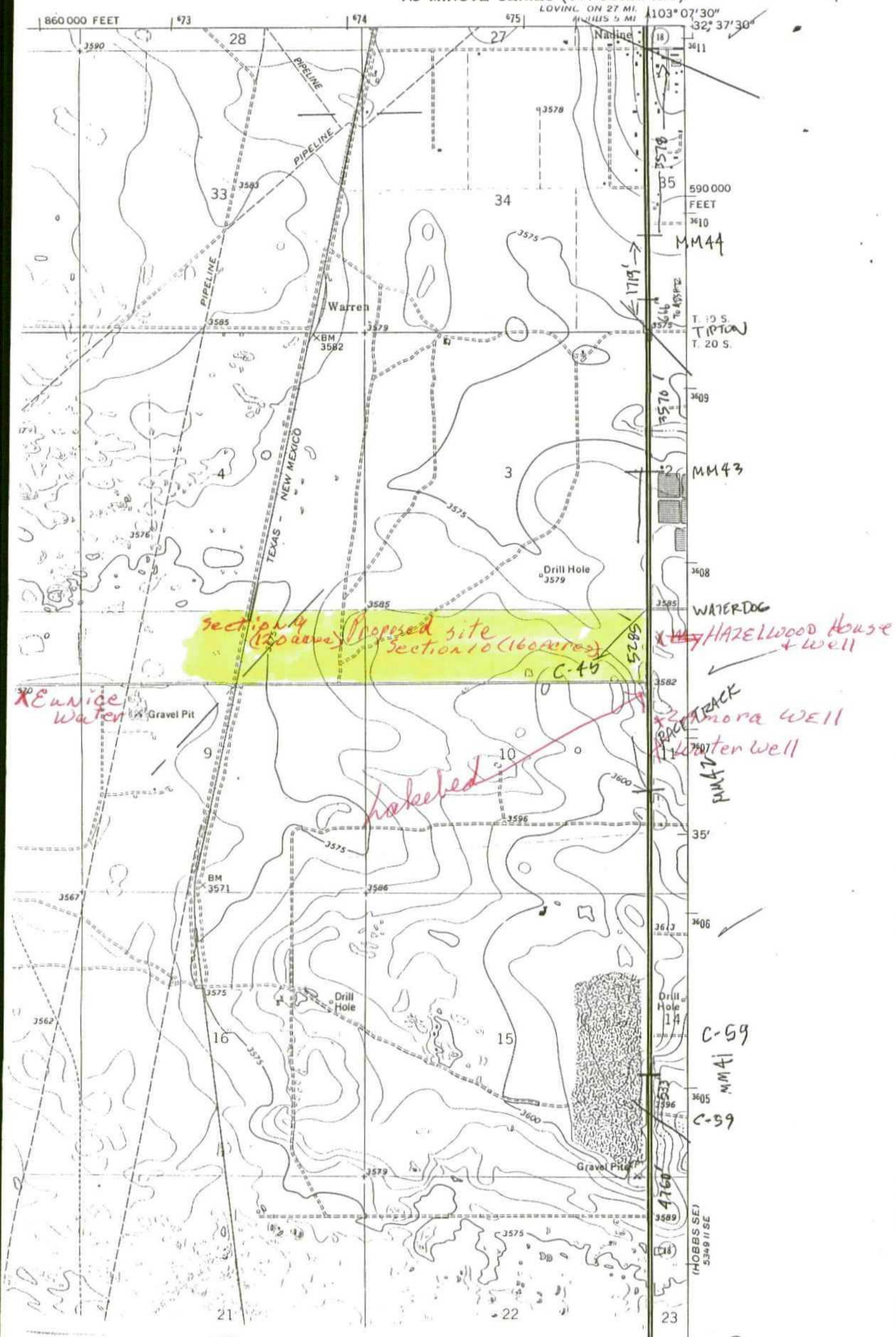
CO.  
56

CO.  
59

CO.  
59

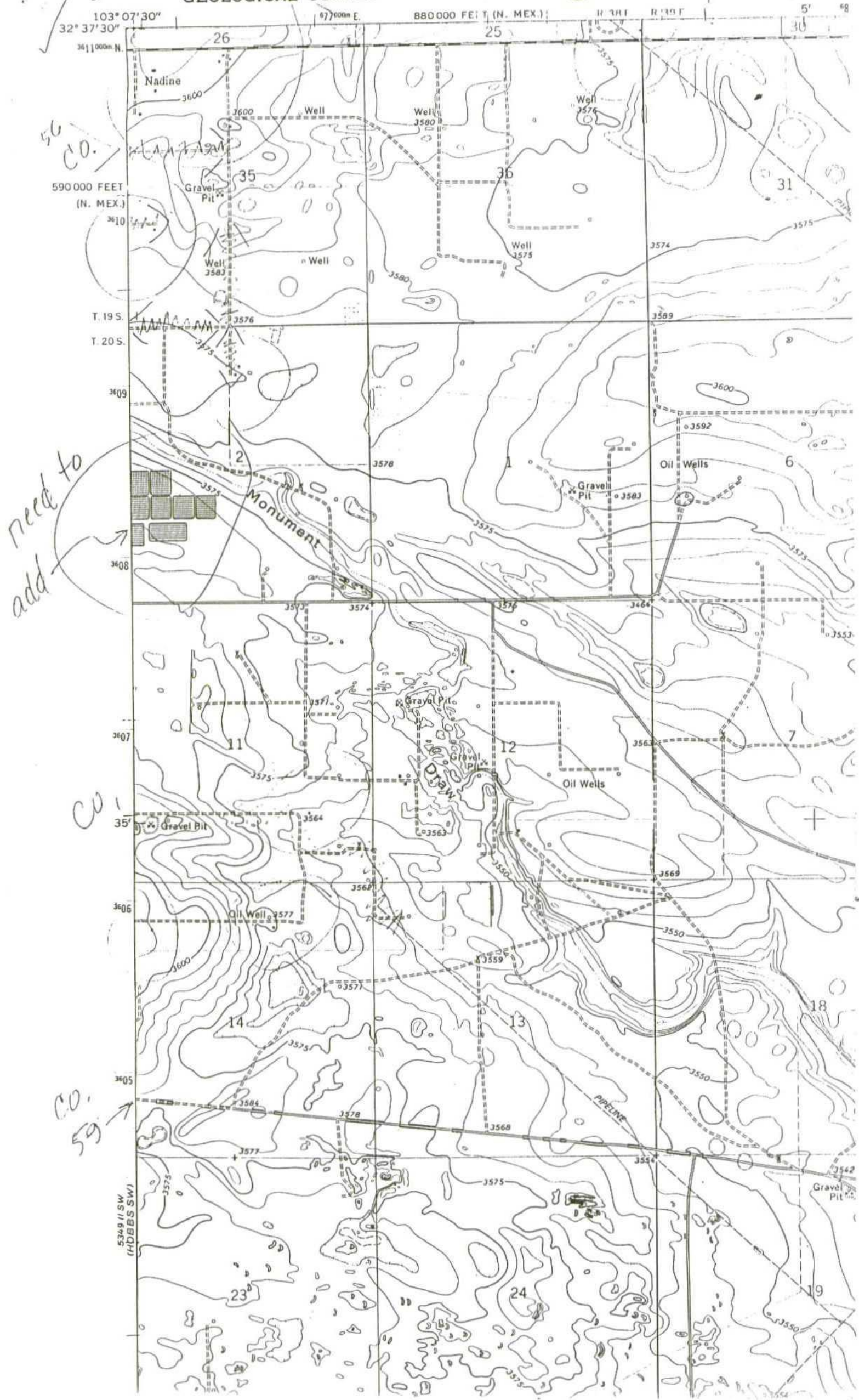


5349 LINE  
(HOBBS EAST)





DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY





STATE ENGINEER OFFICE  
WELL RECORD

## Section 1. GENERAL INFORMATION

(A) Owner of well B. D. Hazelwood Owner's Well No. \_\_\_\_\_  
 Street or Post Office Address P.O. Box 5458  
 City and State Hobbs, N.M. 88240

Well was drilled under Permit No. L-10,656 and is located in the:

- a. NW  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$  of Section 11 Township 20 Range 38 N.M.P.M.  
 b. Tract No. \_\_\_\_\_ of Map No. \_\_\_\_\_ of the \_\_\_\_\_  
 c. Lot No. \_\_\_\_\_ of Block No. \_\_\_\_\_ of the \_\_\_\_\_  
 Subdivision, recorded in Lea County.  
 d. X= \_\_\_\_\_ feet, Y= \_\_\_\_\_ feet, N.M. Coordinate System \_\_\_\_\_ Zone in  
 the \_\_\_\_\_ Grant.

(B) Drilling Contractor George Glasspoole License No. WD-571

Address 601 W. Cope Place, Hobbs, N.M. 88242

Drilling Began 4-22-97 Completed 4-24-97 Type tools Cable Size of hole 8  $\frac{1}{2}$ "

Elevation of land surface or \_\_\_\_\_ at well is \_\_\_\_\_ ft. Total depth of well 66'

Completed well is ☒ shallow ☐ artesian. Depth to water upon completion of well 42'

## Section 2. PRINCIPAL WATER-BEARING STRATA

| Depth in Feet |     | Thickness<br>in Feet | Description of Water-Bearing Formation | Estimated Yield<br>(gallons per minute) |
|---------------|-----|----------------------|----------------------------------------|-----------------------------------------|
| From          | To  |                      |                                        |                                         |
| 42'           | 66' | 24'                  | Water Sand                             | 12 GPM                                  |
|               |     |                      |                                        |                                         |
|               |     |                      |                                        |                                         |
|               |     |                      |                                        |                                         |

## Section 3. RECORD OF CASING

| Diameter<br>(inches) | Pounds<br>per foot | Threads<br>per in. | Depth in Feet |        | Length<br>(feet) | Type of Shoe | Perforations |     |
|----------------------|--------------------|--------------------|---------------|--------|------------------|--------------|--------------|-----|
|                      |                    |                    | Top           | Bottom |                  |              | From         | To  |
| 5 1/2"               |                    |                    | +18"          | 66'    | 67' 6"           |              | 26'          | 66' |
|                      |                    |                    |               |        |                  |              |              |     |
|                      |                    |                    |               |        |                  |              |              |     |

## Section 4. RECORD OF MUDDING AND CEMENTING

| Depth in Feet |     | Hole<br>Diameter | Sacks<br>of Mud | Cubic Feet<br>of Cement | Method of Placement |
|---------------|-----|------------------|-----------------|-------------------------|---------------------|
| From          | To  |                  |                 |                         |                     |
| 0"            | 66' | 8 1/2"           | 0               | None                    |                     |
|               |     |                  |                 |                         |                     |
|               |     |                  |                 |                         |                     |

## Section 5. PLUGGING RECORD

Plugging Contractor \_\_\_\_\_  
 Address \_\_\_\_\_  
 Plugging Method \_\_\_\_\_  
 Date Well Plugged \_\_\_\_\_  
 Plugging approved by: \_\_\_\_\_

State Engineer Representative

| No. | Depth in Feet |        | Cubic Feet<br>of Cement |
|-----|---------------|--------|-------------------------|
|     | Top           | Bottom |                         |
| 1   |               |        |                         |
| 2   |               |        |                         |
| 3   |               |        |                         |
| 4   |               |        |                         |

## FOR USE OF STATE ENGINEER ONLY

Date Received \_\_\_\_\_

Quad \_\_\_\_\_ FWL \_\_\_\_\_ FSL \_\_\_\_\_

File No. \_\_\_\_\_ Use \_\_\_\_\_ Location No. \_\_\_\_\_

[illegible]

The undersigned hereby certifies that, to the best of his knowledge and belief, the foregoing is a true and correct record of the above described hole.

INSTRUCTIONS: This form should be executed in triplicate, preferably typewritten, and submitted to the appropriate district office of the State Engineer. All sections, except Section 5, shall be answered as completely and accurately as possible when any well is drilled, repaired or deepened. When this form is used as a plugging record, only Section 1(a) and Section 5 need be completed.



**NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT**

October 27, 1998

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

**CERTIFIED MAIL**

**RETURN RECEIPT NO. P-326-936-472**

Ms. Judy L. Roberts  
L&J Landfarm  
8301 Eunice Highway  
Hobbs, NM 88240

**RE: L&J Landfarm  
Commercial Landfarm Permit Application  
N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South,  
Range 38 East, NMPM, Lea County, New Mexico**

Dear Ms. Roberts:

The New Mexico Oil Conservation Division (OCD) has received L&J Landfarm's application for a commercial waste management facility dated May 10, 1998 and supplemental information. The application proposes the construction of a landfarm soil bio-remediation 711 facility. The proposed facility is located in the N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South, Range 38 East, NMPM, Lea County, New Mexico.

The OCD has reviewed the information provided with the application and concerns submitted by a neighboring landowner. The OCD requires additional information to complete the application Form C-137 that has been filed. L&J Landfarm must submit the following information:

1. Total dissolved solids (TDS) concentration of the ground water most likely to be affected by any discharge. Include the source of the information and how it was determined.
2. Provide the flow direction of the ground water most likely to be affected by any leaks. Include the source of the information and how it was determined.
3. Provide a recent water quality analysis of the ground water, including the name of the analyzing laboratory, sample location, and date the sample was taken. This requirement is made so that background information is available in case of leaks or charges of neighboring groundwater contamination.
4. Provide a detailed diagram and description of flood protection measures (berms, drainage channels, ect.), for at least a 100 year flood event. Specifically how will L&J landfarm prevent runoff and run-on of precipitation and in addition prevent standing water that may lead to infiltration on the southeast corner of the property where the closed depression is shown on the attached map.

- xc with attachments: Hobbs OCD Office  
Mr. Bill and Ms. Wilma Hazelwood



NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

November 2, 1998

**CERTIFIED MAIL**

**RETURN RECEIPT NO. P-326-936-477**

Ms. Judy L. Roberts  
J&L Landfarm  
8301 Eunice Highway  
Hobbs, NM 88240

**RE: Public Notice for J & L Landfarm  
Commercial Landfarm Permit Application  
N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South, Range 38  
East, NMPM, Lea County, New Mexico**

Dear Ms. Roberts:

The New Mexico Oil Conservation Division (OCD), has received J&L Landfarm's application for a commercial waste management facility dated May 10, 1998 and supplemental information. The application proposes the construction of a landfarm soil remediation 711 facility. The facility is located in the N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South, Range 38 East, NMPM, Lea County, New Mexico.

Based on the information provided with the application Form C-137 the OCD has prepared a public notice statement that J&L Landfarm must published in the Lovington Daily Record and in the Santa Fe New Mexican newspapers. In addition, a notice shall be sent certified mail to all landowners within one mile of the proposed expansion area and due to the proximity of a Eunice city water well J&L Landfarm will notify the City of Eunice.

J&L Landfarm must send the original certified affidavit of publication from both the Lovington Daily Record and the Santa Fe New Mexican to the OCD Santa Fe office and a copy to the appropriate District office. In addition, J&L Landfarm must send copies of the postal receipt and signed certified return receipt from each of the landowners to both the OCD Santa Fe office and appropriate District office.

If you have any questions please do not hesitate to contact me at (505) 827-7153.

Sincerely,

*Martyne J. Kielling*  
Martyne J. Kielling  
Environmental Geologist

attachments

xc with attachments: Hobbs OCD Office  
Mr. Bill and Ms. Wilma Hazlewood

**NOTICE OF PUBLICATION  
STATE OF NEW MEXICO  
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION**

Notice is hereby given that pursuant to the New Mexico Oil Conservation Division Regulations, the following application has been submitted to the Director of the Oil Conservation Division, 2040 S. Pacheco, Santa Fe, New Mexico 87505, Telephone (505) 827-7131:


**J&L Landfarm, Judy L Robert, Landowner, 8301 Eunice Highway, Hobbs, New Mexico, 88240, has submitted for approval an application to construct and operate a Rule 711 commercial solids landfarm remediation facility located in the N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South, Range 38 East, NMPM, Lea County, New Mexico. Hydrocarbon contaminated soils associated with oil and gas production will be remediated by spreading them on the ground surface in 6 inch lifts or less and periodically disking them to enhance biodegradation of contaminants. Ground water most likely to be affected by any accidental discharges at the surface is estimated to be at a depth of 42 to 69 feet with a total dissolved solids concentration estimated to be at 1038 parts per million. The facility is underlain by the Triassic red beds. The permit application addresses the construction, operations, spill/leak prevention and monitoring procedures to be incorporated at the proposed site.**

Any interested person may obtain further information from the Oil Conservation Division and may submit written comments to the Director of the Oil Conservation Division at the address given above. The application may be viewed at the above address between 8:00 a.m. and 4:00 p.m., Monday thru Friday. Prior to ruling on any proposed application, the Director of the Oil Conservation Division shall allow at least thirty (30) days after the date of publication of this notice during which comments may be submitted to her and public hearing may be requested by any interested person. Request for public hearing shall set forth the reasons why a hearing shall be held. A hearing will be held if the director determines that there is significant public interest.

If no hearing is held, the Director will approve or disapprove the application based on the information available. If a public hearing is held, the Director will approve the application based on the information in the application and information presented at the hearing.

GIVEN under the Seal of New Mexico Oil Conservation Commission at Santa Fe, New Mexico, on this 2nd day of November, 1998.

**STATE OF NEW MEXICO  
OIL CONSERVATION DIVISION**

  
for **LORI WROTENBERY, Director**

SEAL

MEMORANDUM OF MEETING OR CONVERSATION

|                                                                                                                                                                                                                                                        |                                   |                           |                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|---------------------------|----------------|
| <input checked="" type="checkbox"/> Telephone                                                                                                                                                                                                          | <input type="checkbox"/> Personal | Time<br>11:40             | Date<br>7-6-98 |
| <u>Originating Party</u>                                                                                                                                                                                                                               |                                   | <u>Other Parties</u>      |                |
| Marlyne Kichling                                                                                                                                                                                                                                       |                                   | Judy Roberts              |                |
| <u>Subject</u><br>711 Permit                                                                                                                                                                                                                           |                                   |                           |                |
| <u>Discussion</u><br>Judy Needs to send in Hydro Information And A New Map<br>Also Need to Have Exact Size of land Farm 80 + ? Acres<br>to be permitted<br><br>warned Judy that Protestors will Probably Surface.<br>upon Publication of Public Notice |                                   |                           |                |
| <u>Conclusions or Agreements</u>                                                                                                                                                                                                                       |                                   |                           |                |
| <u>Distribution</u>                                                                                                                                                                                                                                    |                                   | Signed<br>Martyn J. Kelly |                |

P.O. Box 1980  
Hobbs, NM 88241-1980  
District II - (505) 748-1283  
811 S. First  
Artesia, NM 88210  
District III - (505) 334-6178  
10 Rio Brazos Road  
Albuquerque, NM 87410  
District IV - (505) 827-7131

NEW MEXICO  
Energy Minerals and Natural Resources Department  
Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

Form C-1.  
Originated 8/8.

Submit Original  
Plus 1 Copy  
to Santa Fe  
1 Copy to appropriate  
District Office

APPLICATION FOR WASTE MANAGEMENT FACILITY  
(Refer to the OCD Guidelines for assistance in completing the application)

☒ Commercial

☐ Centralized

1. Type: ☐ Evaporation ☐ Injection ☐ Other  
☒ Solids/Landfarm ☐ Treating Plant

RECEIVED  
JUL 20 1998  
Environmental Bureau  
Oil Conservation Division

2. Operator: J&L Landfarm

Address: 8301 Eunice Highway Hobbs, New Mexico 88240

Contact Person: Judy L. Roberts Phone: 505-393-9697

3. Location: N2 / 4 N2 / 4 Section 9/10 Township 20 Range 38  
Submit large scale topographic map showing exact location

4. Is this a modification of an existing facility? ☐ Yes ☒ No
5. Attach the name and address of the landowner of the facility site and landowners of record within one mile of the site.
6. Attach description of the facility with a diagram indicating location of fences, pits, dikes, and tanks on the facility.
7. Attach designs prepared in accordance with Division guidelines for the construction/installation of the following: pits or ponds, leak-detection systems, aerations systems, enhanced evaporation (spray) systems, waste treating systems, security systems, and landfarm facilities.
8. Attach a contingency plan for reporting and clean-up for spills or releases.
9. Attach a routine inspection and maintenance plan to ensure permit compliance.
10. Attach a closure plan.
11. Attach geological/hydrological evidence demonstrating that disposal of oil field wastes will not adversely impact groundwater. Depth to and quality of ground water must be included.
12. Attach proof that the notice requirements of OCD Rule 711 have been met.
13. Attach a contingency plan in the event of a release of H<sub>2</sub>S.
14. Attach such other information as necessary to demonstrate compliance with any other OCD rules, regulations and orders.
15. CERTIFICATION

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: Judy L. Roberts

Title: Landowner

Signature: Judy L. Roberts

Date: 5-10-98



ATTACHMENTS:

Amended application to prior Landfarm application:  
Map denoting where cells will be located  
Water depth and quality  
Estimated cost of closure plan

Proposed facility will accomodate two-hundred & eighty (280) acres for disposal.  
This will include a one-hundred (100) feet boundry for proper buffer zone.

Water depth estimated at 69.6 feet, for sections 9 & 10.  
Water quality: 63 ppm chloride.  
Reference: State Engineering Office, Roswell, New Mexico

Closure costs estimated at \$746.66 per active cell for 2 year period. This is to  
maintain and monitor the remediation of active cells til closure approved.

Total estimated cost for 2 year period: \$33,600.00

Bond in this amount to be submitted prior to construction of facility.

(South)

County Road C-45

West



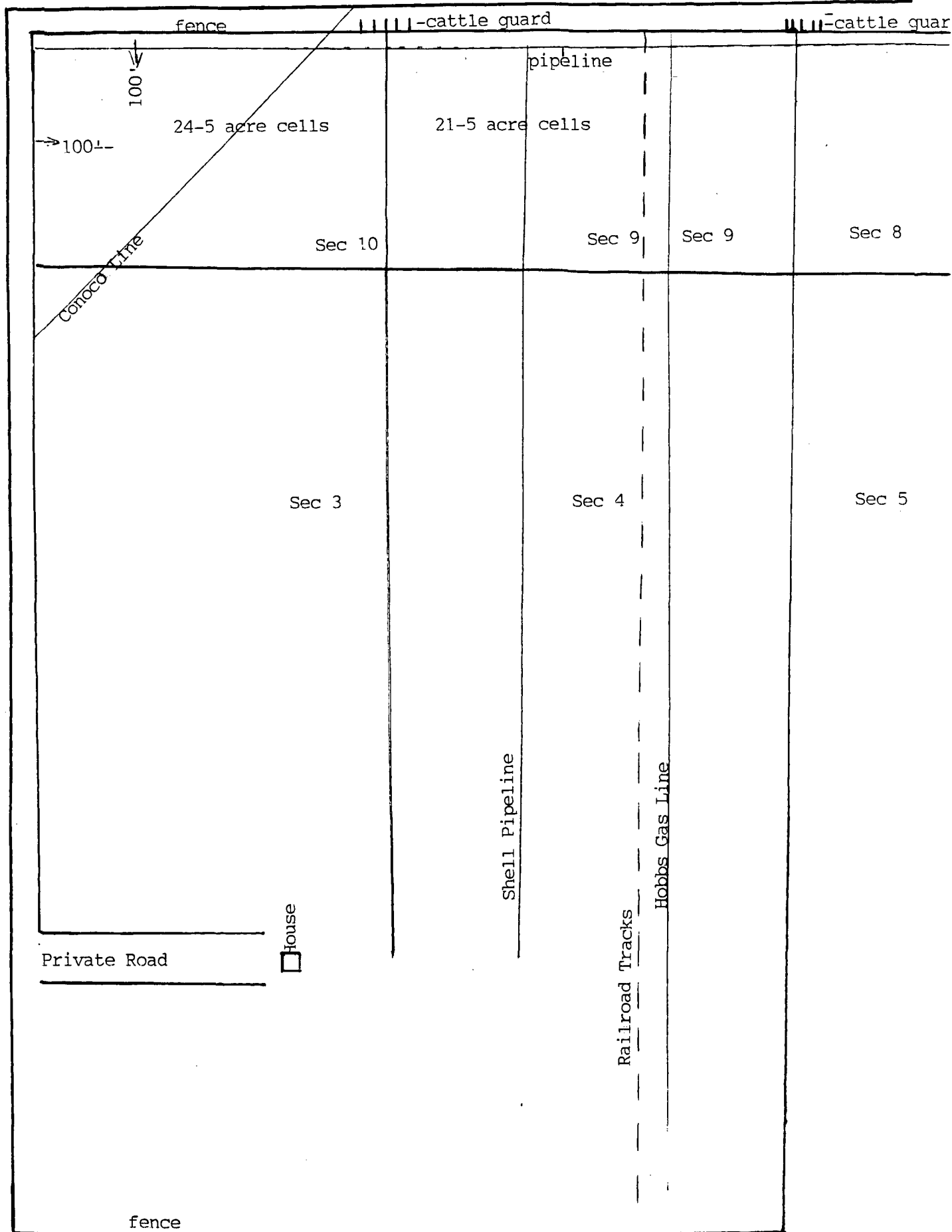
Eunice

State Hwy 18

Hobbs



(North)



P. O. Box 1980  
Hobbs, NM 88241-1980  
District II - (505) 748-1283  
8th S. First  
Artesia, NM 88210  
District III - (505) 334-6178  
10 Rio Brazos Road  
Las Alamos, NM 87410  
District IV - (505) 827-7131

NEW MEXICO  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

Form C-137  
Originated 8/8/95

RECEIVED

MAY 14 1998

Submit Origin  
Plus 1 Copy  
to Santa Fe  
1 Copy to appropriate  
District Office

Environmental Bureau

Oil Conservation Division

APPLICATION FOR WASTE MANAGEMENT FACILITY  
(Refer to the OCD Guidelines for assistance in completing the application)

☒ Commercial

☐ Centralized

1. Type: ☐ Evaporation ☐ Injection ☐ Other  
☒ Solids/Landfarm ☐ Treating Plant

2. Operator: J&L Landfarm

Address: 8301 Eunice Highway Hobbs, New Mexico 88240

Contact Person: Judy L. Roberts Phone: 505-393-9697

3. Location: N2 / 4 N2 / 4 Section 9/10 Township 20 Range 38  
Submit large scale topographic map showing exact location

4. Is this a modification of an existing facility? ☐ Yes ☒ No

5. Attach the name and address of the landowner of the facility site and landowners of record within one mile of the site.

6. Attach description of the facility with a diagram indicating location of fences, pits, dikes, and tanks on the facility.

7. Attach designs prepared in accordance with Division guidelines for the construction/installation of the following: pits or ponds, leak-detection systems, aerations systems, enhanced evaporation (spray) systems, waste treating systems, security systems, and landfarm facilities.

8. Attach a contingency plan for reporting and clean-up for spills or releases.

9. Attach a routine inspection and maintenance plan to ensure permit compliance.

10. Attach a closure plan.

11. Attach geological/hydrological evidence demonstrating that disposal of oil field wastes will not adversely impact groundwater. Depth to and quality of ground water must be included.

12. Attach proof that the notice requirements of OCD Rule 711 have been met.

13. Attach a contingency plan in the event of a release of H<sub>2</sub>S.

14. Attach such other information as necessary to demonstrate compliance with any other OCD rules, regulations and orders.

15. CERTIFICATION

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: Judy L. Roberts

Title: Landowner

Signature: Judy L. Roberts

Date: 5-10-98

# ATTACHMENTS;

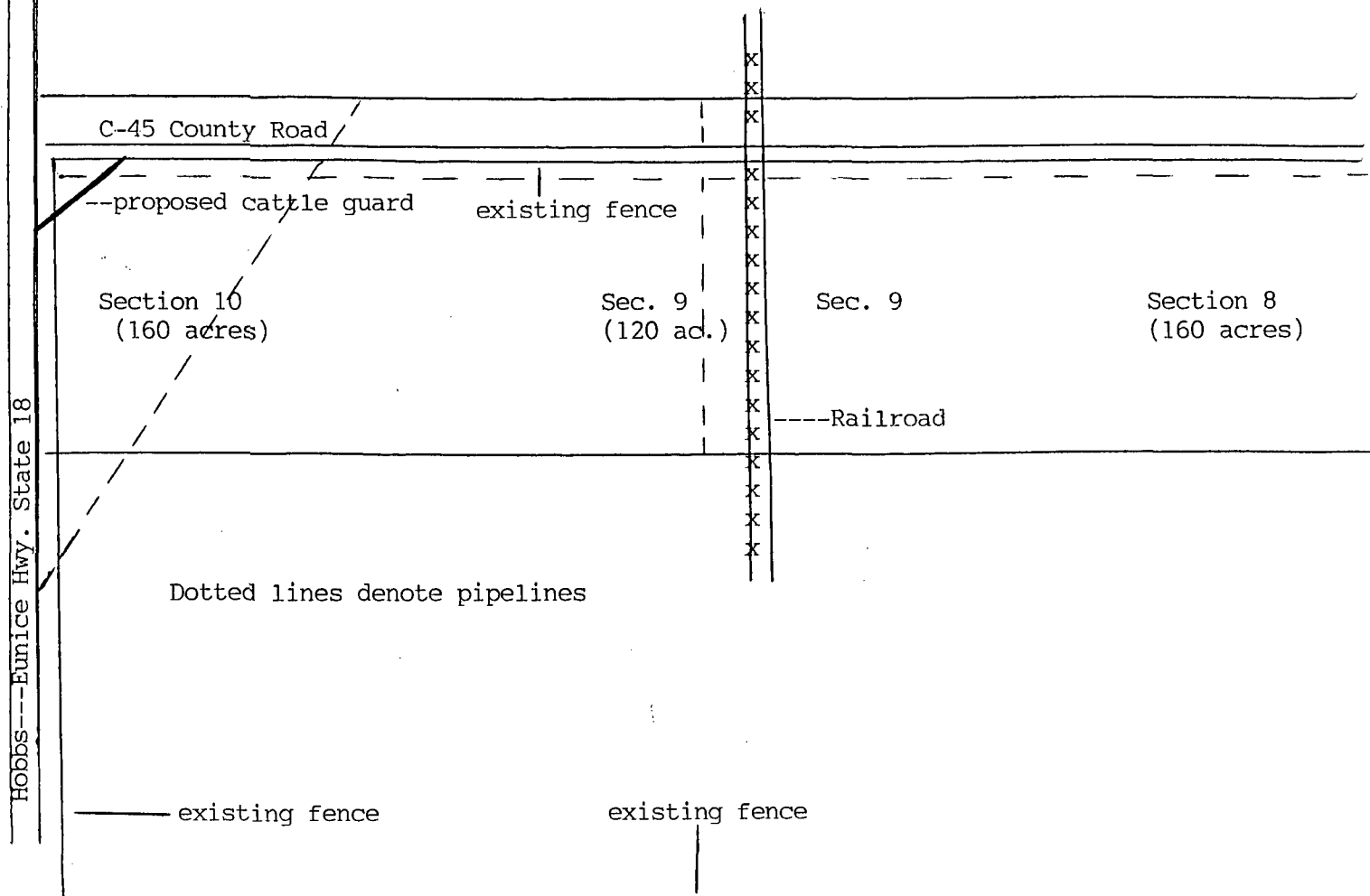
- # 6 Description of Facility w/diagram
- # 7 Facility Construction/Operation
- # 9 Routine Inspection/Maintenance Plan
- #10 Closure Plan
- #11 Depth and Quality of Water
- #12 Notice Requirements

## #6. Description of Facility

Proposed facility will be Commercial Unlined Surface Impoundment for disposal of solid oil treated soil/dirt. See diagram below of existing/proposed fences, pits dikes and tanks.

Facility will begin with eighty (80) acres for proposed site with expansion possibilities of up to two-hundred & forty (240) acres. Also, noted are any pipelines crossing or near facility.

There are no existing tanks, chemical storage areas, or any other storage/disposal facilities.



## #7. Facility Construction/Operation

Proposed facility is not located near or in any , watercourse, lakebed, sinkhole or other depression. Facility has existing fence (see diagram). New entrance will be constructed to facility with cattle guard and locked gate leading to site. Entrance will have a sign to be legible from at least fifty (50) feet and will contain the following information: 1) Name of facility, 2) Location by section, township and range, and 3) emergency phone number.

As required, facility will accomodate a buffer zone of least 100 feet of boundry of site. Also, all collections will accomodate a twenty (20) feet buffer zone of all pipelines. All pipelines are marked and posted.

Facility berms will be built to contain collected soil, and to prevent, runoff/runon. All berms will be constructed in order to contain precipitation from a one-hundred year flood of that particular area.

Prior to operation of facility all requirements for background soil samples will be taken and analyzed according to OCD/EPA methods and submitted to all appropriate agencies.

Zone used for collection of soils will be monitored according to OCD regulations and samples will be taken within six (6) months after first soils are collected. Thereafter, according to regulations samples will be taken quarterly. All detailed records of testing will kept at site and submitted to appropriate agencies and will be available to inspection. All sample boorholes will be filled according to OCD guidelines.

All operations involving the collection of soils will only be done when qualified attendant is on duty. When attendant is not present, the facility will be securely locked and inaccessible.

All contaminated soils received will be disked and spread within 72 hours of receipt. Soils will be spread on the surface according to guidelines in six inch lifts. Soils will be disked at least once every two weeks to enhance biodegradation of contaminants. Equipment will be kept available on site for proper disking and maintaining of berms and other maintenance requirements, or will be made available by qualified contractor.

Proper testing and measurement of contaminated soils will be taken and evaluated before successive lifts or other soils spread. All records of testing will be maintained at site and available for reviewing. No successive lifts will be made without authorization from OCD.

Equipment will be maintained on site to add moisture as needed to control blowing dust and enhance bioremediation or will be provided by qualified contractor. All ponding or precipitation will be removed within seventy-two (72) hours.

All records of operation of facility will be maintained at site and will adhere to OCD guidelines and be available for review. Comprehensive records for each collection will include: 1) the generator, 2) the origin, 3) date received, 4) quantity, 5) Certification of exempt status, 6) transporter, and 7) exact cell location and any addition of microbes, moisture, fertilizers, etc.

No free liquids or soil with free liquids will be accepted at facility.

Tracking of wastes collected at facility will consist of accepting only wastes accompanied by a "Certification of Waste Status" from the generator. Only oilfield contaminated soil, approved by OCD will be accepted at facility.

All loads received at facility will be accompanied by: a "Certification of Waste Status" signed by the waste generator or a "Verification of Waste Status" issued by the New Mexico Environment Department (NMED) or any other appropriate agency from another state for wastes regulated by that agency.

Transporter of load will present to operator of facility certification that wastes delivered are from the generator and no additional materials have been added.

Site will be closely monitored--no leaks or spills will occur as only dry solids will be accepted. Operator of site will notify OCD of any circumstance which could constitute hazard or contamination. Operator of site will be responsible to see that all above conditions and requirements are met.

- #9. Operator of facility will make routine inspections weekly. Other inspections of site will include after any major storm, heavy rainfall, high gusty winds, or any conditions where deemed necessary. Berms will be inspected as to check for adequacy to maintain collections. Operator will make daily routine check of logs and records. Any circumstance needing to be reported to OCD or EPA will be reported by operator according to requirements. Odors will be held at a minimum as only solids will be accepted and disked regularly with moisture added as necessary to control blowing dust.

#### #10. Closure Plan

- I. Prior to closure of landfarm facility, operator of site will submit an application for closure to OCD. Operator will abide by any and all regulations and procedures determined by OCD to ensure the exact location, by legal description, of site to be closed.
- II. Operator will abide by all regulations and submit detailed application including all procedures necessary to ensure all soils have been tested for total remediation, and ground water tested for contamination, according to all EPA guidelines. Results of all tests will be collected and documented and submitted to OCD and/or EPA as required for approval.
- III. Facility site will be maintained and monitored routinely by operator and worked in such manner to ensure remediation and controlling of contamination until such time as OCD determines it is sufficient to be closed as facility.

#### #11. Site Characteristics

Depth of water estimated to be about 80-120'(feet), if any water at all. Two dry holes drilled in the 1960's--both dry holed--are still open. In 1954, Conoco drilled in Section 10 for oil well, and at same time drilled water well. Hole is still open and is dry. Information

derived from local water well reports and sources.

Soil type of area is caliche.

Landowner of Facility: Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240

Landowners within one(1) mile of site:

Robert A. McCasland  
1000 Ave. N  
Eunice, New Mexico 88231

D.K. Randolph  
1000 W. Baja Dr.  
Hobbs, New Mexico 88240

Carl Greenwood  
6021 Greenwood Plc.  
Hobbs, New Mexico 88240

Antonio Cervantes  
405 E. Lea  
Hobbs, New Mexico 88240

Juan Huerta  
300 E. Lea  
Hobbs, New Mexico 88240

Charles & Myra Meyers  
3700 Tipton Dr.  
Hobbs, New Mexico 88240

M.H. McGrail &  
E. Kornegay, Trust  
Sunwest Bank  
Roswell, New Mexico 88201

Clyde Arson  
219 W. Stann Plc.  
Hobbs, New Mexico 88240

W.O. Collins, Est. %  
Peggy Wright  
7632 Pontiac Plc. SW  
Albuquerque, New Mexico 87105

Bill Hazelwood  
Rt. 69-42380 St. Hwy. 18  
Hobbs, New Mexico 88240

R.N. Magee  
8830 Eunice Hwy.  
Hobbs, New Mexico 88240

Ruth G. Thompson  
2700 Windsor Blvd.  
Oklahoma City, Okla. 73127

Leon Nowalsky &  
Charles Cabibi  
711 Aurora Ave Ste. A



The image shows a full page of a newspaper, specifically a section containing numerous small advertisements and notices. The text is arranged in a grid-like fashion, with many entries containing names, addresses, and phone numbers. Some larger, bolded headings are visible, such as "TONT OPER" and "WARREN UNIT". The page is framed by a thick black border, and the overall appearance is that of a historical document from the mid-20th century.



P.O. Box 1980  
Hobbs, NM 88241-1980  
District II - (505) 748-1283  
811 S. First  
Artesia, NM 88210  
District III - (505) 334-6178  
10 Rio Brazos Road  
ec, NM 87410  
District IV - (505) 827-7131

NEW MEXICO  
Energy Minerals and Natural Resources Department  
Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

RECEIVED

MAY 13 1998

Environmental Bureau  
Oil Conservation Division

Form C-137  
Originated 8/8/95

Submit Origin  
Plus 1 Copy  
to Santa Fe  
1 Copy to appropriate  
District Office

APPLICATION FOR WASTE MANAGEMENT FACILITY  
(Refer to the OCD Guidelines for assistance in completing the application)

☒ Commercial

☐ Centralized

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Contact Person: Judy L. Roberts Phone: 505-393-9697

3. Location: N2/4 N2/4 Section 9/10 Township 20 Range 38

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15. CERTIFICATION

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Name: Judy L. Roberts

Title: Landowner

Signature: Judy L. Roberts

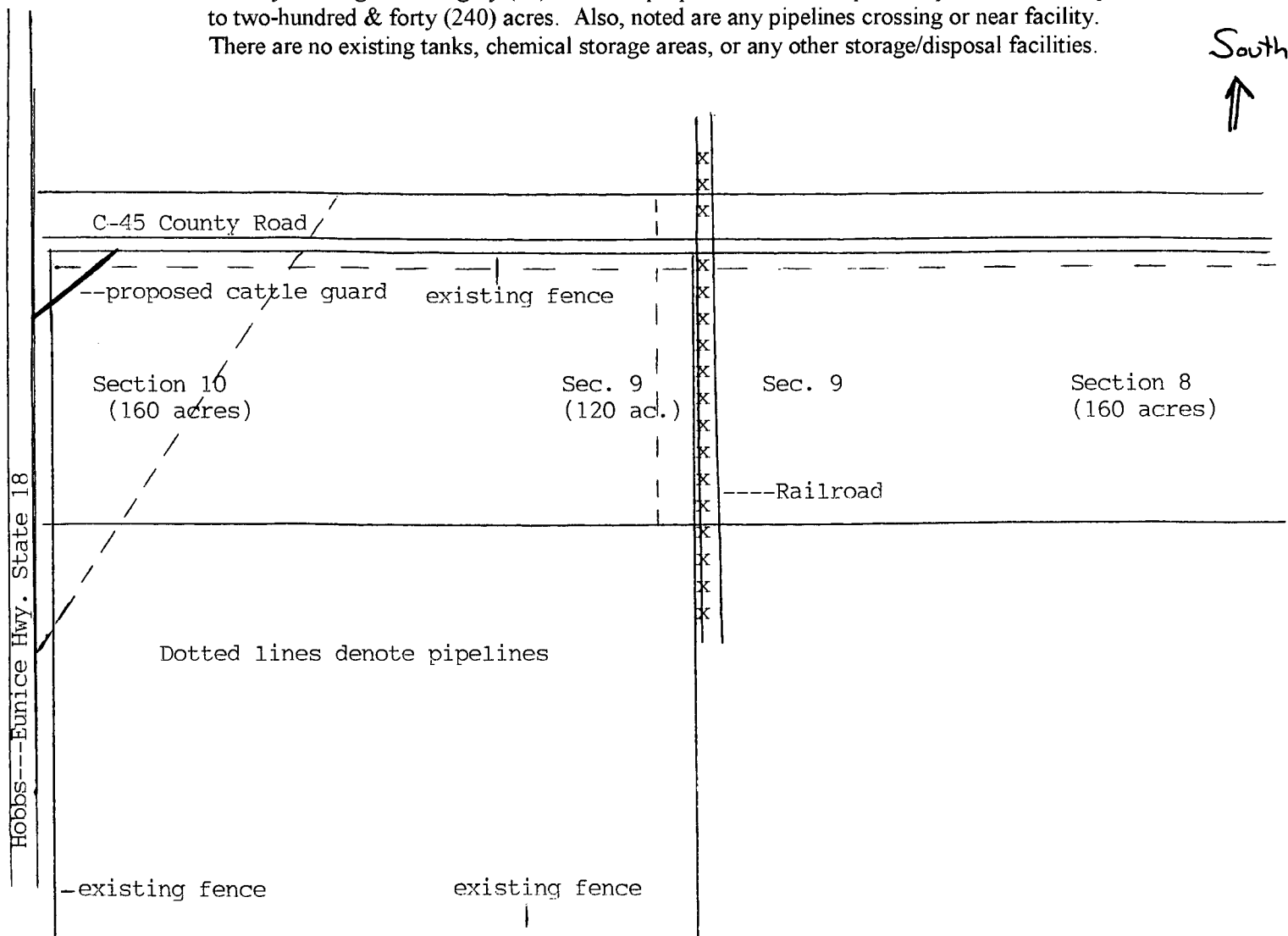
Date: 5-10-98

## ATTACHMENTS;

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- # 7 Facility Construction/Operation
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All loads received at facility will be accompanied by: a "Certification of Waste Status" signed by the waste generator or a "Verification of Waste Status" issued by the New Mexico Environment Department (NMED) or any other appropriate agency from another state for wastes regulated by that agency.

Transporter of load will present to operator of facility certification that wastes delivered are from the generator and no additional materials have been added.

Site will be closely monitored--no leaks or spills will occur as only dry solids will be accepted. Operator of site will notify OCD of any circumstance which could constitute hazard or contamination. Operator of site will be responsible to see that all above conditions and requirements are met.

- #9. Operator of facility will make routine inspections weekly. Other inspections of site will include after any major storm, heavy rainfall, high gusty winds, or any conditions where deemed necessary. Berms will be inspected as to check for adequacy to maintain collections. Operator will make daily routine check of logs and records. Any circumstance needing to be reported to OCD or EPA will be reported by operator according to requirements. Odors will be held at a minimum as only solids will be accepted and disked regularly with moisture added as necessary to control blowing dust.

#### #10. Closure Plan

- I. Prior to closure of landfarm facility, operator of site will submit an application for closure to OCD. Operator will abide by any and all regulations and procedures determined by OCD to ensure the exact location, by legal description, of site to be closed.
- II. Operator will abide by all regulations and submit detailed application including all procedures necessary to ensure all soils have been tested for total remediation, and ground water tested for contamination, according to all EPA guidelines. Results of all tests will be collected and documented and submitted to OCD and/or EPA as required for approval.
- III. Facility site will be maintained and monitored routinely by operator and worked in such manner to ensure remediation and controlling of contamination until such time as OCD determines it is sufficient to be closed as facility.

#### #11. Site Characteristics

Depth of water estimated to be about 80-120'(feet), if any water at all. Two dry holes drilled in the 1960's--both dry holed--are still open. In 1954, Conoco drilled in Section 10 for oil well, and at same time drilled water well. Hole is still open and is dry. Information

derived from local water well reports and sources.

Soil type of area is caliche.

Landowner of Facility: Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240

Landowners within one(1) mile of site:

Robert A. McCasland  
1000 Ave. N  
Eunice, New Mexico 88231

D.K. Randolph  
1000 W. Baja Dr.  
Hobbs, New Mexico 88240

Carl Greenwood  
6021 Greenwood Plc.  
Hobbs, New Mexico 88240

Antonio Cervantes  
405 E. Lea  
Hobbs, New Mexico 88240

Juan Huerta  
300 E. Lea  
Hobbs, New Mexico 88240

Charles & Myra Meyers  
3700 Tipton Dr.  
Hobbs, New Mexico 88240

M.H. McGrail &  
E. Kornegay, Trust  
Sunwest Bank  
Roswell, New Mexico 88201

Clyde Arsbon  
219 W. Stann Plc.  
Hobbs, New Mexico 88240

W.O. Collins, Est. %  
Peggy Wright  
7632 Pontiac Plc. SW  
Albuquerque, New Mexico 87105

Bill Hazelwood  
Rt. 69-42380 St. Hwy. 18  
Hobbs, New Mexico 88240

R.N. Magee  
8830 Eunice Hwy.  
Hobbs, New Mexico 88240

Ruth G. Thompson  
2700 Windsor Blvd.  
Oklahoma City, Okla. 73127

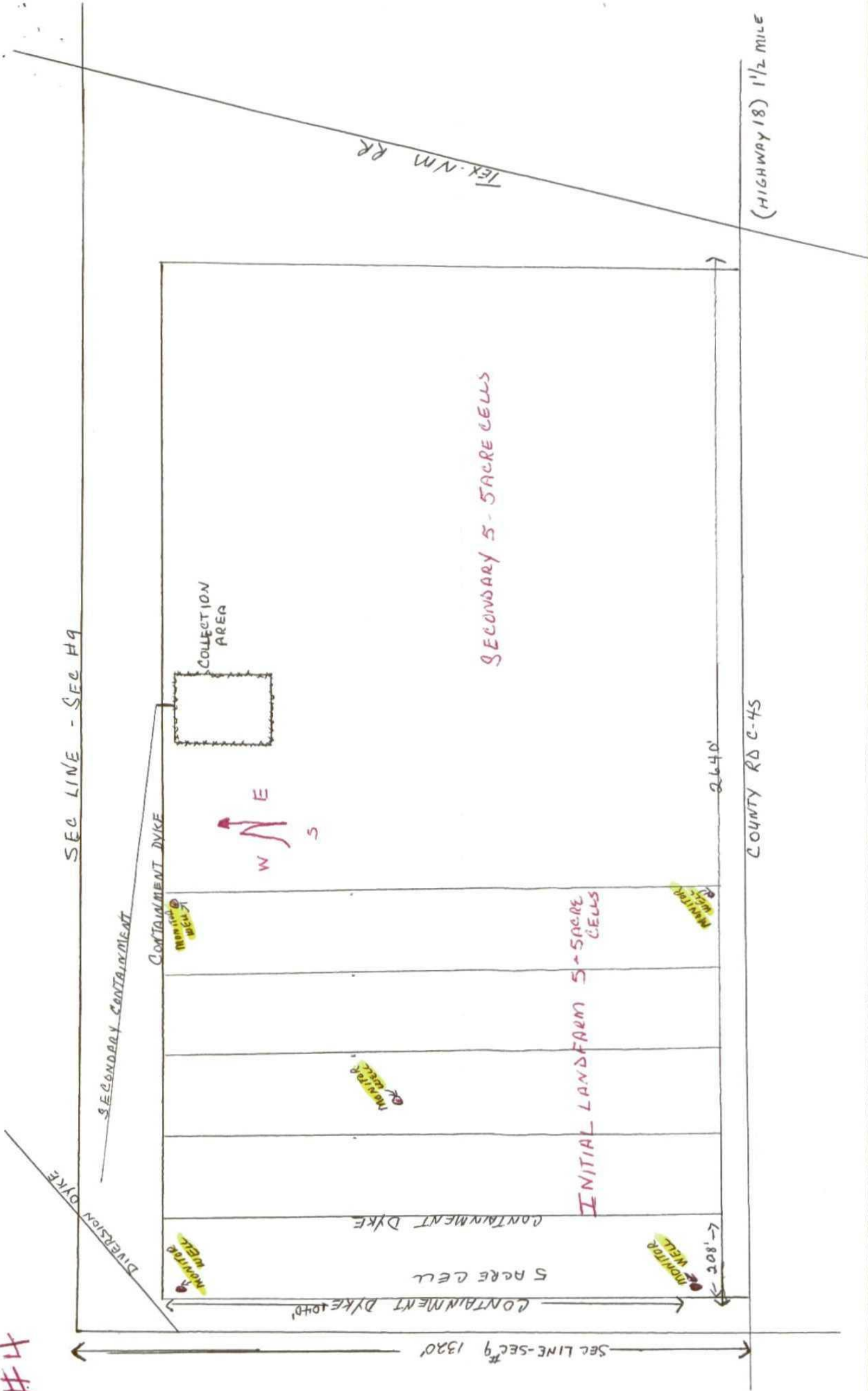
Leon Nowalsky &  
Charles Cabibi  
711 Aurora Ave Ste. A



|                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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| <p>18</p> <p>Adelle F. Blakey, M. Evelyn M. McNeill</p> <p>19</p> <p>Adelle F. Blakey, M. Evelyn M. McNeill</p> <p>20</p> <p>Jack M. Hawk, ins. et al, MI</p> <p>21</p> <p>Sunset Engr. et al</p> <p>22</p> <p>Cross Timbers, et al</p> <p>23</p> <p>Bledsee Pet. (Amoco) 1 C</p> <p>24</p> <p>Amoro</p> | <p>25</p> <p>Amoro</p> <p>26</p> <p>Amoro</p> <p>27</p> <p>Amoro</p> <p>28</p> <p>Amoro</p> <p>29</p> <p>Amoro</p> <p>30</p> <p>Amoro</p> <p>31</p> <p>Amoro</p> <p>32</p> <p>Amoro</p> <p>33</p> <p>Amoro</p> <p>34</p> <p>Amoro</p> <p>35</p> <p>Amoro</p> <p>36</p> <p>Amoro</p> <p>37</p> <p>Amoro</p> <p>38</p> <p>Amoro</p> <p>39</p> <p>Amoro</p> <p>40</p> <p>Amoro</p> <p>41</p> <p>Amoro</p> <p>42</p> <p>Amoro</p> <p>43</p> <p>Amoro</p> <p>44</p> <p>Amoro</p> <p>45</p> <p>Amoro</p> <p>46</p> <p>Amoro</p> <p>47</p> <p>Amoro</p> <p>48</p> <p>Amoro</p> <p>49</p> <p>Amoro</p> <p>50</p> <p>Amoro</p> <p>51</p> <p>Amoro</p> <p>52</p> <p>Amoro</p> <p>53</p> <p>Amoro</p> <p>54</p> <p>Amoro</p> <p>55</p> <p>Amoro</p> <p>56</p> <p>Amoro</p> <p>57</p> <p>Amoro</p> <p>58</p> <p>Amoro</p> <p>59</p> <p>Amoro</p> <p>60</p> <p>Amoro</p> <p>61</p> <p>Amoro</p> <p>62</p> <p>Amoro</p> <p>63</p> <p>Amoro</p> <p>64</p> <p>Amoro</p> <p>65</p> <p>Amoro</p> <p>66</p> <p>Amoro</p> <p>67</p> <p>Amoro</p> <p>68</p> <p>Amoro</p> <p>69</p> <p>Amoro</p> <p>70</p> <p>Amoro</p> <p>71</p> <p>Amoro</p> <p>72</p> <p>Amoro</p> <p>73</p> <p>Amoro</p> <p>74</p> <p>Amoro</p> <p>75</p> <p>Amoro</p> <p>76</p> <p>Amoro</p> <p>77</p> <p>Amoro</p> <p>78</p> <p>Amoro</p> <p>79</p> <p>Amoro</p> <p>80</p> <p>Amoro</p> <p>81</p> <p>Amoro</p> <p>82</p> <p>Amoro</p> <p>83</p> <p>Amoro</p> <p>84</p> <p>Amoro</p> <p>85</p> <p>Amoro</p> <p>86</p> <p>Amoro</p> <p>87</p> <p>Amoro</p> <p>88</p> <p>Amoro</p> <p>89</p> <p>Amoro</p> <p>90</p> <p>Amoro</p> <p>91</p> <p>Amoro</p> <p>92</p> <p>Amoro</p> <p>93</p> <p>Amoro</p> <p>94</p> <p>Amoro</p> <p>95</p> <p>Amoro</p> <p>96</p> <p>Amoro</p> <p>97</p> <p>Amoro</p> <p>98</p> <p>Amoro</p> <p>99</p> <p>Amoro</p> <p>100</p> <p>Amoro</p> | <p>101</p> <p>Amoro</p> <p>102</p> <p>Amoro</p> <p>103</p> <p>Amoro</p> <p>104</p> <p>Amoro</p> <p>105</p> <p>Amoro</p> <p>106</p> <p>Amoro</p> <p>107</p> <p>Amoro</p> <p>108</p> <p>Amoro</p> <p>109</p> <p>Amoro</p> <p>110</p> <p>Amoro</p> <p>111</p> <p>Amoro</p> <p>112</p> <p>Amoro</p> <p>113</p> <p>Amoro</p> <p>114</p> <p>Amoro</p> <p>115</p> <p>Amoro</p> <p>116</p> <p>Amoro</p> <p>117</p> <p>Amoro</p> <p>118</p> <p>Amoro</p> <p>119</p> <p>Amoro</p> <p>120</p> <p>Amoro</p> <p>121</p> <p>Amoro</p> <p>122</p> <p>Amoro</p> <p>123</p> <p>Amoro</p> <p>124</p> <p>Amoro</p> <p>125</p> <p>Amoro</p> <p>126</p> <p>Amoro</p> <p>127</p> <p>Amoro</p> <p>128</p> <p>Amoro</p> <p>129</p> <p>Amoro</p> <p>130</p> <p>Amoro</p> <p>131</p> <p>Amoro</p> <p>132</p> <p>Amoro</p> <p>133</p> <p>Amoro</p> <p>134</p> <p>Amoro</p> <p>135</p> <p>Amoro</p> <p>136</p> <p>Amoro</p> <p>137</p> <p>Amoro</p> <p>138</p> <p>Amoro</p> <p>139</p> <p>Amoro</p> <p>140</p> <p>Amoro</p> <p>141</p> <p>Amoro</p> <p>142</p> <p>Amoro</p> <p>143</p> <p>Amoro</p> <p>144</p> <p>Amoro</p> <p>145</p> <p>Amoro</p> <p>146</p> <p>Amoro</p> <p>147</p> <p>Amoro</p> <p>148</p> <p>Amoro</p> <p>149</p> <p>Amoro</p> <p>150</p> <p>Amoro</p> <p>151</p> <p>Amoro</p> <p>152</p> <p>Amoro</p> <p>153</p> <p>Amoro</p> <p>154</p> <p>Amoro</p> <p>155</p> <p>Amoro</p> <p>156</p> <p>Amoro</p> <p>157</p> <p>Amoro</p> <p>158</p> <p>Amoro</p> <p>159</p> <p>Amoro</p> <p>160</p> <p>Amoro</p> <p>161</p> <p>Amoro</p> <p>162</p> <p>Amoro</p> <p>163</p> <p>Amoro</p> <p>164</p> <p>Amoro</p> <p>165</p> <p>Amoro</p> <p>166</p> <p>Amoro</p> <p>167</p> <p>Amoro</p> <p>168</p> <p>Amoro</p> <p>169</p> <p>Amoro</p> <p>170</p> <p>Amoro</p> <p>171</p> <p>Amoro</p> <p>172</p> <p>Amoro</p> <p>173</p> <p>Amoro</p> <p>174</p> <p>Amoro</p> <p>175</p> <p>Amoro</p> <p>176</p> <p>Amoro</p> <p>177</p> <p>Amoro</p> <p>178</p> <p>Amoro</p> <p>179</p> <p>Amoro</p> <p>180</p> <p>Amoro</p> <p>181</p> <p>Amoro</p> <p>182</p> <p>Amoro</p> <p>183</p> <p>Amoro</p> <p>184</p> <p>Amoro</p> <p>185</p> <p>Amoro</p> <p>186</p> <p>Amoro</p> <p>187</p> <p>Amoro</p> <p>188</p> <p>Amoro</p> <p>189</p> <p>Amoro</p> <p>190</p> <p>Amoro</p> <p>191</p> <p>Amoro</p> <p>192</p> <p>Amoro</p> <p>193</p> <p>Amoro</p> <p>194</p> <p>Amoro</p> <p>195</p> <p>Amoro</p> <p>196</p> <p>Amoro</p> <p>197</p> <p>Amoro</p> <p>198</p> <p>Amoro</p> <p>199</p> <p>Amoro</p> <p>200</p> <p>Amoro</p> |
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#4



Box 1980  
Hobbs, NM 88241-1980  
District II - (505) 748-1283  
P.O. Box 111 S. First  
Artesia, NM 88210  
District III - (505) 334-6178  
P.O. Box 10 Rio Brazos Road  
Alamogordo, NM 87410  
District IV - (505) 827-7131

NEW MEXICO  
Energy Minerals and Natural Resources Department  
Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

Form C-137  
Originated 8/8/85

Submit Origin  
Plus 1 Copy  
to Santa Fe  
1 Copy to appropriate  
District Office

APPLICATION FOR WASTE MANAGEMENT FACILITY  
(Refer to the OCD Guidelines for assistance in completing the application)

☒ Commercial

☐ Centralized

RECEIVED

JUL 20 1998

Environmental Bureau  
Oil Conservation Division

1. Type: ☐ Evaporation ☐ Injection ☐ Other  
☒ Solids/Landfarm ☐ Treating Plant

2. Operator: J&L Landfarm

Address: 8301 Eunice Highway Hobbs, New Mexico 88240

Contact Person: Judy L. Roberts Phone: 505-393-9697

3. Location: N2 /4 N2 /4 Section 9/10 Township 20 Range 38

Submit large scale topographic map showing exact location

4. Is this a modification of an existing facility? ☐ Yes ☒ No
5. Attach the name and address of the landowner of the facility site and landowners of record within one mile of the site.
6. Attach description of the facility with a diagram indicating location of fences, pits, dikes, and tanks on the facility.
7. Attach designs prepared in accordance with Division guidelines for the construction/installation of the following: pits or ponds, leak-detection systems, aerations systems, enhanced evaporation (spray) systems, waste treating systems, security systems, and landfarm facilities.
8. Attach a contingency plan for reporting and clean-up for spills or releases.
9. Attach a routine inspection and maintenance plan to ensure permit compliance.
10. Attach a closure plan.
11. Attach geological/hydrological evidence demonstrating that disposal of oil field wastes will not adversely impact groundwater. Depth to and quality of ground water must be included.
12. Attach proof that the notice requirements of OCD Rule 711 have been met.
13. Attach a contingency plan in the event of a release of H<sub>2</sub>S.
14. Attach such other information as necessary to demonstrate compliance with any other OCD rules, regulations and orders.
15. CERTIFICATION

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: Judy L. Roberts

Title: Landowner

Signature: Judy L. Roberts

Date: 5-10-98

ATTACHMENTS:

Amended application to prior Landfarm application:  
Map denoting where cells will be located  
Water depth and quality  
Estimated cost of closure plan

Proposed facility will accomodate two-hundred & eighty (280) acres for disposal.  
This will include a one-hundred (100) feet boundry for proper buffer zone.

Water depth estimated at 69.6 feet, for sections 9 & 10.  
Water quality: 63 ppm chloride.  
Reference: State Engineering Office, Roswell, New Mexico

Closure costs estimated at \$746.66 per active cell for 2 year period. This is to maintain and monitor the remediation of active cells til closure approved.

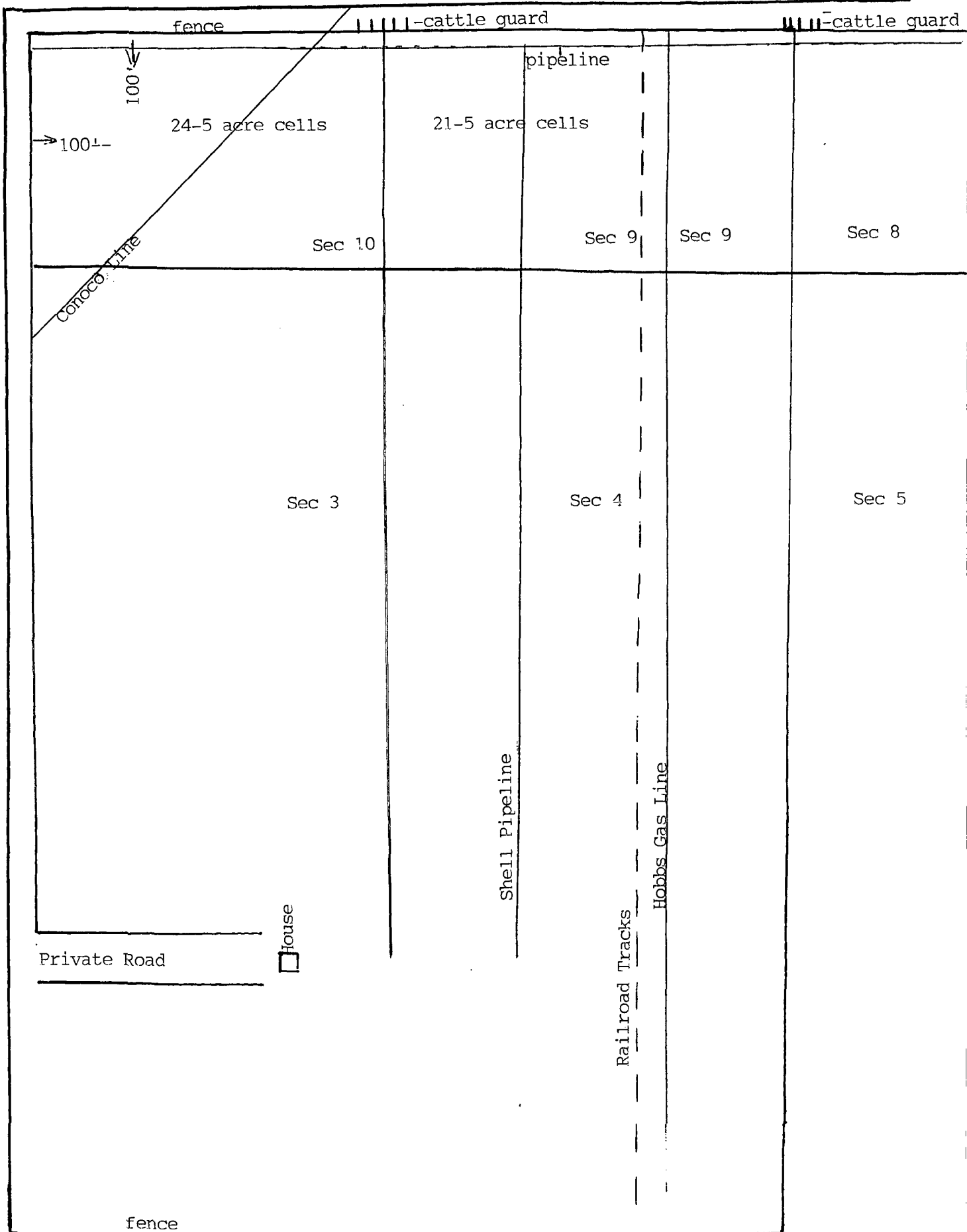
Total estimated cost for 2 year period: \$33,600.00

Bond in this amount to be submitted prior to construction of facility.

(North) ← Hobbs State Hwy 18 Eunice → (South)

County Road C-45

West



September 15, 1998

SEP 21 1998

Energy Minerals and Natural Resources Department  
Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, N. M. 87505

Attention: Director of Environment Department

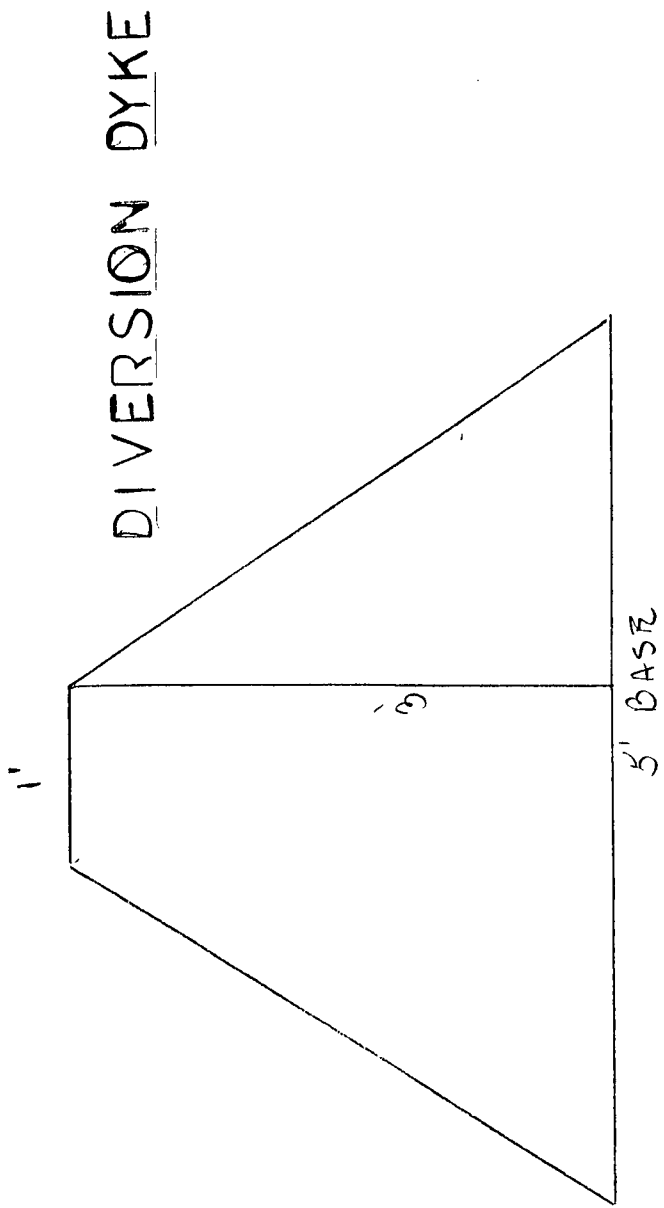
Dear Director,

I am writing concerning the Application for Waste Management Facility submitted by J. & L. Landfarm, 8301 Eunice Highway, Hobbs, N. M. 88240, contact person Judy L. Roberts, located N2/4, N2/4 Section 9/10 Township 20 Range 38.

I am against the installation of this facility for the following reasons. I believe it will contaminate the water supply and have a bad odor.

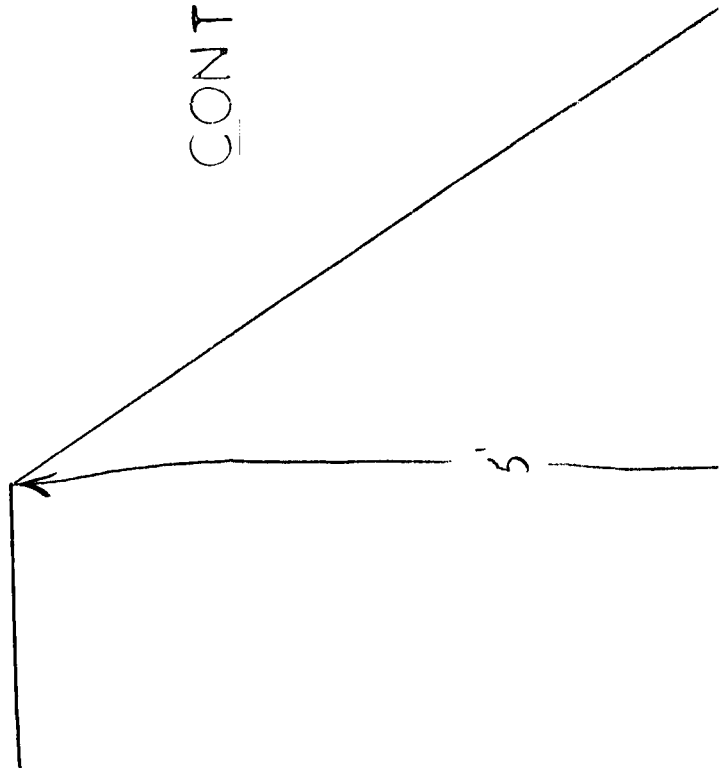
In attachment #11 of the application, it states the depth of the water to be 80 to 120 feet and hardly any water, if any. I disagree with this because I have a water well within at least 300 feet of the proposed site used for domestic purposes. Water is at a depth of 42 feet. Enclosed is a copy of the well record. Within 600 feet or more of the proposed site, Mr. Zamora has a water well for his livestock. The depth of this well is about the same as mine. I know of another well a little over a quarter of a mile from the site. In all, counting the three wells I just mentioned, I know of at least 9 domestic water wells in section 11 which is east of the proposed site. The underground water supply flows from the northwest to the southeast so any contamination would get in our wells. Also, the city of Eunice has wells that supply part of their city water within a mile of the proposed site.

J. & L. Landfarm state that two dry holes were drilled in the 1960s. They say both were dry and still open. However, oil companies consider a well dry if there is not enough water to supply a drilling rig. Perhaps they are not really dry, but have a low amount of water.



CONTAINMENT DYKE PROFILE

2' →



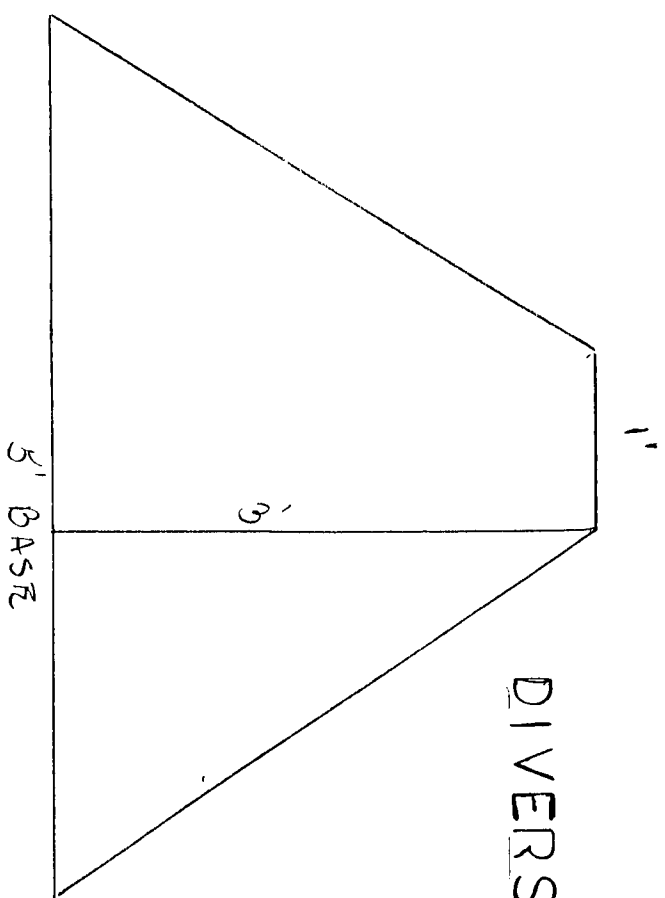
SECONDARY  
CONTAINMENT  
Ditch

Ground Level

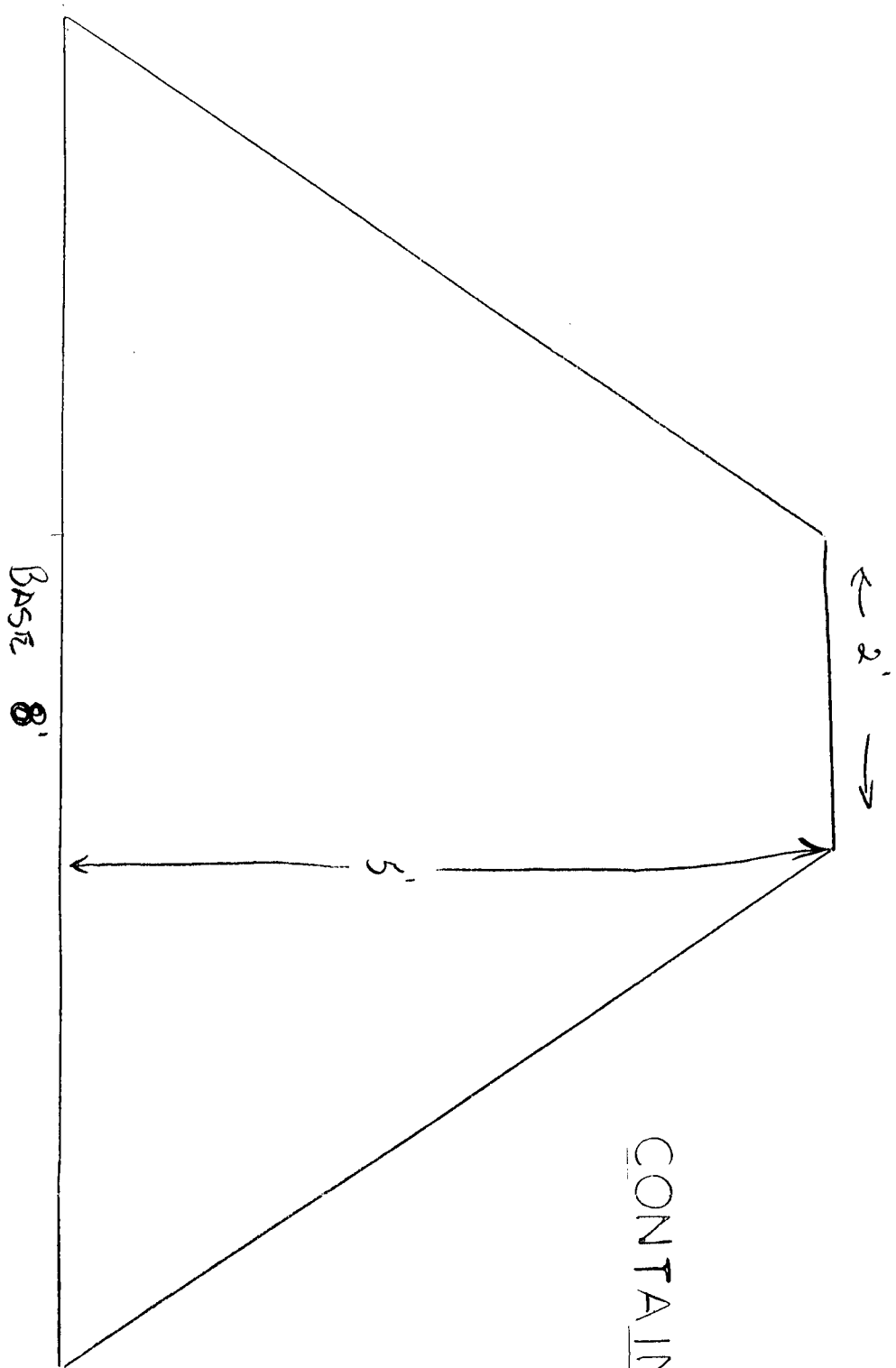
Spill

2'

DIVERSION DYKE



CONTAINMENT DYKE PROFILE



The city of Hobbs is being forced to close the local landfill because the water table is too close to the surface. Why should J. & L. Landfarm be able to contaminate the underground water?

J. & L. Landfarm state in #7 that there is no watercourse, lakebed, sinkhole or other depression on the proposed site. This is not true because the southeast corner of the landfarm will be on the west edge of a dry lakebed. I have enclosed a topographic map the area. Rainwater from the proposed site drains into this lakebed, and at times water stands in it.

I am very concerned about the odor. I know of a waste facility about 35 miles West of Hobbs on the Carlsbad Highway that has an odor that would gag a maggot. My home is located within 300 feet of the proposed site. I should not be forced to move because some one has put a fowl unbearable odor across from my home.

In item #12 Notice Requirements, J. & L. Landfarm gives a list of landowners notified within one mile of the proposed site. They did not notify all the landowners. They did not notify:

Kevin Mattingly  
Wilma Hardin  
Adrian Zamora  
Rubin Calvillo  
Debbie Dominguez  
Victor Reza  
Gary Henderson  
R.E. Hudson

I got these names from a map on file at the County Assessors Office. This is only the people east of the site. I do not have a map of the area Northwest, South, or Southeast of the site, so I am sure there are more people that should be notified. I also believe the city of Eunice should be notified.

There is a discrepancy between J. & L. Landfarm's letter of notification to us and the application,. The application states the landfarm will be 240 acres and the letter states the landfarm will be 280 acres.

Please do not grant their request for a landfarm. I believe this landfarm will contaminate my well water and cause an unbearable stench. As a result ,



I won't be able to live on my land and it will be worthless.. Thank you for your time.

Sincerely,

B.D. Howard

Wilma Hazelwood

Bill & Wilma Hazelwood

Rt. 69 42380 State Hwy 18  
Hobbs, N.M. 88240  
505-393-5998

Hobbs, NM 88241-1980  
District II - (505) 748-1283  
811 S. First  
Artesia, NM 88210  
District III - (505) 334-6178  
10 Rio Brazos Road  
Jec, NM 87410  
District IV - (505) 827-7131

NEW MEXICO  
Energy Minerals and Natural Resources Department  
Oil Conservation Division  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

Form C-1  
Originated 8/8

Submit Original  
Plus 1 Copy  
to Santa Fe  
1 Copy to appropriate  
District Office

**APPLICATION FOR WASTE MANAGEMENT FACILITY**  
(Refer to the OCD Guidelines for assistance in completing the application)

☒ Commercial

☐ Centralized

1. Type: ☐ Evaporation ☐ Injection ☐ Other  
☒ Solids/Landfarm ☐ Treating Plant

2. Operator: J&L Landfarm

Address: 8301 Eunice Highway Hobbs, New Mexico 88240

Contact Person: Judy L. Roberts Phone: 505-393-9697

3. Location: N2 / 4 N2 / 4 Section 9/10 Township 20 Range 38  
Submit large scale topographic map showing exact location

4. Is this a modification of an existing facility? ☐ Yes ☒ No

5. Attach the name and address of the landowner of the facility site and landowners of record within one mile of the site.

6. Attach description of the facility with a diagram indicating location of fences, pits, dikes, and tanks on the facility.

7. Attach designs prepared in accordance with Division guidelines for the construction/installation of the following: pits or ponds, leak-detection systems, aerations systems, enhanced evaporation (spray) systems, waste treating systems, security systems, and landfarm facilities.

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9. Attach a routine inspection and maintenance plan to ensure permit compliance.

10. Attach a closure plan.

11. Attach geological/hydrological evidence demonstrating that disposal of oil field wastes will not adversely impact groundwater. Depth to and quality of ground water must be included.

12. Attach proof that the notice requirements of OCD Rule 711 have been met.

13. Attach a contingency plan in the event of a release of H<sub>2</sub>S.

14. Attach such other information as necessary to demonstrate compliance with any other OCD rules, regulations and orders.

15. **CERTIFICATION**

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: Judy L. Roberts

Title: Landowner

Signature: Judy L. Roberts

Date: 5-10-98

## ATTACHMENTS;

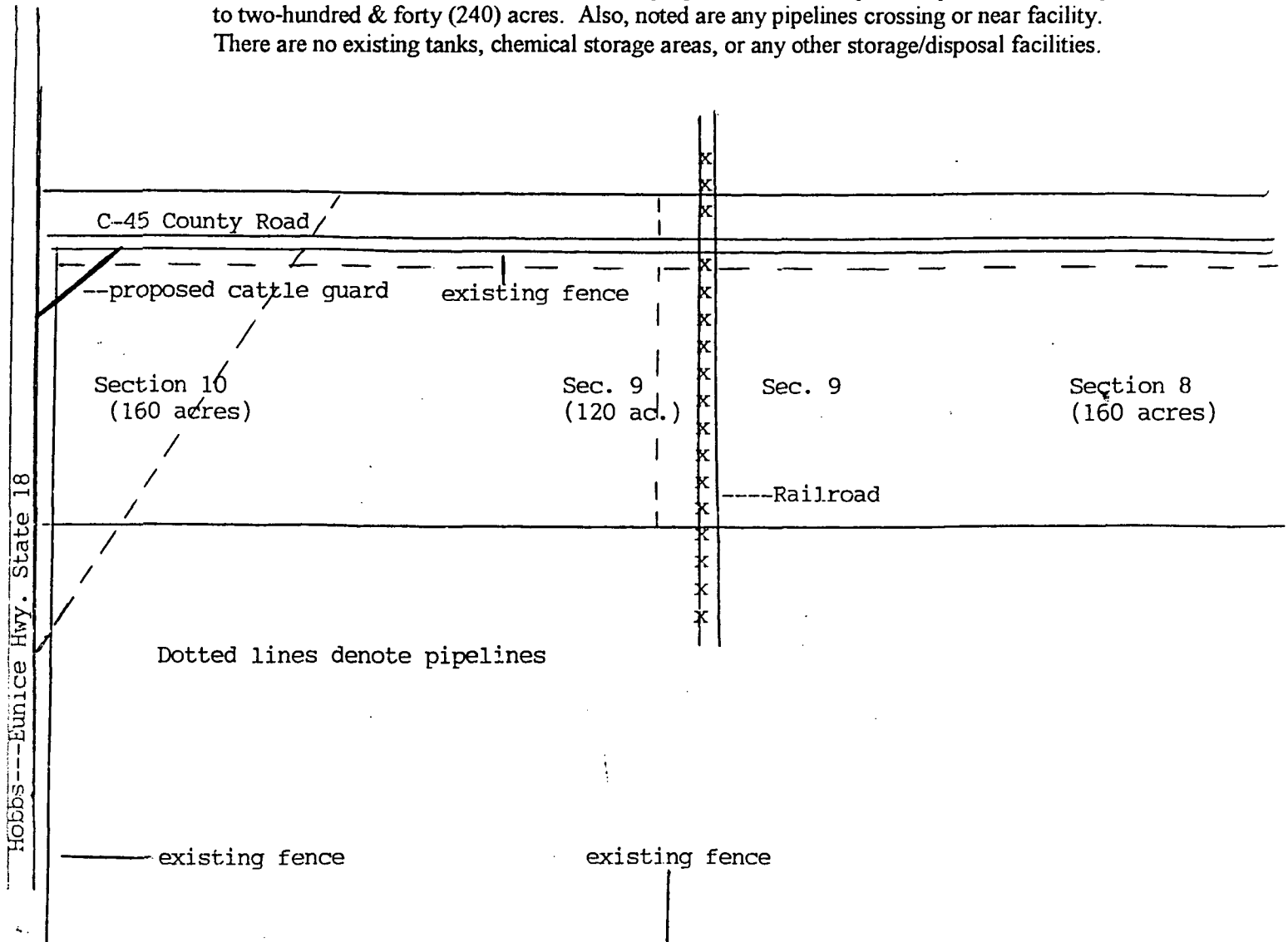
- # 6 Description of Facility w/diagram
- # 7 Facility Construction/Operation
- # 9 Routine Inspection/Maintenance Plan
- #10 Closure Plan
- #11 Depth and Quality of Water
- #12 Notice Requirements

### #6. Description of Facility

Proposed facility will be Commercial Unlined Surface Impoundment for disposal of solid oil treated soil/dirt. See diagram below of existing/proposed fences, pits dikes and tanks.

Facility will begin with eighty (80) acres for proposed site with expansion possibilities of up to two-hundred & forty (240) acres. Also, noted are any pipelines crossing or near facility.

There are no existing tanks, chemical storage areas, or any other storage/disposal facilities.



## #7. Facility Construction/Operation

Proposed facility is not located near or in any , watercourse, lakebed, sinkhole or other depression. Facility has existing fence (see diagram). New entrance will be constructed to facility with cattle guard and locked gate leading to site. Entrance will have a sign to be legible from at least fifty (50) feet and will contain the following information: 1) Name of facility, 2) Location by section, township and range, and 3) emergency phone number. *UL, S-T-2 Loc at N/2 NE 1/4 etc.*

As required, facility will accomodate a buffer zone of least 100 feet of boundry of site. Also, all collections will accomodate a twenty (20) feet buffer zone of all pipelines. All pipelines are marked and posted.

Facility berms will be built to contain collected soil, and to prevent, runoff/runon. All berms will be constructed in order to contain precipitation from a one-hundred year flood of that particular area.

Prior to operation of facility all requirements for background soil samples will be taken and analyzed according to OCD/EPA methods and submitted to all appropriate agencies.

Zone used for collection of soils will be monitored according to OCD regulations and samples will be taken within six (6) months after first soils are collected. Thereafter, according to regulations samples will be taken quarterly. All detailed records of testing will kept at site and submitted to appropriate agencies and will be available to inspection. All sample boorholes will be filled according to OCD guidelines.

*boorholes*

All operations involving the collection of soils will only be done when qualified attendant is on duty. When attendant is not present, the facility will be securely locked and inaccessible.

All contaminated soils received will be disked and spread within 72 hours of receipt. Soils will be spread on the surface according to guidelines in six inch lifts. Soils will be disked at least once every two weeks to enhance biodegradation of contaminants. Equipment will be kept available on site for proper disking and maintaining of berms and other maintenance requirements, or will be made available by qualified contractor.

Proper testing and measurement of contaminated soils will be taken and evaluated before successive lifts or other soils spread. All records of testing will be maintained at site and available for reviewing. No successive lifts will be made without authorization from OCD.

Equipment will be maintained on site to add moisture as needed to control blowing dust and enhance bioremediation or will be provided by qualified contractor. All ponding or precipitation will be removed within seventy-two (72) hours.

All records of operation of facility will be maintained at site and will adhere to OCD guidelines and be available for review. Comprehensive records for each collection will include: 1) the generator, 2) the origin, 3) date received, 4) quantity, 5) Certification of exempt status, 6) transporter, and 7) exact cell location and any addition of microbes, moisture, fertilizers, etc.

No free liquids or soil with free liquids will be accepted at facility.

Tracking of wastes collected at facility will consist of accepting only wastes accompanied by a "Certification of Waste Status" from the generator. Only oilfield contaminated soil, approved by OCD will be accepted at facility.

All loads received at facility will be accompanied by: a "Certification of Waste Status" signed by the waste generator or a "Verification of Waste Status" issued by the New Mexico Environment Department (NMED) or any other appropriate agency from another state for wastes regulated by that agency.

Transporter of load will present to operator of facility certification that wastes delivered are from the generator and no additional materials have been added.

Site will be closely monitored--no leaks or spills will occur as only dry solids will be accepted. Operator of site will notify OCD of any circumstance which could constitute hazard or contamination. Operator of site will be responsible to see that all above conditions and requirements are met.

- #9. Operator of facility will make routine inspections weekly. Other inspections of site will include after any major storm, heavy rainfall, high gusty winds, or any conditions where deemed necessary. Berms will be inspected as to check for adequacy to maintain collections. Operator will make daily routine check of logs and records. Any circumstance needing to be reported to OCD or EPA will be reported by operator according to requirements. Odors will be held at a minimum as only solids will be accepted and disked regularly with moisture added as necessary to control blowing dust.

#### #10. Closure Plan

- I. Prior to closure of landfarm facility, operator of site will submit an application for closure to OCD. Operator will abide by any and all regulations and procedures determined by OCD to ensure the exact location, by legal description, of site to be closed.
- II. Operator will abide by all regulations and submit detailed application including all procedures necessary to ensure all soils have been tested for total remediation, and ground water tested for contamination, according to all EPA guidelines. Results of all tests will be collected and documented and submitted to OCD and/or EPA as required for approval.
- III. Facility site will be maintained and monitored routinely by operator and worked in such manner to ensure remediation and controlling of contamination until such time as OCD determines it is sufficient to be closed as facility.

#### #11. Site Characteristics

Depth of water estimated to be about 80-120'(feet), if any water at all. Two dry holes drilled in the 1960's--both dry holed--are still open. In 1954, Conoco drilled in Section 10 for oil well, and at same time drilled water well. Hole is still open and is dry. Information

derived from local water well reports and sources.

Soil type of area is caliche.

Landowner of Facility: Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240

Landowners within one(1) mile of site:

Robert A. McCasland  
1000 Ave. N  
Eunice, New Mexico 88231

D.K. Randolph  
1000 W. Baja Dr.  
Hobbs, New Mexico 88240

Carl Greenwood  
6021 Greenwood Plc.  
Hobbs, New Mexico 88240

Antonio Cervantes  
405 E. Lea  
Hobbs, New Mexico 88240

Juan Huerta  
300 E. Lea  
Hobbs, New Mexico 88240

Charles & Myra Meyers  
3700 Tipton Dr.  
Hobbs, New Mexico 88240

M.H. McGrail &  
E. Kornegay, Trust  
Sunwest Bank  
Roswell, New Mexico 88201

Clyde Arson  
219 W. Stann Plc.  
Hobbs, New Mexico 88240

W.O. Collins, Est. %  
Peggy Wright  
7632 Pontiac Plc. SW  
Albuquerque, New Mexico 87105

Bill Hazelwood  
Rt. 69-42380 St. Hwy. 18  
Hobbs, New Mexico 88240

R.N. Magee  
8830 Eunice Hwy.  
Hobbs, New Mexico 88240

Ruth G. Thompson  
2700 Windsor Blvd.  
Oklahoma City, Okla. 73127

Leon Nowalsky &  
Charles Cabibi  
711 Aurora Ave Ste. A

[illegible]



*Received Sept. 8, 1998*

**NOTIFICATION OF APPLICATION TO STATE OF NEW MEXICO TO INSTALL  
LANDFARM WASTE MANAGEMENT FACILITY.**

This is to notify all landowners within one (1) mile of proposed facility that application has been made to State of New Mexico to construct a landfarm waste management facility.

**DESCRIPTION OF FACILITY:**

Facility will be a surface impoundment for the disposal of solid oil treated dirt. Area to be designated for facility will be two-hundred & eighty (280) acres.

**LOCATION OF FACILITY:**

Legal description of area: N2/4 N2/4 Section 9/10 Township 20 Range 38, Lea County, New Mexico.

**OPERATOR OF FACILITY:** J&L Landfarm

**CONTACT PERSON:**

Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240  
Tele(505-393-9697)

For a viewing of the completed application, you may call or write me at the above address or contact the local Oil Conservation Division at 1000 W. Broadway, Hobbs, New Mexico, (505)393-6161.

Judy L. Roberts

STATE ENGINEER OFFICE  
WELL RECORD

## Section 1. GENERAL INFORMATION

(A) Owner of well B. D. Hazelwood Owner's Well No. \_\_\_\_\_  
 Street or Post Office Address P.O. Box 5458  
 City and State Hobbs, N.M. 88240

Well was drilled under Permit No. L-10,656 and is located in the:

a. NW  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$  of Section 11 Township 20 Range 38 N.M.P.M.

b. Tract No. \_\_\_\_\_ of Map No. \_\_\_\_\_ of the \_\_\_\_\_

c. Lot No. \_\_\_\_\_ of Block No. \_\_\_\_\_ of the \_\_\_\_\_  
 Subdivision, recorded in Lea County.

d. X= \_\_\_\_\_ feet, Y= \_\_\_\_\_ feet, N.M. Coordinate System \_\_\_\_\_ Zone in  
 the \_\_\_\_\_ Grant.

(B) Drilling Contractor George Glasspoole License No. WD-571

Address 601 W. Cope Place, Hobbs, N.M. 88242

Drilling Began 4-22-97 Completed 4-24-97 Type tools Cable Size of hole 8  $\frac{1}{2}$ "

Elevation of land surface or \_\_\_\_\_ at well is \_\_\_\_\_ ft. Total depth of well 66'

Completed well is ☒ shallow ☐ artesian. Depth to water upon completion of well 42'

## Section 2. PRINCIPAL WATER-BEARING STRATA

| Depth in Feet |     | Thickness<br>in Feet | Description of Water-Bearing Formation | Estimated Yield<br>(gallons per minute) |
|---------------|-----|----------------------|----------------------------------------|-----------------------------------------|
| From          | To  |                      |                                        |                                         |
| 42'           | 66' | 24'                  | Water Sand                             | 12 GPM                                  |
|               |     |                      |                                        |                                         |
|               |     |                      |                                        |                                         |
|               |     |                      |                                        |                                         |

## Section 3. RECORD OF CASING

| Diameter<br>(inches) | Pounds<br>per foot | Threads<br>per in. | Depth in Feet |        | Length<br>(feet) | Type of Shoe | Perforations |     |
|----------------------|--------------------|--------------------|---------------|--------|------------------|--------------|--------------|-----|
|                      |                    |                    | Top           | Bottom |                  |              | From         | To  |
| 5 1/2"               |                    |                    | +18"          | 66'    | 67' 6"           |              | 26'          | 66' |
|                      |                    |                    |               |        |                  |              |              |     |
|                      |                    |                    |               |        |                  |              |              |     |

## Section 4. RECORD OF MUDDING AND CEMENTING

| Depth in Feet |     | Hole<br>Diameter | Sacks<br>of Mud | Cubic Feet<br>of Cement | Method of Placement |
|---------------|-----|------------------|-----------------|-------------------------|---------------------|
| From          | To  |                  |                 |                         |                     |
| 0"            | 66' | 8 1/2"           | 0               | None                    |                     |
|               |     |                  |                 |                         |                     |
|               |     |                  |                 |                         |                     |

## Section 5. PLUGGING RECORD

Plugging Contractor \_\_\_\_\_  
 Address \_\_\_\_\_  
 Plugging Method \_\_\_\_\_  
 Date Well Plugged \_\_\_\_\_  
 Plugging approved by: \_\_\_\_\_

State Engineer Representative

| No. | Depth in Feet |        | Cubic Feet<br>of Cement |
|-----|---------------|--------|-------------------------|
|     | Top           | Bottom |                         |
| 1   |               |        |                         |
| 2   |               |        |                         |
| 3   |               |        |                         |
| 4   |               |        |                         |

## FOR USE OF STATE ENGINEER ONLY

Date Received \_\_\_\_\_

Quad \_\_\_\_\_ FWL \_\_\_\_\_ FSL \_\_\_\_\_

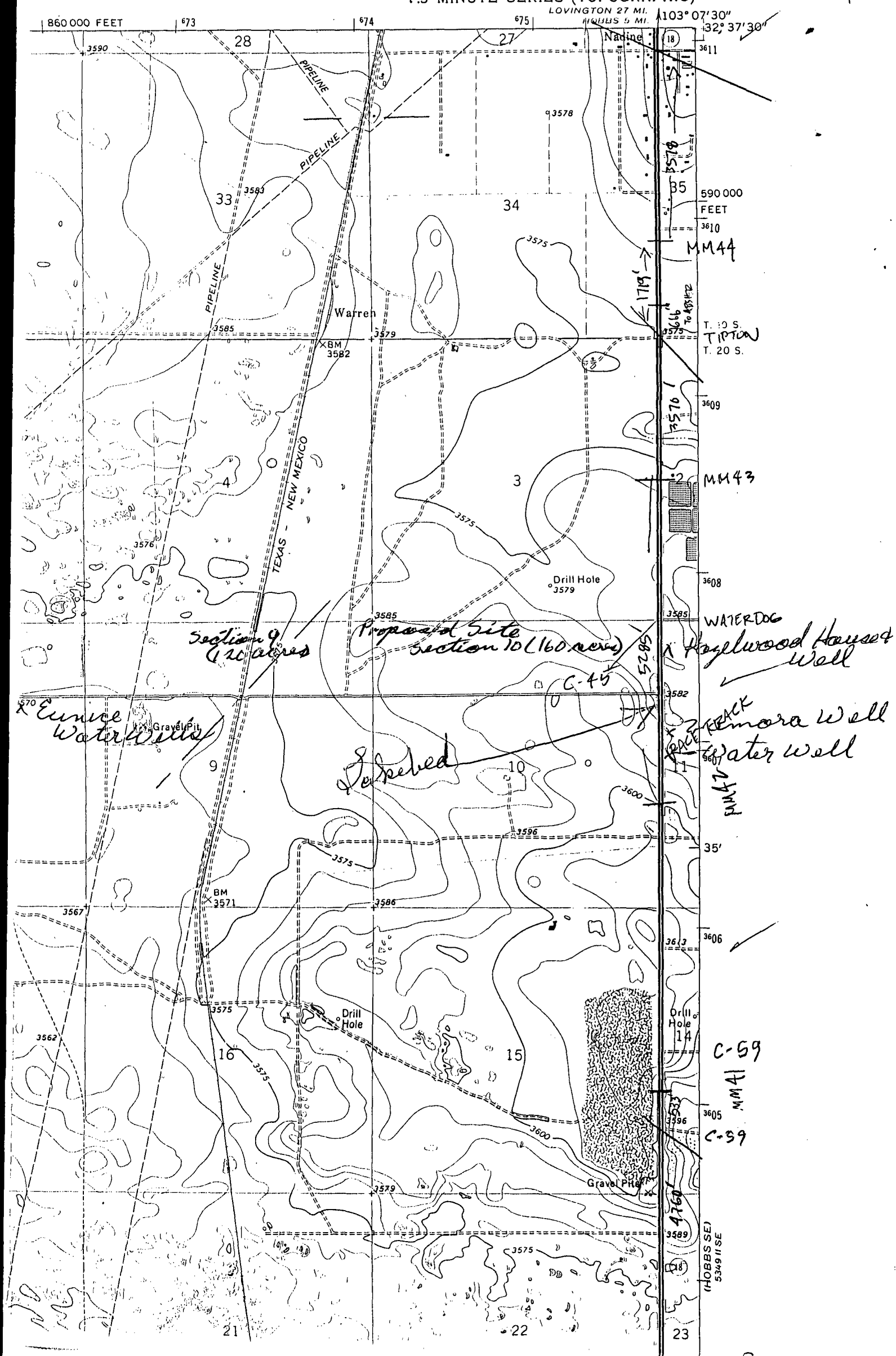
File No. \_\_\_\_\_ Use \_\_\_\_\_ Location No. \_\_\_\_\_

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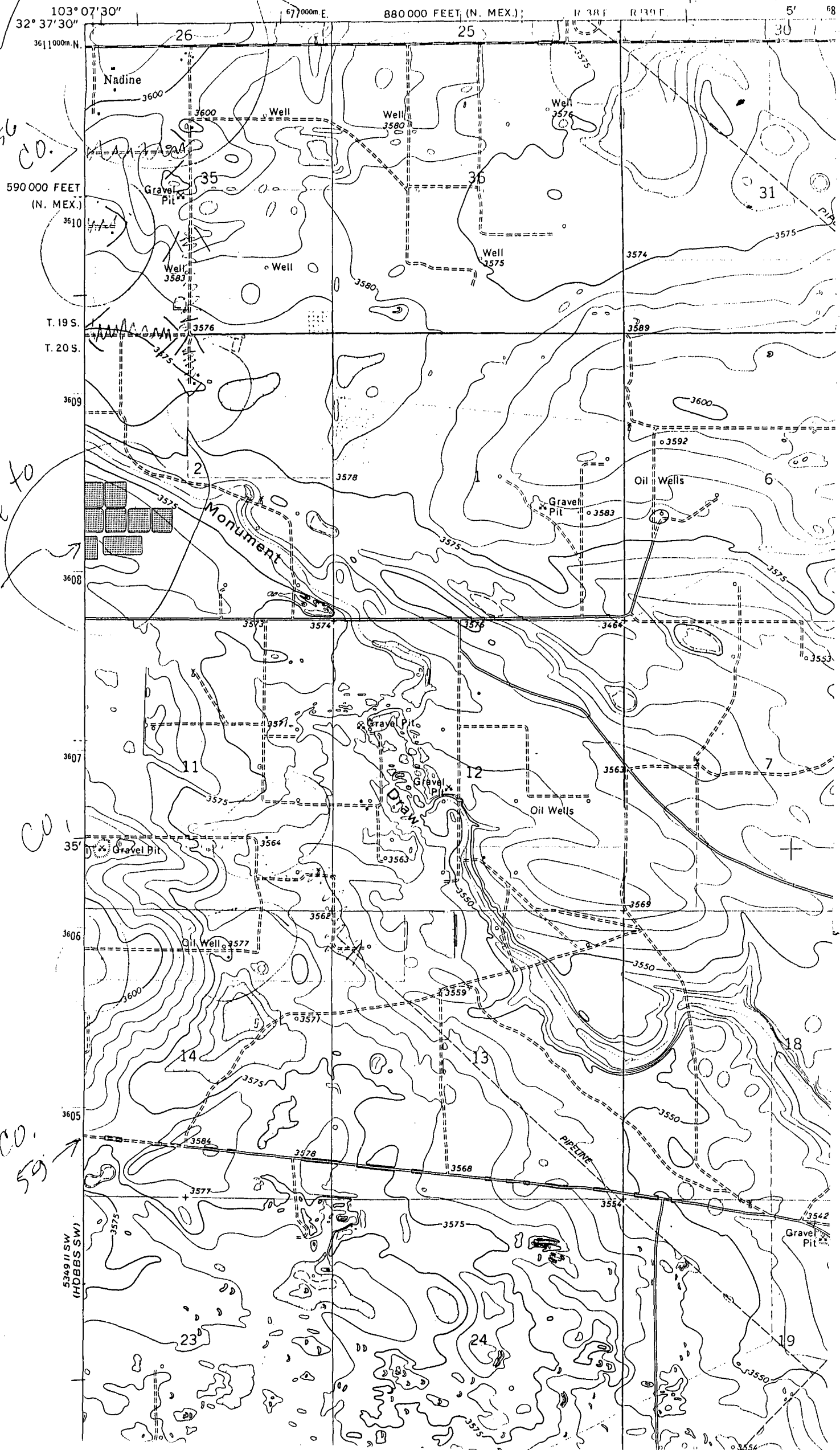
George W. Blazsable  
Driller

INSTRUCTIONS: This form should be executed in triplicate, preferably typewritten, and submitted to the appropriate district office of the State Engineer. All sections, except Section 5, shall be answered as completely and accurately as possible when any well is drilled, repaired or deepened. When this form is used as a plugging record, only Section 1(a) and Section 5 need be completed.

5349 11 NE  
(HOBBS EAST)



DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY



need to  
add

56  
CO.

590 000 FEET  
(N. MEX.)

CO.

CO.  
59

5349 II SW  
(HDBS SW)



**NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT**

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

October 27, 1998

**CERTIFIED MAIL**  
**RETURN RECEIPT NO. P-326-936-472**

Ms. Judy L. Roberts  
L&J Landfarm  
8301 Eunice Highway  
Hobbs, NM 88240

**RE: L&J Landfarm**  
**Commercial Landfarm Permit Application**  
**N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South,**  
**Range 38 East, NMPM, Lea County, New Mexico**

Dear Ms. Roberts:

The New Mexico Oil Conservation Division (OCD) has received L&J Landfarm's application for a commercial waste management facility dated May 10, 1998 and supplemental information. The application proposes the construction of a landfarm soil bio-remediation 711 facility. The proposed facility is located in the N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South, Range 38 East, NMPM, Lea County, New Mexico.

The OCD has reviewed the information provided with the application and concerns submitted by a neighboring landowner. The OCD requires additional information to complete the application Form C-137 that has been filed. L&J Landfarm must submit the following information:

1. Total dissolved solids (TDS) concentration of the ground water most likely to be affected by any discharge. Include the source of the information and how it was determined.
2. Provide the flow direction of the ground water most likely to be affected by any leaks. Include the source of the information and how it was determined.
3. Provide a recent water quality analysis of the ground water, including the name of the analyzing laboratory, sample location, and date the sample was taken. This requirement is made so that background information is available in case of leaks or charges of neighboring groundwater contamination.
4. Provide a detailed diagram and description of flood protection measures (berms, drainage channels, ect.), for at least a 100 year flood event. Specifically how will L&J landfarm prevent runoff and run-on of precipitation and in addition prevent standing water that may lead to infiltration on the southeast corner of the property where the closed depression is shown on the attached map.

- Based on the information to be provided the OCD will re-evaluate the application for the L&J Landfarm.

Sincerely,

J. Watson & Co

## Attachments

xc with attachments: Hobbs OCD Office  
Mr. Bill and Ms. Wilma Hazelwood



NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

October 27, 1998

**CERTIFIED MAIL**  
**RETURN RECEIPT NO. P-326-936-473**

Mr. Bill and Ms. Wilma Hazlewood  
Rt. 69, 42380 State Hwy 18  
Hobbs, NM 88240

Re: **Commercial Landfarm Permit Application**  
**L&J Landfarm**  
**N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South, Range 38**  
**East, NMPM, Lea County, New Mexico**

Dear Mr. and Ms. Hazelwood:

The Oil Conservation Division (OCD) has received your protest to the above referenced landfarm application received by the OCD on September 21, 1998. The OCD has included your name on the list of intervenors in this case and as such you will receive copies of all correspondence concerning the application. The OCD will continue to process the application until it is determined to be administratively approvable or denied. If the permit is administratively denied, the applicant will be notified and it will be its responsibility to request a hearing appealing the denial if it so desires. If the application is determined to be administratively approvable, the OCD will notify the applicant and all intervenors of the conditions under which the permit could be issued. All intervenors will be allowed fifteen (15) days from receipt of the determination to submit final comments on the conditions or request a public hearing in lieu of administrative approval. A request for a public hearing must be in writing and must include the reasons why a hearing should be held.

The OCD would appreciate your input on all environmental and public health issues relating to the application. Please be advised that land use concerns are not within the jurisdiction of the OCD and cannot be considered. Land use issues are the sole jurisdiction of local or county governments. In addition, the movement of goods and materials across state lines is protected by the commerce clause of the U.S. Constitution and may not be subject to OCD regulation.

If you have any questions or comments, please do not hesitate to contact me at (505) 827-7152.

Sincerely:

*Martyn Kelly for Roger Anderson*

Roger C. Anderson, Chief  
Environmental Bureau

xc: **OCD Hobbs**  
**L&J Landfarm**





NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

November 2, 1998

**CERTIFIED MAIL**  
**RETURN RECEIPT NO. P-326-936-477**

Ms. Judy L. Roberts  
J&L Landfarm  
8301 Eunice Highway  
Hobbs, NM 88240

**RE: Public Notice for J & L Landfarm  
Commercial Landfarm Permit Application  
N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South, Range 38  
East, NMPM, Lea County, New Mexico**

Dear Ms. Roberts:

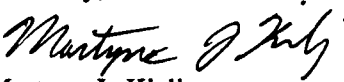
The New Mexico Oil Conservation Division (OCD), has received J&L Landfarm's application for a commercial waste management facility dated May 10, 1998 and supplemental information. The application proposes the construction of a landfarm soil remediation 711 facility. The facility is located in the N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South, Range 38 East, NMPM, Lea County, New Mexico.

Based on the information provided with the application Form C-137 the OCD has prepared a public notice statement that J&L Landfarm must published in the Lovington Daily Record and in the Santa Fe New Mexican newspapers. In addition, a notice shall be sent certified mail to all landowners within one mile of the proposed expansion area and due to the proximity of a Eunice city water well J&L Landfarm will notify the City of Eunice.

J&L Landfarm must send the original certified affidavit of publication from both the Lovington Daily Record and the Santa Fe New Mexican to the OCD Santa Fe office and a copy to the appropriate District office. In addition, J&L Landfarm must send copies of the postal receipt and signed certified return receipt from each of the landowners to both the OCD Santa Fe office and appropriate District office.

If you have any questions please do not hesitate to contact me at (505) 827-7153.

Sincerely,

  
Martyne J. Kieling  
Environmental Geologist

attachments

xc with attachments: Hobbs OCD Office  
Mr. Bill and Ms. Wilma Hazlewood

**NOTICE OF PUBLICATION  
STATE OF NEW MEXICO  
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT  
OIL CONSERVATION DIVISION**

Notice is hereby given that pursuant to the New Mexico Oil Conservation Division Regulations, the following application has been submitted to the Director of the Oil Conservation Division, 2040 S. Pacheco, Santa Fe, New Mexico 87505, Telephone (505) 827-7131:

J&L Landfarm, Judy L Robert, Landowner, 8301 Eunice Highway, Hobbs, New Mexico, 88240, has submitted for approval an application to construct and operate a Rule 711 commercial solids landfarm remediation facility located in the N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South, Range 38 East, NMPM, Lea County, New Mexico. Hydrocarbon contaminated soils associated with oil and gas production will be remediated by spreading them on the ground surface in 6 inch lifts or less and periodically disking them to enhance biodegradation of contaminants. Ground water most likely to be affected by any accidental discharges at the surface is estimated to be at a depth of 42 to 69 feet with a total dissolved solids concentration estimated to be at 1038 parts per million. The facility is underlain by the Triassic red beds. The permit application addresses the construction, operations, spill/leak prevention and monitoring procedures to be incorporated at the proposed site.

Any interested person may obtain further information from the Oil Conservation Division and may submit written comments to the Director of the Oil Conservation Division at the address given above. The application may be viewed at the above address between 8:00 a.m. and 4:00 p.m., Monday thru Friday. Prior to ruling on any proposed application, the Director of the Oil Conservation Division shall allow at least thirty (30) days after the date of publication of this notice during which comments may be submitted to her and public hearing may be requested by any interested person. Request for public hearing shall set forth the reasons why a hearing shall be held. A hearing will be held if the director determines that there is significant public interest.

If no hearing is held, the Director will approve or disapprove the application based on the information available. If a public hearing is held, the Director will approve the application based on the information in the application and information presented at the hearing.

GIVEN under the Seal of New Mexico Oil Conservation Commission at Santa Fe, New Mexico, on this 2nd day of November, 1998.

STATE OF NEW MEXICO  
OIL CONSERVATION DIVISION



for **LORI WROTENBERY, Director**

SEAL



STATE OF NEW MEXICO  
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION  
2040 S. PACHECO  
SANTA FE, NEW MEXICO 87505  
(505) 827-7131

February 5, 1999

**CERTIFIED MAIL**  
**RETURN RECEIPT NO. P-326-936-507**

Ms. Judy L. Roberts  
J&L Landfarm.  
8301 Eunice Highway  
Hobbs, NM 88240

**RE:   OCD Rule 711 Permit Approval NM-01-0023**  
**J&L Landfarm**  
**Commercial Landfarm**  
**N/2 N/2 of Section 9 and the N/2 N/2 of Section 10, Township 20 South, Range 38**  
**East, NMPM, Lea County, New Mexico**

Dear Ms. Roberts:

The permit application for the J&L Landfarm (J&L) commercial surface waste management landfarm facility located in the N/2 N/2 of Section 9 and the N/2 N/2 of Section 10, Township 20 South, Range 38 East, NMPM, Lea County, New Mexico, **is hereby approved** in accordance with New Mexico Oil Conservation Division (OCD) Rule 711 under the conditions contained in the enclosed attachment. **This permit approval is conditional upon the receipt and approval by the Director of financial assurance in the amount of \$168,000.**

According to the schedule outlined in the financial assurance section of the enclosed attachment, 25% of the \$168,000 bond (\$42,000) is required within thirty (30) days of the date of this permit approval letter. The application consists of the permit application Form C-137 dated May 10, 1998, the public notice dated November 10, 1998, and supplemental materials dated July 20, 1998 and November 12, 1998.

The operation, monitoring and reporting shall be as specified in the enclosed attachment. All modifications and alternatives to the approved landfarming methods must receive prior OCD approval. J&L is required to notify the Director of any facility expansion or process modification and to file the appropriate materials with the Division.

Please be advised approval of this facility permit does not relieve J&L Landfarm of liability should your operation result in pollution of surface water, ground water, or the environment. In addition, OCD approval does not relieve J&L Landfarm of responsibility for compliance with other federal, state or local laws and/or regulations.

Ms. Judy L. Roberts  
February 5, 1999  
Page 2

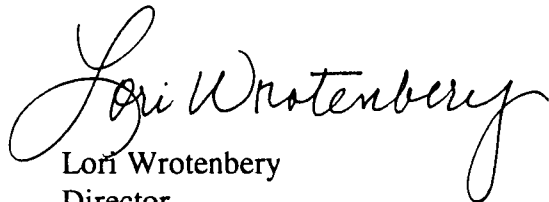
Please be advised that all tanks exceeding 16 feet in diameter and exposed pits, ponds or lagoons must be screened, netted or otherwise rendered nonhazardous to migratory birds. In addition, OCD Rule 310 prohibits oil from being stored or retained in earthen reservoirs, or open receptacles.

The facility is subject to periodic inspections by the OCD. The conditions of this permit will be reviewed by the OCD no later than five (5) years from the date of this approval and the facility will be inspected at least once a year. In addition, the closure cost estimate will be reviewed according to prices and remedial work estimates at the time of the five (5) year review. The financial assurance may be adjusted to incorporate any closure cost changes.

Enclosed are two copies of the conditions of approval. **Please sign and return one copy to the OCD Santa Fe Office within five working days of receipt of this letter.**

If you have any questions please do not hesitate to contact Martyne J. Kieling at (505) 827-7153.

Sincerely,



Lori Wrotenberg  
Director

LW/mjk

xc with attachments:  
Hobbs OCD Office

**PERMIT NM-01-0023**  
**J & L LANDFARM**  
**N/2 N/2 of Section 9 and the N/2 N/2 of Section 10, Township 20 South, Range 38 East,**  
**NMPM, Lea County, New Mexico**  
**(February 5, 1999)**

**LANDFARM CONSTRUCTION**

1. The facility will be fenced and have a sign at the entrance. The sign will be legible from at least fifty (50) feet and contain the following information: a) name of the facility; b) location by section, township and range; and c) emergency phone number.
2. Contaminated soils will not be placed within one hundred (100) feet of the boundary of the facility.
3. Contaminated soils will not be placed within twenty (20) feet of any pipelines crossing the landfarm. In addition, no equipment will be operated within ten (10) feet of a pipeline. All pipelines crossing the facility will have surface markers identifying the location of the pipelines.
4. The portion of the facility containing contaminated soils will be bermed to prevent runoff and runon. A perimeter berm no less than five (5) feet above grade with a base of eight (8) feet and a crown of two (2) feet will be constructed and maintained such that it is capable of containing precipitation from a one-hundred year flood for the specific region. Individual cells will be contained with a berm five (5) feet above grade with a base of eight (8) feet and a crown of two (2) feet.
5. Diverted storm water runon may be stored in above ground tanks and applied to the landfarm for dust suppression and to enhance bioremediation.
6. All above-ground tanks located at the facility and containing materials other than fresh water must be placed on an impermeable pad. The tanks will be labeled as to contents and hazards and will be bermed to contain one and one-third the volume of the largest tank or all interconnected tanks

**LANDFARM OPERATION**

1. Disposal will occur only when an attendant is on duty. The facility will be secured when no attendant is present.

2. All contaminated soils received at the facility will be spread and disked within 72 hours of receipt.
3. Soils will be spread on the surface in six-inch lifts or less.
4. Soils will be disked a minimum of one time every two weeks (biweekly) to enhance biodegradation of contaminants.
5. Exempt contaminated soils will be placed in the landfarm so that they are physically separate (*i.e.*, bermed) from non-exempt contaminated soils. There will be no mixing of exempt and non-exempt soils.
6. Successive lifts of contaminated soils will not be spread until a laboratory measurement of total petroleum hydrocarbons (TPH) in the previous lift is less than 100 parts per million (ppm), the sum of all aromatic hydrocarbons (BTEX) is less than 50 ppm, and benzene is less than 10 ppm. Comprehensive records of the laboratory analyses and the sampling locations will be maintained at the facility. Authorization from the OCD will be obtained prior to application of successive lifts and/or removal of the remediated soils.
7. Moisture will be added as necessary to enhance bioremediation and to control blowing dust. There will be no ponding, pooling or run-off of water allowed. Any ponding of precipitation will be removed within twenty-four (24) hours of discovery.
8. Enhanced bio-remediation through the application of microbes (bugs) and/or fertilizers will only be permitted after prior approval from the OCD. Requests for application of microbes or fertilizers will include the location of the area designated for the program, the composition of additives, and the method, amount and frequency of application.

## WASTE ACCEPTANCE CRITERIA

1. The facility is authorized to accept only:
  - a. Oilfield wastes that are exempt from RCRA Subtitle C regulations. All loads of these wastes received at the facility shall be accompanied by a "Generator Certificate of Waste Status" signed by the generator.
  - b. "Non-hazardous" non-exempt oilfield wastes on a case-by-case basis after conducting a hazardous waste characterization including corrosivity, reactivity, ignitability, and toxic constituents. The samples for these analyses will be obtained from the wastes prior to removal from the generator's facility and without dilution in accordance with EPA SW-846 sampling procedures. All "non-hazardous" non-exempt wastes

received at the facility shall be accompanied by:

- i. An approved OCD Form C-138 "Request For Approval To Accept Solid Waste."
  - ii. A "Generator Certificate of Waste Status" signed by the generator.
  - iii. A verification of waste status issued by the appropriate agency, for wastes generated outside OCD jurisdiction. The agency verification is based on specific information on the subject waste submitted by the generator and demonstrating the exempt or non-hazardous classification of the waste.
- c. Non-oilfield wastes that are non-hazardous if ordered by the Department of Public Safety in a public health emergency. OCD approval must be obtained prior to accepting the wastes.
2. At no time will any OCD-permitted surface waste management facility accept wastes that are hazardous by either listing or characteristic testing
  3. No free liquids or soils with free liquids will be accepted at the facility.
  4. The transporter of any wastes to the facility will supply a certification that wastes delivered are those wastes received from the generator and that no additional materials have been added.

#### **TREATMENT ZONE MONITORING**

1. One (1) background soil sample will be taken from the center portion of the landfarm two (2) feet below the native ground surface prior to operation. The sample will be analyzed for total petroleum hydrocarbons (TPH), major cations/anions, volatile aromatic organics (BTEX), and eight (8) RCRA heavy metals using EPA-approved methods.
2. A treatment zone not to exceed three (3) feet beneath the landfarm native ground surface will be monitored. A minimum of one random soil sample will be taken from each individual cell, with no cell being larger than five (5) acres, six (6) months after the first contaminated soils are received in the cell and then quarterly thereafter. The sample will be taken at two (2) to three (3) feet below the native ground surface.
3. The soil samples will be analyzed using EPA-approved methods for total petroleum hydrocarbons (TPH) and volatile aromatic organics (BTEX) quarterly and for major cations/anions and eight (8) RCRA heavy metals annually.

4. After obtaining the soil samples the boreholes will be filled with an impermeable material such as cement or bentonite.

## **REPORTING**

1. Analytical results from the treatment zone monitoring will be submitted to the OCD Santa Fe office **within thirty (30) days** of receipt from the laboratory.
2. Background sample analytical results will be submitted to the OCD Santa Fe office **within thirty (30) days** of receipt from the laboratory.
3. In accordance with OCD Rule 116, the applicant will notify the **OCD Hobbs District office within 24 hours** of any fire, break, leak, spill, or blow out.
4. Comprehensive records of all material disposed of at the facility will be maintained at the facility. The records for each load will include: 1) generator; 2) origin; 3) date received; 4) quantity; 5) certification of exempt status or analysis for hazardous constituents if non-exempt; 6) NORM status declaration; 7) transporter; 8) exact cell location; and 9) any addition of microbes, moisture, fertilizers, *etc.*
5. The OCD will be notified prior to the installation of any pipelines or wells or other construction within the boundaries of the facility.

## **FINANCIAL ASSURANCE**

1. Financial assurance in the amount of **\$168,000** (the estimated cost of closure) in the form of a surety or cash bond or a letter of credit, which is approved by the Division, is required from J&L Landfarm for the commercial surface waste management facility.

**By March 5, 1999** J&L Landfarm must submit financial assurance in the amount of **\$42,000**.

**By March 5, 2000** or when the facility is filled to 50% of the permitted capacity, whichever comes first, J&L Landfarm must submit financial assurance in the amount of **\$84,000**.

**By March 5, 2001** or when the facility is filled to 75% of the permitted capacity, whichever comes first, J&L Landfarm must submit financial assurance in the amount of **\$126,000**.



**By March 5, 2002** or when the facility is filled to 100% of the permitted capacity, whichever comes first, J&L Landfarm must submit financial assurance in the amount of **\$168,000**.

2. The facility is subject to periodic inspections by the OCD. The conditions of this permit and the facility will be reviewed no later than five (5) years from the date of this approval. In addition, the closure cost estimate will be reviewed according to prices and remedial work estimates at the time of review. The financial assurance may be adjusted to incorporate any closure cost changes.

### **CLOSURE**

1. The OCD Santa Fe and Hobbs offices will be notified when operation of the facility is discontinued for a period in excess of six (6) months or when the facility is to be dismantled. Upon cessation of landfarming operations for six (6) consecutive months, the operator shall complete cleanup of constructed facilities and restoration of the facility site within the following six (6) months, unless an extension of time is granted by the Director.
2. A closure plan to include the following procedures will be submitted to the OCD Santa Fe office for approval:
  - a. When the facility is to be closed no new material will be accepted.
  - b. Existing landfarm soils will be remediated until they meet the OCD standards in effect at the time of closure.
  - c. The soils beneath the landfarm cells will be characterized as to the total petroleum hydrocarbons (TPH) and volatile aromatic organics (BTEX) content in order to determine potential migration of contamination beneath the facility.
  - d. Contaminated soils exceeding OCD closure standards for the site will be removed or remediated.
  - e. The area will be contoured, seeded with native grasses and allowed to return to its natural state. If the landowner desires to keep existing structures, berms, or fences for future alternative uses the structures, berms, or fences may be left in place.
  - f. Closure will be pursuant to all OCD requirements in effect at the time of closure, and any other applicable local, state and/or federal regulations.

J&L Landfarm  
711 Permit NM-01-0023  
February 5, 1999  
Page 6

**CERTIFICATION**

J&L Landfarm, by the officer whose signature appears below, accepts this permit and agrees to comply with all terms and conditions contained herein. J&L Landfarm further acknowledges that these conditions and requirements of this permit may be changed administratively by the Division for good cause shown as necessary to protect fresh water, human health and the environment.

Accepted:

J & L LANDFARM

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_



#1



#2



#3





#4



#5

RECEIVED

NOV 10 1998

Environment. Bureau  
Oil Conservation Division

Photographs #1, #2, #3 show the low spot area where County Road and Highway 18 intersect. Dirt or gravel is stacked now for re-surfacing of county road. Landfarm site is to northwest of this area across county road.

Photographs #4 and #5 show where due to grading and maintaining of county road dirt has been pushed against fence line. This view is looking northwest to where the site will be constructed.



# ARDINAL LABORATORIES

PHONE (915) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

ANALYTICAL RESULTS FOR  
J & L LANDFARM  
ATTN: JUDY ROBERTS  
8301-EUNICE HWY  
HOBBS, NM 88240  
FAX TO:

Receiving Date: 10/28/98  
Reporting Date: 10/29/98  
Project Number: NOT GIVEN  
Project Name: NOT GIVEN  
Project Location: NOT GIVEN

Analysis Date: 10/28/98  
Sampling Date: 10/28/98  
Sample Type: GROUNDWATER  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: AH

| LAB NUMBER                  | SAMPLE ID | TDS<br>(mg/L) |
|-----------------------------|-----------|---------------|
| H3901-1                     | NOT GIVEN | 1038          |
|                             |           |               |
|                             |           |               |
|                             |           |               |
|                             |           |               |
|                             |           |               |
|                             |           |               |
| Quality Control             |           | NR            |
| True Value QC               |           | NR            |
| % Recovery                  |           | NR            |
| Relative Percent Difference |           | 0.7           |

SAMPLE TAKEN FROM  
WATER WELL OF  
BILL'S WILKIN HAZELWOOD  
10/28/98

METHOD: EPA 600/4-79-020, 160.1

  
Chemist

10/29/98  
Date



# ARDINAL LABORATORIES

PHONE (915) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

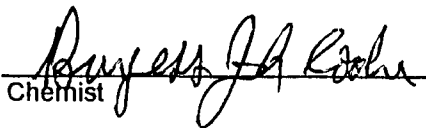
ANALYTICAL RESULTS FOR  
J & L LANDFARM  
ATTN: JUDY ROBERTS  
8301 EUNICE HWY  
HOBBS, NM 88240  
FAX TO:

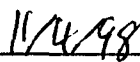
Receiving Date: 10/28/98  
Reporting Date: 11/04/98  
Project Number: NOT GIVEN  
Project Name: HAZELWOOD WW.  
Project Location: NOT GIVEN

Sampling Date: 10/28/98  
Sample Type: GROUNDWATER  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: BC

| LAB NO.                     | SAMPLE ID  | TPH<br>(mg/kg) | BENZENE<br>(mg/kg) | TOLUENE<br>(mg/kg) | ETHYL<br>BENZENE<br>(mg/kg) | TOTAL<br>XYLENES<br>(mg/kg) |
|-----------------------------|------------|----------------|--------------------|--------------------|-----------------------------|-----------------------------|
| ANALYSIS DATE:              |            | 11/02/98       | 11/02/98           | 11/02/98           | 11/02/98                    | 11/02/98                    |
| H3901-1                     | WATER WELL | 0.55           | <0.002             | <0.002             | <0.002                      | <0.006                      |
|                             |            |                |                    |                    |                             |                             |
|                             |            |                |                    |                    |                             |                             |
|                             |            |                |                    |                    |                             |                             |
|                             |            |                |                    |                    |                             |                             |
|                             |            |                |                    |                    |                             |                             |
| Quality Control             |            | 152            | 0.099              | 0.109              | 0.106                       | 0.315                       |
| True Value QC               |            | 150            | 0.100              | 0.100              | 0.100                       | 0.300                       |
| % Recovery                  |            | 101            | 99.2               | 109                | 106                         | 105                         |
| Relative Percent Difference |            | 1.6            | 6.7                | 8.3                | 10.2                        | 7.6                         |

METHODS: TRPHC - EPA 600/7-79-020, 418.1; BTEX - EPA SW846-8020, 8260

  
Chemist

  
Date

H3901-4.XLS

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services hereunder by Cardinal, regardless of whether such claim is based upon any of the above-stated reasons or otherwise.



PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

## FAX TO:

Sampling Date: 10/28/98  
Sample Type: GROUNDWATER  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: AH

|          |             |       |       |       |       |       |
|----------|-------------|-------|-------|-------|-------|-------|
| METHODS: | SM4500-CI-B | 375.4 | 310.1 | 310.1 | 150.1 | 160.1 |
|----------|-------------|-------|-------|-------|-------|-------|

Date \_\_\_\_\_





PHONE (915) 673-7001 • 2111 BEECHWOOD • ABILENE, TX 79603

PHONE (505) 393-2326 • 101 E. MARLAND • HOBBS, NM 88240

ANALYTICAL RESULTS FOR  
J & L LANDFARM  
ATTN: JUDY ROBERTS  
8301 EUNICE HWY  
HOBBS, NM 88240  
FAX TO:

Receiving Date: 10/28/98  
Reporting Date: 11/04/98  
Project Number: NOT GIVEN  
Project Name: HAZELWOOD WW.  
Project Location: NOT GIVEN

Sampling Date: 10/28/98  
Sample Type: GROUNDWATER  
Sample Condition: COOL & INTACT  
Sample Received By: AH  
Analyzed By: AH

## RCRA METALS

Unit State Gw Standards

LAB NUMBER SAMPLE ID

As ppm    <sup>0.05 ppm</sup> Ag ppm    <sup>1.0 ppm</sup> Ba ppm    Cd ppm    <sup>0.05 ppm</sup> Cr ppm    Pb ppm    Hg ppm    Se ppm

|                             |          |          |          |          |          |          |          |          |
|-----------------------------|----------|----------|----------|----------|----------|----------|----------|----------|
| ANALYSIS DATE:              | 11/03/98 | 11/02/98 | 11/02/98 | 11/02/98 | 11/02/98 | 11/02/98 | 11/02/98 | 11/03/98 |
| H3901-1 WATER WELL          | 0.012    | 0.014    | 6.786    | <0.01    | 0.075    | <0.01    | <0.02    | <0.1     |
|                             |          |          |          |          |          |          |          |          |
|                             |          |          |          |          |          |          |          |          |
|                             |          |          |          |          |          |          |          |          |
|                             |          |          |          |          |          |          |          |          |
|                             |          |          |          |          |          |          |          |          |
| Quality Control             | 0.061    | 4.715    | 21.93    | 3.942    | 4.484    | 4.902    | 0.0047   | 0.058    |
| True Value QC               | 0.050    | 5.000    | 20.00    | 4.000    | 5.000    | 5.000    | 0.0050   | 0.050    |
| % Recovery                  | 122      | 94       | 110      | 99       | 90       | 98       | 94       | 116      |
| Relative Percent Difference | 12.01    | 0.32     | 4.07     | 0.53     | 4.66     | 1.58     | -        | 0.88     |

|                           |       |       |       |       |       |       |       |       |
|---------------------------|-------|-------|-------|-------|-------|-------|-------|-------|
| METHODS: EPA 600/4-79-020 | 206.2 | 272.1 | 208.1 | 213.1 | 218.1 | 239.1 | 245.1 | 270.2 |
| METHODS: SW-846           | 7060A | 7760A | 7080A | 7130  | 7190  | 7420  | 7470A | 7740  |

*Bryant J. R. Cook*  
Chemist

*11/4/98*  
Date

PLEASE NOTE: Liability and Damages. Cardinal's liability and client's exclusive remedy for any claim arising, whether based in contract or tort, shall be limited to the amount paid by client for analyses. All claims, including those for negligence and any other cause whatsoever shall be deemed waived unless made in writing and received by Cardinal within thirty (30) days after completion of the applicable service. In no event shall Cardinal be liable for incidental or consequential damages, including, without limitation, business interruptions, loss of use, or loss of profits incurred by client, its subsidiaries, affiliates or successors arising out of or related to the performance of services hereunder by Cardinal, regardless of whether such claim is based upon any of the above-stated reasons or otherwise.

To: Martyne J. Kieling  
Environment Geologist  
New Mexico Energy, Minerals &  
Natural Resources Department

NOV 12 1993

RECEIVED

From: Judy L. Roberts  
J&L Landfarm

NOV 13 1998

Environmental Bureau  
Oil Conservation Division

Dear Ms. Kieling:

Attached please find additional information concerning my landfarm application. In addition, I am sending the laboratory results on water analysis of the groundwater.

I have received most of the signed postal return receipts for the neighboring landowners and am enclosing a copy of each. I will send all others when I receive them.

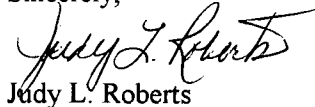
Also, attached are detailed diagrams and drawings of how I propose to construct the initial cells of the landfarm, beginning in section 9.

I have taken some pictures of the southeast corner of the proposed landfarm site. Hopefully, they will help in addressing the issue of the corner where there seems to be a question of a lakebed or depression. This area is addressed in #4 of the additional information you required. I hope this also helps.

The legal notification was placed in the Lovington Leader Newspaper and the Santa Fe New Mexican. As soon as I receive the original certified affidavit of publication I will send them to you.

I am sending a copy of all of the above information to the Hobbs OCD office.

Sincerely,



Judy L. Roberts

attachments

cc: Hobbs OCD office

**TO: New Mexico Energy, Minerals &  
Natural Resources Department**

**FROM: Martyne J. Kieling  
Environment Geologist**

**RECEIVED**

NOV 12 1998

**RE: J&L Landfarm Application**

Environmental Bureau  
Oil Conservation Division

1. Total dissolved solids. Please see attached copy from Cardinal Labs. The water sample submitted was taken from Mr. & Mrs. Hazelwood's well.
2. Lea County's ground water flow is from the northwest (the High Plains) to the southeast (towards Texas). Lea County derives it's water from underground aquifer in the Ogallala Water Basin. The geological flow of the water is determined from the study of U.S. underground geological maps and from studies of State Engineering Office of the underground aquifer and the formations of this area.  
The source of this information was referenced from the State Engineering Office in Roswell, New Mexico. Contact person was Johnny Hernandez.
3. Lab tests for water quality analysis were conducted on the ground water most likely affected. Please see attached copy of tests from Cardinal Labs. This water sample was also taken from Mr. & Mrs. Hazelwood's well.
4. Attached is a diagram and description of measures that will be taken, along with alternative measures for flood protection and preventing run-on or run-off of precipitation. I have enclosed pictures of the southeast corner. The depression spoken of is on the shoulder of County Road C-45 and Highway 18. I don't believe this to be a lakebed. Dirt, for purposes of road repair, has been stacked and stored for periods of time. It is a small low spot caused by the digging and spreading of this dirt to repair the county road. In any case, water does not run off or run on the southeast corner of proposed landfarm site. Due to county road work, the part of my property bordering County Road C-45 has already been somewhat bermed from dirt being pushed up and against the fence line. With the required 100 feet facility buffer zone constructed and the berming of the landfarm, run-off or run-on will be contained and controlled.

If, in the event of a 100 year flood or such as to cause ponding or washout, alternative measures such as installing water holding tanks can and will be implemented. Water will be held in tanks til such a time the moisture can be added or re-introduced to the active part of the landfarm to control blowing dust or during dry spells. Also, see attached diagrams of how the berms will be constructed and alternative ways in which water can or will be channeled off of the active cells of the landfarm.

The diagram shows how each containment cell will contain 5 acres or less of surface area. Containment dykes will be five feet (5') in height with a base of eight feet (8') and crown of two feet (2'). Since the flow of surface water is from the northwest to the southeast in general, diversionary dykes will be installed to divert any rapid flowing

surface water from the containment areas. All containment areas will be levelled by equipment such as dozers or motor graders so as to have a level saturation area. A secondary containment will be a cut drainage ditch on the north side of the containment area leading to a collection area. As more area is needed the diversion and secondary containment areas are moved further and a new collection area is established.

5. Odors from the landfarm should be almost non-existent. I contacted a transporter of the type of solid waste dirt that will be held in the landfarm. No chemical additives, odor-causing fluids, or semi-solids will be hauled into the landfarm. Also, any "moist" or "heavy solids" will first be stabilized or blended on location at the point of generation before loading and hauling into the landfarm.

After "solid waste" has been transported into landfarm all material will be plowed and disked to a 6" lift within a 24 hour period ( the OCD requirement is a 72 hour period). This same procedure will be repeated one (1) time weekly until the total completion of the biodegradation process.

Disking and plowing during the above process will be carefully planned as not to cause dust particles or hydro-carbons to be circulated in air during windy conditions. For dry and windy conditions, moisture will be added to active cells to control the possibility of airborne particles. If odors do become a problem, I will contact the OCD office or EPA for any suggestions on other control procedures.

As my permanent residence is located on and adjacent to the proposed landfarm site, (see Diagram A), I have a strong and definite desire to see that this facility is not or does not become a hazard to the environment. I will monitor the site to see that this facility does not become offensive, odor-wise, or as an unappealing eyesore to my neighbors or myself.

Diagram A

|||||-cattle guard

W-cattle guard

21-5 acre cells

Sec 10

Sec 9

Sec 9

Sec 8

Sec 3

Sec 4

Sec 5

(my HOME)

House

Private Road

## Shell Pipeline

# Railroad Tracks

Hobbs Gas Line

fence

## Eunice

State Hwy 18

Hobbs

(North)

# Affidavit of Publication

STATE OF NEW MEXICO )  
 ) ss.  
COUNTY OF LEA )

Joyce Clemens being first duly sworn on oath deposes and says that he is Adv. Director of THE LOVINGTON DAILY LEADER, a daily newspaper of general paid circulation published in the English language at Lovington, Lea County, New Mexico; that said newspaper has been so published in such county continuously and uninterruptedly for a period in excess of Twenty-six (26) consecutive weeks next prior to the first publication of the notice hereto attached as hereinafter shown; and that said newspaper is in all things duly qualified to publish legal notices within the meaning of Chapter 167 of the 1937 Session Laws of the State of New Mexico.

That the notice which is hereto attached, entitled  
Notice of Publication

~~and numbered~~ in the

xxxxxxx  
Court of Lea

~~County xxxxxx~~, was published in a regular and entire issue of THE LOVINGTON DAILY LEADER and not in any supplement thereof, ~~once each week on the~~

~~xxxxx day of the week~~ for One (1) Day

~~consecutive weeks~~ beginning with the issue of

November 5, 19 98

and ending with the issue of

November 5, 19 98

And that the cost of publishing said notice is the sum of \$ 52.21

which sum has been (Paid) (xxxxxx) as Court Costs

*Joyce Clemens*

Subscribed and sworn to before me this

day of November 5, 19 98

*Dellie Schilling*  
Notary Public Lea County, New Mexico

My Commission Expires June 22, 2002

## LEGAL NOTICE NOTICE OF PUBLICATION STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION  
DIVISION  
Notice is hereby given that pursuant to the New Mexico Oil Conservation Division Regulations, the following application has been submitted to the Director of the Oil Conservation Division, 2040 S. Pacheco, Santa Fe, New Mexico 87505, Telephone (505) 827-7131:

J&L Landfarm, Judy L. Robert, Landowner, 8301 Eunice Highway, Hobbs, New Mexico, 88240, has submitted for approval an application to construct and operate a Rule 711 commercial solids landfarm remediation facility located in the N/2 of N/2 of Section 9 and the N/2 of N/2 of Section 10, Township 20 South, Range 38 East, NMPM,

Lea County, New Mexico. Hydrocarbon contaminated soils associated with oil and gas production will be remediated by spreading them on the ground surface in 6 inch lifts or less and periodically disking them to enhance biodegradation of contaminants. Ground water most likely to be affected by any accidental discharges at the surface is estimated to be at a depth of 42 to 69 feet with a total dissolved solids concentration estimated to be at 1038 parts per million. The facility is underlain by the Triassic red beds. The permit application addresses the construction, operations, spill/leak prevention and monitoring procedures to be incorporated at the proposed site.

Any interested person may obtain further information from the Oil Conservation Division and may submit written comments to the Director of the Oil Conservation Division at the address given above. The application may be viewed at the above address between 8:00 a.m. and 4:00 p.m., Monday thru Friday. Prior to ruling on any proposed application, the Director of the Oil Conservation Division shall allow, at least thirty (30) days after the date of publication of this notice during which comments may be submitted to her and public hearing may be requested by any interested person. Request for public hearing shall set forth the reasons why a hearing shall be held. A hearing will be held if the director deter-

mines that there is significant public interest.

If no hearing is held, the Director will approve or disapprove the application based on the information available. If a public hearing is held, the Director will approve the application based on the information in the application and information presented at the hearing.

GIVEN under the Seal of New Mexico Oil Conservation Commission at Santa Fe, New Mexico, on this 2nd day of November, 1998.

STATE OF  
NEW MEXICO  
OIL CONSERVATION  
DIVISION  
Roger Anderson for  
LORI WROTENBERY,  
Director

(SEAL)  
Published in the Lovington Daily Leader November 5, 1998.

# The Santa Fe New Mexican

Since 1849. We Read You.

NOV 25 1998

JUDY L. ROBERTS  
8301 EUNICE HWY  
HOBBS, NM 88240

AD NUMBER: 55282 ACCOUNT: 01001  
LEGAL NO: 64435 P.O.#:  
174 LINES 1 time(s) at \$ 111.36  
AFFIDAVITS: 5.25  
TAX: 7.29  
TOTAL: 123.90

## AFFIDAVIT OF PUBLICATION

### NOTICE OF PUBLICATION STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT OIL CONSERVATION DIVISION

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GIVEN under the Seal of New Mexico Oil Conservation Commission at Santa Fe, New Mexico, on this 2nd day of November, 1998.

STATE OF NEW MEXICO  
OIL CONSERVATION  
DIVISION

LORI WROTENBERY,  
Director

Legal #64435  
Pub. November 10, 1998

STATE OF NEW MEXICO  
COUNTY OF SANTA FE

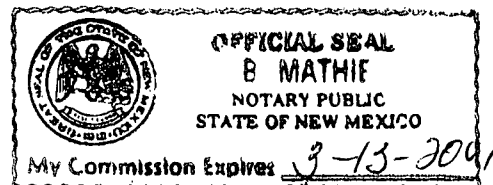
I, B. Reiner being first duly sworn declare and say that I am Legal Advertising Representative of THE SANTA FE NEW MEXICAN, a daily newspaper published in the English language, and having a general circulation in the Counties of Santa Fe and Los Alamos, State of New Mexico and being a Newspaper duly qualified to publish legal notices and advertisements under the provisions of Chapter 167 on Session Laws of 1937; that the publication #64435 a copy of which is hereto attached was published in said newspaper 1 day(s) between 11/10/1998 and 11/10/1998 and that the notice was published in the newspaper proper and not in any supplement; the first publication being on the 10 day of November, 1998 and that the undersigned has personal knowledge of the matter and things set forth in this affidavit.

/s/ Betsy Reiner  
LEGAL ADVERTISEMENT REPRESENTATIVE

Subscribed and sworn to before me on this  
10 day of November A.D., 1998

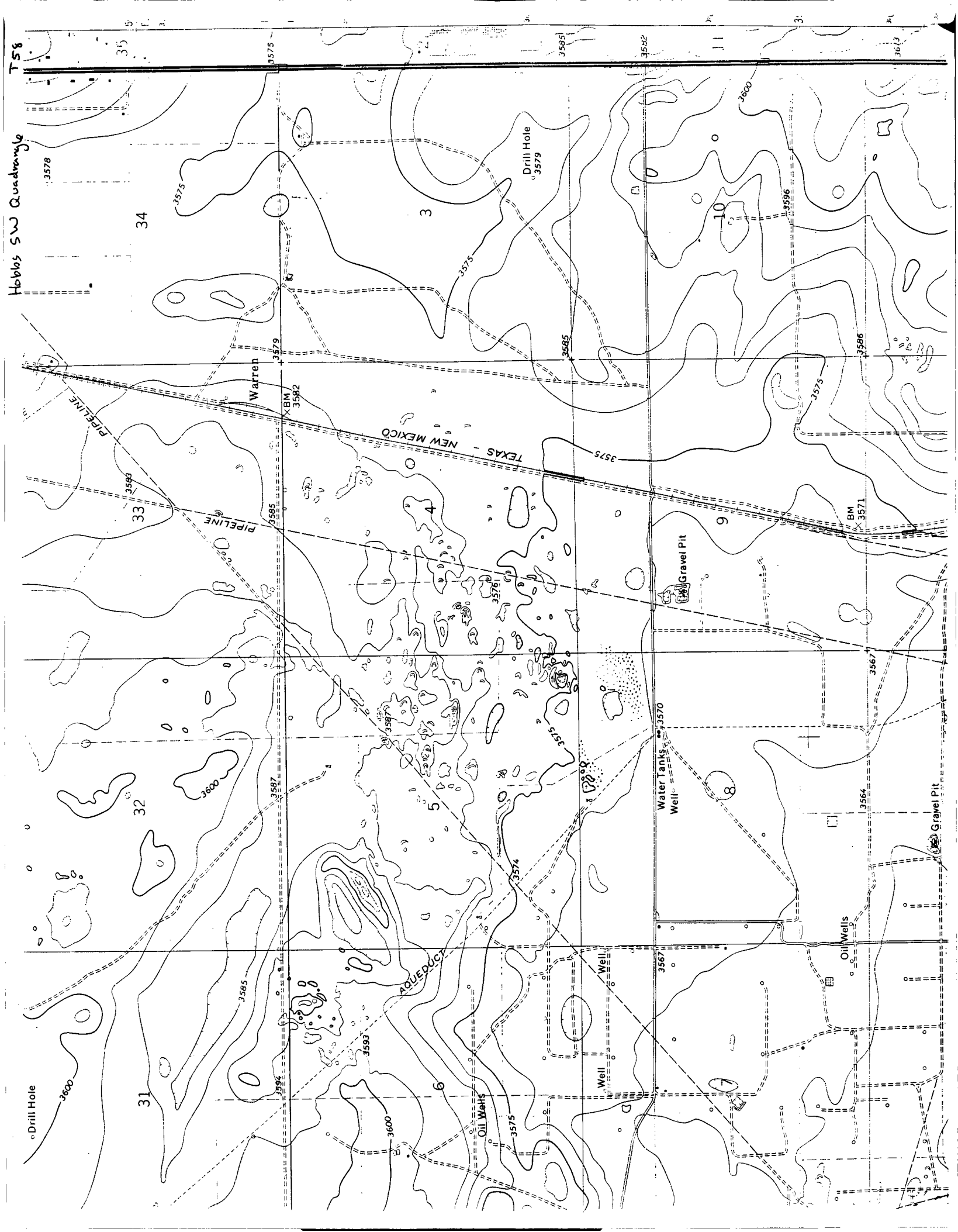
Notary B Mathie

Commission Expires 3-13-2001

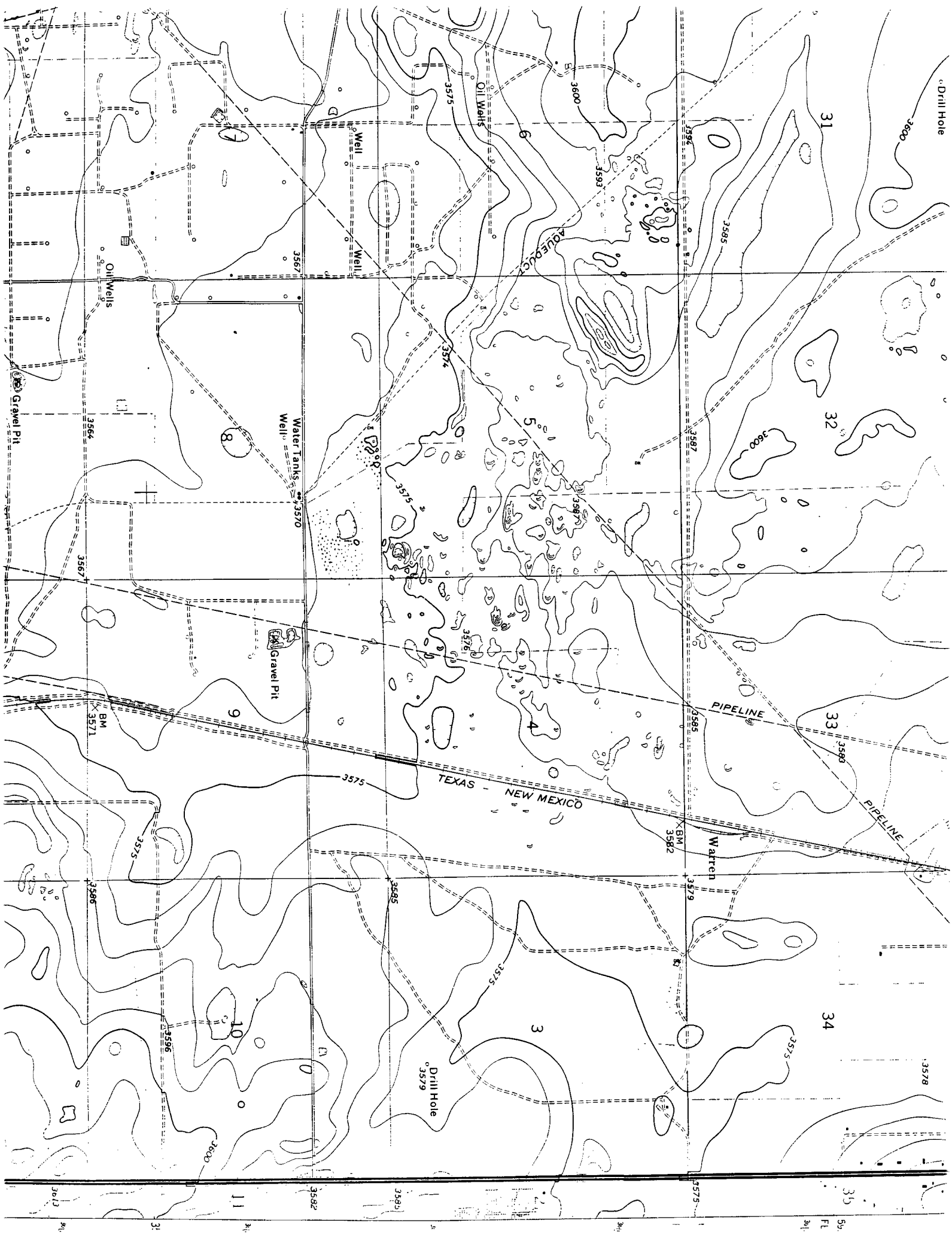


Hobbs SW Quadrangle

T58







**RECEIVED**

NOV 12 1998

Environmental Bureau  
Oil Conservation Division

**NOTIFICATION OF APPLICATION TO STATE OF NEW MEXICO TO INSTALL  
LANDFARM WASTE MANAGEMENT FACILITY.**

This is to notify all landowners within one (1) mile of proposed facility that application has been made to State of New Mexico to construct a landfarm waste management facility.

**DESCRIPTION OF FACILITY:**

Facility will be a surface impoundment for the disposal of solid oil treated dirt. Area to be designated for facility will be two-hundred & eighty (280) acres.

**LOCATION OF FACILITY:**

Legal description of area: N2/4 N2/4 Section 9/10 Township 20 Range 38, Lea County, New Mexico.

**OPERATOR OF FACILITY:** J&L Landfarm

**CONTACT PERSON:** Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240  
Tele(505-393-9697

For a viewing of the completed application, you may call or write me at the above address or contact the local Oil Conservation Division at 1000 W. Broadway, Hobbs, New Mexico, (505)393-6161.

Judy L. Roberts

Landowner of Facility: Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240  
(505)393-9697

RECEIVED

NOV 12 1998

Environmental Bureau  
Oil Conservation Division

Landowners within one (1) mile of site:

Wilma Hardin  
P.O. Box 5458  
Hobbs, New Mexico 88240

Gary Don Henderson  
P.O. 725  
Lovington, New Mexico 88260

R.E. Hudson  
P.O. Box 1572  
Edgewood, New Mexico 87015

J. Marvin Haynes, et al.  
2 Wisconsin Circle Suite 400  
Chevy Chase, Maryland 20815

Sabino Calvillo  
1217 Landfill Dr.  
Hobbs, New Mexico 88240

Ruben Calvillo & Debbie Montoya  
St. Rt. A Box 191  
Hobbs, New Mexico 88240

Dorse S. Carson  
P.O. Box 25547  
Albuquerque, New Mexico 87125

Chris M. Furneaux  
Box 575  
Walden, Colorado 80480

Larry Maddox  
P.O. Box 93  
Junction, Texas 76849

Kevin Mattingly  
221 Victoria Lane  
Hobbs, New Mexico 88240

Will N. Terry, Trust, et al.  
Box 686  
Hobbs, New Mexico 88240

Lida B. Meyers  
St. Rt. A Box 142  
Hobbs, New Mexico 88240

Bruce Morris Holding Co.  
6253 Hollywood Blvd. #614  
Los Angeles, California 90028

Oswaldo Juarez, Sr.  
514 E. Alston  
Hobbs, New Mexico 88240

City of Eunice  
Box 147  
Eunice, New Mexico 88231

Adrian F. Zamora  
8000 So. Eunice Highway  
Hobbs, New Mexico 88240

Jesus M. Batista  
1730 N. Robert Lane  
Hobbs, New Mexico 88240

Abe Neufeld, et al.  
2805 Rose Road  
Hobbs, New Mexico 88240

Efrain Rodriguez  
600 E. Mesquite  
Hobbs, New Mexico 88240

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

WILMA HARDIN  
P.O. Box 5458  
LOBBS, NEW MEXICO  
88240

4a. Article Number 2102 523 713

RET REC REQ

4b. Service Type

- |                                                                    |                                               |
|--------------------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Registered                                | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                              | <input type="checkbox"/> Insured              |
| <input checked="" type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

CITY OF EUNICE  
Box 147  
EUNICE, NEW MEXICO  
88231

4a. Article Number 2186 746 482

RET REC REQUESTED

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery

SEP 3 1998

5. Received By: (Print Name)

Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

GARY DON HENDERSON  
P.O. Box 725  
LOVINGTAN, NEW MEXICO  
88260

4a. Article Number 2102523 712

RET REC REQ

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery

SEP 29 1998

5. Received By: (Print Name)

Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

CHRIS M. FURNEAUX  
Box 575  
WALDEN, COLORADO  
80480

4a. Article Number 2102 523 724

RET REC REQ

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery

SEP 1 1998

5. Received By: (Print Name)

Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

ABE NEUFELD, et al  
2805 ROSE ROAD  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2102523 719

RET REC REQUESTED

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery

10-01

5. Received By: (Print Name)

Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

**SENDER:**  
 ■ Complete items 1 and/or 2 for additional services.  
 ■ Complete items 3, 4a, and 4b.  
 ■ Print your name and address on the reverse of this form so that we can return this card to you.  
 ■ Attach this form to the front of the mailpiece, or on the back if space does not permit.  
 ■ Write "Return Receipt Requested" on the mailpiece below the article number.  
 ■ The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:  
 SABINO CALVILLO  
 1217 LANDFILL ROAD  
 HOBBS, NEW MEXICO  
 88240

4a. Article Number 2102 523 715  
RET REC REQ

4b. Service Type  
☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ COD

5. Received By: (Print Name)  
SABINO CALVILLO

6. Signature: (Addressee or Agent)  
SABINO CALVILLO

7. Date of Delivery  
12-29-98

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

**SENDER:**  
 ■ Complete items 1 and/or 2 for additional services.  
 ■ Complete items 3, 4a, and 4b.  
 ■ Print your name and address on the reverse of this form so that we can return this card to you.  
 ■ Attach this form to the front of the mailpiece, or on the back if space does not permit.  
 ■ Write "Return Receipt Requested" on the mailpiece below the article number.  
 ■ The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:  
 OSWALDO JUAREZ, SR.  
 514 E. ALSTON  
 HOBBS NEW MEXICO  
 88240

4a. Article Number 2274 996 249  
RET REC REQUESTED

4b. Service Type  
☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ COD

5. Received By: (Print Name)  
OSWALDO JUAREZ

6. Signature: (Addressee or Agent)  
OSWALDO JUAREZ

7. Date of Delivery  
12-29-98

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

**SENDER:**  
 ■ Complete items 1 and/or 2 for additional services.  
 ■ Complete items 3, 4a, and 4b.  
 ■ Print your name and address on the reverse of this form so that we can return this card to you.  
 ■ Attach this form to the front of the mailpiece, or on the back if space does not permit.  
 ■ Write "Return Receipt Requested" on the mailpiece below the article number.  
 ■ The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:  
 R. E. HUDSON  
 P.O. Box 1572  
 EDGEWOOD, NEW MEXICO  
 87105

4a. Article Number 2-57700-121  
RET REC REQ

4b. Service Type  
☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ COD

5. Received By: (Print Name)  
R. E. HUDSON

6. Signature: (Addressee or Agent)  
R. E. HUDSON

7. Date of Delivery  
12-29-98

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**  
 ■ Complete items 1 and/or 2 for additional services.  
 ■ Complete items 3, 4a, and 4b.  
 ■ Print your name and address on the reverse of this form so that we can return this card to you.  
 ■ Attach this form to the front of the mailpiece, or on the back if space does not permit.  
 ■ Write "Return Receipt Requested" on the mailpiece below the article number.  
 ■ The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:  
 LIDA B. MEYERS  
 ST. RT. A Box 142  
 HOBBS, NEW MEXICO  
 88240

4a. Article Number 2102-523-722  
RET REC REQUESTED

4b. Service Type  
☐ Registered  
☐ Express Mail  
☒ Return Receipt for Merchandise  
☐ COD

5. Received By: (Print Name)  
LIDA B. MEYERS

6. Signature: (Addressee or Agent)  
LIDA B. MEYERS

7. Date of Delivery  
10-1-98

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we can return this card to you. Attach this form to the front of the mailpiece, or on the back if space does not permit. Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to: EFRAIN RODRIGUEZ 600 E. MESQUITE HOBBS, NEW MEXICO 88240

4a. Article Number 2102 523 718

4b. Service Type Registered Express Mail Return Receipt for Merchandise

7. Date of Delivery 9-29-98

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent) X Jesus M. Batista

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we can return this card to you. Attach this form to the front of the mailpiece, or on the back if space does not permit. Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to: JESUS M. BATISTA 1730 N. ROBERT LANE HOBBS, NEW MEXICO 88240

4a. Article Number 2102 523 711

4b. Service Type Registered Express Mail Return Receipt for Merchandise

7. Date of Delivery 9-29

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent) X Cynthia Barrios

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we can return this card to you. Attach this form to the front of the mailpiece, or on the back if space does not permit. Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to: LARRY MADDOUX P.O. Box 93 JUNCTION, TEXAS 76849

4a. Article Number 2102 523 723

4b. Service Type Registered Express Mail Return Receipt for Merchandise

7. Date of Delivery 10-1-98

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent) X Lora Dwyer

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we can return this card to you. Attach this form to the front of the mailpiece, or on the back if space does not permit. Write "Return Receipt Requested" on the mailpiece below the article number. The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to: WILL TERRY TRUST, et al Box 686 HOBBS, NEW MEXICO 88240

4a. Article Number 2102 523 720

4b. Service Type Registered Express Mail Return Receipt for Merchandise

7. Date of Delivery 9-70

8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

6. Signature: (Addressee or Agent) X Wm: J. J. J.

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

**SENDER:**

Complete items 1 and/or 2 for additional services.

Complete items 3, 4a, and 4b.

Print your name and address on the reverse of this form so that we can return this card to you.

Attach this form to the front of the mailpiece, or on the back if space does not permit.

Write "Return Receipt Requested" on the mailpiece below the article number.

The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

ADRIAN F. ZAMORA  
8000 So. EUNICE HWY  
HOBBS, NEW MEXICO 88240

4a. Article Number 2186746481

RET REC REQUESTED

4b. Service Type

☐ Registered

☐ Express Mail

☒ Return Receipt for Merchandise

☐ COD

☒ Certified

☐ Insured

☐ COD

7. Date of Delivery

9-29-98

69

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

*[Signature]*

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.



Roberts  
8301 Eunice Highway  
Hobbs, NM 88240

5971079869m

Fold at line over top of envelope to  
the right of the return address

**CERTIFIED**

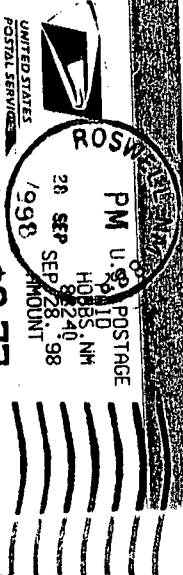
Z 102 523 717

**MAIL**

88240-9333 63  
20815-7003 61

J. Martin Hayes, et al  
2 Wisconsin Circle Suite 400  
Chevy Chase, MD 20815

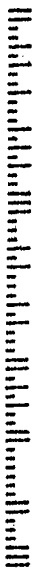
Name             
1st Notice 10-2-98  
2nd Notice           



0000

00035430-03

FORWARDING ORDER EXPIRES



7 102 523 714

# US Postal Service **Receipt for Certified Mail**

No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

PS Form 3800, April 1995

|                                                              |                         |
|--------------------------------------------------------------|-------------------------|
| Sent to <u>ELLEN CALVILL</u>                                 |                         |
| DEADIE MONTANA                                               |                         |
| Street & Number                                              | 57. 27. A. BOX 141      |
| Post Office, State, & ZIP Code                               | HOBBS, NEW MEXICO 88240 |
| Postage                                                      | \$ 1.00                 |
| Certified Fee                                                | \$ 0.30                 |
| Special Delivery Fee                                         |                         |
| Restricted Delivery Fee                                      |                         |
| Return Receipt, Showing to Whom & Date Delivered             |                         |
| Return Receipt, Showing to Whom, Date, & Addressee's Address |                         |
| TOTAL Postage & Fees                                         | \$ 1.30                 |
| Postmark or Date                                             |                         |



Sorry We Missed You!  
 We **ReDeliver** For You!

Item ☐ Post Office (see reverse)  
 is at: ☐

**IF CHECKED, YOU MUST BE PRESENT AT TIME OF DELIVERY TO SIGN FOR ITEM.**

**We ReDeliver or you can pick up, see back**

|                                                                  |                                                                                                             |                                                         |                                                                 |
|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|-----------------------------------------------------------------|
| <input checked="" type="checkbox"/> Letter                       | <input type="checkbox"/> Express Mail (redelivery next delivery day unless you call to hold at post office) | <input type="checkbox"/> Article Requiring Payment      | <input type="checkbox"/> FINAL NOTICE                           |
| <input type="checkbox"/> Large envelope, magazine, catalog, etc. | <input type="checkbox"/> Certified                                                                          | <input type="checkbox"/> Postage Due                    | <input type="checkbox"/> Article will be returned to sender on: |
| <input type="checkbox"/> Parcel                                  | <input type="checkbox"/> Insured                                                                            | <input type="checkbox"/> COD                            |                                                                 |
| <input type="checkbox"/> Delivery Restricted to Addressee        | <input type="checkbox"/> Registered                                                                         | <input type="checkbox"/> Return Receipt for Merchandise |                                                                 |
| <input type="checkbox"/> Perishable Item                         | <input type="checkbox"/> Recorded Delivery (International)                                                  | <input type="checkbox"/> Special Delivery               |                                                                 |

PS Form 3849, December 1994

Delivery Notice/Reminder/Receipt

Delivered By

*[Signature]*

Date

*12/19/94*

Customer, Describe any Visible Damage

Received By (Print Name and Sign)

*ELLEN CALVILL*

Address *Box 141*

Article No. *102523714*

Today's Date *12/19/94*

Sender's Name *Roberts*

Roberts  
8301 Eunice Hwy  
Hobbs, NM 88240

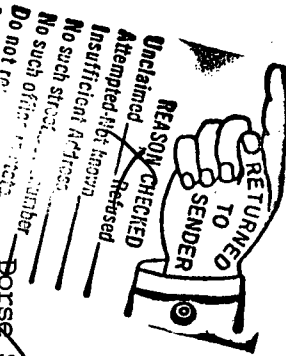
Fold at line over top of envelope to  
the right of the return address

**CERTIFIED**

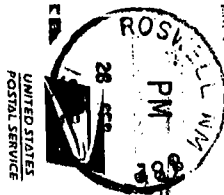
Z 102 523 725

**MAIL**

0035-0547

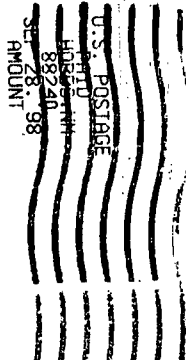


Borse S. Carson  
P.O. Box 25547  
Albuquerque, New Mexico 87125



0000

**\$2.77**  
00035430-03



1st Notice 10-30/17  
2nd Notice 10/25  
Return 10/25

LN  
10-30  
10-8

Is your RETURN ADDRESS completed on the reverse side?

| SENDER:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Complete items 1 and/or 2 for additional services.<br><input type="checkbox"/> Complete items 3, 4a, and 4b.<br><input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you.<br><input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit.<br><input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number.<br><input type="checkbox"/> The Return Receipt will show to whom the article was delivered and the date delivered. | I also wish to receive the following services (for an extra fee):<br>1. <input type="checkbox"/> Addressee's Address<br>2. <input type="checkbox"/> Restricted Delivery<br>Consult postmaster for fee. |
| 3. Article Addressed to:<br><br>DORSE S. CARSON<br>P.O. BOX 25547<br>ALBUQUERQUE, NEW MEXICO<br>87125                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 4a. Article Number 2102 533 725<br>RET REC REQ                                                                                                                                                         |
| 4b. Service Type<br><input type="checkbox"/> Registered<br><input type="checkbox"/> Express Mail<br><input checked="" type="checkbox"/> Return Receipt for Merchandise<br><input type="checkbox"/> COD                                                                                                                                                                                                                                                                                                                                                                                                            | <input type="checkbox"/> Certified<br><input type="checkbox"/> Insured                                                                                                                                 |
| 5. Received By: (Print Name)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 7. Date of Delivery                                                                                                                                                                                    |
| 6. Signature: (Addressee or Agent)<br>X                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 8. Addressee's Address (Only if requested and fee is paid)                                                                                                                                             |

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BRUCE MORRIS HOLDING,  
CO.  
6253 HOLLYWOOD BLVD.  
#614  
LOS ANGELES, CALIF.

4a. Article Number

6102523721  
RET REC REQUESTED

4b. Service Type

- |                                                                    |                                               |
|--------------------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Registered                                | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                              | <input type="checkbox"/> Insured              |
| <input checked="" type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

10/17/98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X 

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

Z 274 996 249

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| OSWALDO JUAREZ, SR.                                         |        |
| Street & Number                                             |        |
| 514 E. ALSTON                                               |        |
| Post Office, State, & ZIP Code                              |        |
| HOBBS, NEW MEXICO 88240                                     |        |
| Postage                                                     | \$ L   |
| Certified Fee                                               | L      |
| Special Delivery Fee                                        | L      |
| Restricted Delivery Fee                                     | L      |
| Return Receipt Showing to Whom & Date Delivered             | L      |
| Return Receipt Showing to Whom, Date, & Addressee's Address | L      |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

Z 102 523 715

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| JABINO CALVILLO                                             |        |
| Street & Number                                             |        |
| 1217 LANDFILL ROAD                                          |        |
| Post Office, State, & ZIP Code                              |        |
| HOBBS, NEW MEXICO 88240                                     |        |
| Postage                                                     | \$ L   |
| Certified Fee                                               | L      |
| Special Delivery Fee                                        | L      |
| Restricted Delivery Fee                                     | L      |
| Return Receipt Showing to Whom & Date Delivered             | L      |
| Return Receipt Showing to Whom, Date, & Addressee's Address | L      |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

Z 186 746 481

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| ADRIAN F. ZAMORA                                            |        |
| Street & Number                                             |        |
| 8000 SO. EUNICE H6X                                         |        |
| Post Office, State, & ZIP Code                              |        |
| HOBBS, NEW MEXICO 88240                                     |        |
| Postage                                                     | \$ L   |
| Certified Fee                                               | L      |
| Special Delivery Fee                                        | L      |
| Restricted Delivery Fee                                     | L      |
| Return Receipt Showing to Whom & Date Delivered             | L      |
| Return Receipt Showing to Whom, Date, & Addressee's Address | L      |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

Z 102 523 718

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| EFRAIN RODRIGUEZ                                            |        |
| Street & Number                                             |        |
| 1200 E. MESQUITE                                            |        |
| Post Office, State, & ZIP Code                              |        |
| HOBBS, NEW MEXICO 88240                                     |        |
| Postage                                                     | \$ L   |
| Certified Fee                                               | L      |
| Special Delivery Fee                                        | L      |
| Restricted Delivery Fee                                     | L      |
| Return Receipt Showing to Whom & Date Delivered             | L      |
| Return Receipt Showing to Whom, Date, & Addressee's Address | L      |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

PS Form 3800, April 1995

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| JESUS M. BATISTA                                            |        |
| Street & Number                                             |        |
| 1730 N. ROBERT LANE                                         |        |
| Post Office, State, & ZIP Code                              |        |
| HOBBS, NEW MEXICO 88240                                     |        |
| Postage                                                     | \$ L   |
| Certified Fee                                               | L      |
| Special Delivery Fee                                        | L      |
| Restricted Delivery Fee                                     | L      |
| Return Receipt Showing to Whom & Date Delivered             | L      |
| Return Receipt Showing to Whom, Date, & Addressee's Address | L      |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

Z 102 523 711

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Z 102 523 724

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |             |
|-------------------------------------------------------------|-------------|
| Sent to                                                     |             |
| CHRIS M. FURNEAUX                                           |             |
| Street & Number                                             |             |
| Box 575                                                     |             |
| Post Office, State, & ZIP Code                              |             |
| WALDEN, COLORADO 80480                                      |             |
| Postage                                                     | NM \$ 8240  |
| Certified Fee                                               | SEP 28 1998 |
| Special Delivery Fee                                        |             |
| Restricted Delivery Fee                                     |             |
| Return Receipt Showing to Whom & Date Delivered             |             |
| Return Receipt Showing to Whom, Date, & Addressee's Address |             |
| TOTAL Postage & Fees                                        | \$ 277      |
| Postmark or Date                                            |             |

PS Form 3800, April 1995

Z 186 746 482

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |             |
|-------------------------------------------------------------|-------------|
| Sent to                                                     |             |
| CITY OF EUNICE                                              |             |
| Street & Number                                             |             |
| Box 147                                                     |             |
| Post Office, State, & ZIP Code                              |             |
| EUNICE, NEW MEXICO 88231                                    |             |
| Postage                                                     | NM \$ 8240  |
| Certified Fee                                               | SEP 28 1998 |
| Special Delivery Fee                                        |             |
| Restricted Delivery Fee                                     |             |
| Return Receipt Showing to Whom & Date Delivered             |             |
| Return Receipt Showing to Whom, Date, & Addressee's Address |             |
| TOTAL Postage & Fees                                        | \$ 277      |
| Postmark or Date                                            |             |

PS Form 3800, April 1995

Z 102 523 722

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |             |
|-------------------------------------------------------------|-------------|
| Sent to                                                     |             |
| LIDA B. MEYERS                                              |             |
| Street & Number                                             |             |
| ST. RT. A Box 142                                           |             |
| Post Office, State, & ZIP Code                              |             |
| HOBBS, NEW MEXICO 88240                                     |             |
| Postage                                                     | NM \$ 8240  |
| Certified Fee                                               | SEP 28 1998 |
| Special Delivery Fee                                        |             |
| Restricted Delivery Fee                                     |             |
| Return Receipt Showing to Whom & Date Delivered             |             |
| Return Receipt Showing to Whom, Date, & Addressee's Address |             |
| TOTAL Postage & Fees                                        | \$ 277      |
| Postmark or Date                                            |             |

PS Form 3800, April 1995

Z 577 000 121

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |             |
|-------------------------------------------------------------|-------------|
| Sent to                                                     |             |
| R.E. HUDSON                                                 |             |
| Street & Number                                             |             |
| P.O. Box 1572                                               |             |
| Post Office, State, & ZIP Code                              |             |
| EDGEMOND, NEW MEXICO 87105                                  |             |
| Postage                                                     | NM \$ 8240  |
| Certified Fee                                               | SEP 28 1998 |
| Special Delivery Fee                                        |             |
| Restricted Delivery Fee                                     |             |
| Return Receipt Showing to Whom & Date Delivered             |             |
| Return Receipt Showing to Whom, Date, & Addressee's Address |             |
| TOTAL Postage & Fees                                        | \$ 277      |
| Postmark or Date                                            |             |

PS Form 3800, April 1995

Z 102 523 720  
US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

|                                                                  |              |
|------------------------------------------------------------------|--------------|
| Sent to<br><b>WILL N. TERRY TRUST, et al</b>                     |              |
| Street & Number<br><b>Box 686</b>                                |              |
| Post Office, State, & ZIP Code<br><b>HOBBS, NEW MEXICO 88240</b> |              |
| Postage                                                          | \$ <b>✓</b>  |
| Certified Fee                                                    | <b>✓</b>     |
| Special Delivery Fee                                             |              |
| Restricted Delivery Fee                                          |              |
| Return Receipt Showing to Whom & Date Delivered                  | <b>✓</b>     |
| Return Receipt Showing to Whom, Date, & Addressee's Address      | <b>✓</b>     |
| TOTAL Postage & Fees                                             | \$ <b>27</b> |
| Postmark or Date                                                 |              |

PS Form 3800, April 1995

Z 102 523 723  
US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

|                                                                |              |
|----------------------------------------------------------------|--------------|
| Sent to<br><b>LARRY MADDAK</b>                                 |              |
| Street & Number<br><b>P.O. Box 93</b>                          |              |
| Post Office, State, & ZIP Code<br><b>JUNCTION, TEXAS 76849</b> |              |
| Postage                                                        | \$ <b>✓</b>  |
| Certified Fee                                                  | <b>✓</b>     |
| Special Delivery Fee                                           |              |
| Restricted Delivery Fee                                        |              |
| Return Receipt Showing to Whom & Date Delivered                | <b>✓</b>     |
| Return Receipt Showing to Whom, Date, & Addressee's Address    | <b>✓</b>     |
| TOTAL Postage & Fees                                           | \$ <b>27</b> |
| Postmark or Date                                               |              |

PS Form 3800, April 1995

Z 102 523 712  
US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

|                                                                       |              |
|-----------------------------------------------------------------------|--------------|
| Sent to<br><b>GARY DON HENDERSON</b>                                  |              |
| Street & Number<br><b>P.O. Box 725</b>                                |              |
| Post Office, State, & ZIP Code<br><b>LIVINGSTON, NEW MEXICO 88260</b> |              |
| Postage                                                               | \$ <b>✓</b>  |
| Certified Fee                                                         | <b>✓</b>     |
| Special Delivery Fee                                                  |              |
| Restricted Delivery Fee                                               |              |
| Return Receipt Showing to Whom & Date Delivered                       | <b>✓</b>     |
| Return Receipt Showing to Whom, Date, & Addressee's Address           | <b>✓</b>     |
| TOTAL Postage & Fees                                                  | \$ <b>27</b> |
| Postmark or Date                                                      |              |

PS Form 3800, April 1995

Z 102 523 719  
US Postal Service  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

|                                                                  |              |
|------------------------------------------------------------------|--------------|
| Sent to<br><b>ABE NEUFELD, et al</b>                             |              |
| Street & Number<br><b>2805 ROSE ROAD</b>                         |              |
| Post Office, State, & ZIP Code<br><b>HOBBS, NEW MEXICO 88240</b> |              |
| Postage                                                          | \$ <b>✓</b>  |
| Certified Fee                                                    | <b>✓</b>     |
| Special Delivery Fee                                             |              |
| Restricted Delivery Fee                                          |              |
| Return Receipt Showing to Whom & Date Delivered                  | <b>✓</b>     |
| Return Receipt Showing to Whom, Date, & Addressee's Address      | <b>✓</b>     |
| TOTAL Postage & Fees                                             | \$ <b>27</b> |
| Postmark or Date                                                 |              |

PS Form 3800, April 1995



Z 102 523 717

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| J. MARVIN HAYNES, et al                                     |        |
| Street & Number                                             |        |
| 2 WISCONSIN CIRCLE, STE 400                                 |        |
| Post Office, State, & ZIP Code                              |        |
| CHEVY CHASE, MD 20815                                       |        |
| Postage                                                     |        |
| Certified Fee                                               |        |
| Special Delivery Fee                                        |        |
| Restricted Delivery Fee                                     |        |
| Return Receipt Showing to Whom & Date Delivered             |        |
| Return Receipt Showing to Whom, Date, & Addressee's Address |        |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

Z 102 523 713

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| WILMA HARDIN                                                |        |
| Street & Number                                             |        |
| P.O. Box 5458                                               |        |
| Post Office, State, & ZIP Code                              |        |
| HOBBS, NEW MEXICO 88240                                     |        |
| Postage                                                     | \$     |
| Certified Fee                                               |        |
| Special Delivery Fee                                        |        |
| Restricted Delivery Fee                                     |        |
| Return Receipt Showing to Whom & Date Delivered             |        |
| Return Receipt Showing to Whom, Date, & Addressee's Address |        |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

Z 102 523 721

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| BRUCE MORRIS HOLDING CO                                     |        |
| Street & Number                                             |        |
| 6253 HOLLYWOOD BLVD. #614                                   |        |
| Post Office, State, & ZIP Code                              |        |
| LOS ANGELES, CALIFORNIA 90028                               |        |
| Postage                                                     | \$     |
| Certified Fee                                               |        |
| Special Delivery Fee                                        |        |
| Restricted Delivery Fee                                     |        |
| Return Receipt Showing to Whom & Date Delivered             |        |
| Return Receipt Showing to Whom, Date, & Addressee's Address |        |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

Z 102 523 725

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |        |
|-------------------------------------------------------------|--------|
| Sent to                                                     |        |
| DORSE CARSON                                                |        |
| Street & Number                                             |        |
| P.O. Box 25547                                              |        |
| Post Office, State, & ZIP Code                              |        |
| ALBUQUERQUE, NEW MEXICO 87125                               |        |
| Postage                                                     | \$     |
| Certified Fee                                               |        |
| Special Delivery Fee                                        |        |
| Restricted Delivery Fee                                     |        |
| Return Receipt Showing to Whom & Date Delivered             |        |
| Return Receipt Showing to Whom, Date, & Addressee's Address |        |
| TOTAL Postage & Fees                                        | \$ 277 |
| Postmark or Date                                            |        |

PS Form 3800, April 1995

Landowner of Facility: Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240

Landowners within one (1) mile of site:

Robert A. McCasland  
1000 Ave. N  
Eunice, New Mexico 88231

Clyde Arsbom  
219 W. Stann Plc.  
Hobbs, New Mexico 88240

D.K. Randolph  
1000 W. Baja Dr.  
Hobbs, New Mexico 88240

W.O. Collins, Est. % Peggy Wright  
7632 Pontiac Plc. SW  
Albuquerque, New Mexico 87105

Carl Greenwood  
6021 Greenwood Plc.  
Hobbs, New Mexico 88240

Bill Hazelwood  
Rt. 69-42380 St. Hwy. 18  
Hobbs, New Mexico 88240

Antonio Cervantes  
405 E. Lea  
Hobbs, New Mexico 88240

R.N. Magee  
8830 Eunice Hwy.  
Hobbs, New Mexico 88240

Juan Huerta  
300 E. Lea  
Hobbs, New Mexico 88240

Ruth G. Thompson  
2700 Windsor Blvd.  
Oklahoma City, Oklahoma 73127

Charles & Myra Meyers  
3700 Tipton Dr.  
Hobbs, New Mexico 88240

Leon Nowalsky & Charles Cabibi  
711 Aurora Ave. Ste. A  
Metairie, Louisiana 70005-0000

M.H. McGrail &  
E. Kornegay, Trust % Nations Bank  
500 N. Main  
Roswell, New Mexico 88201

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

ROBERT A. MCCASLAND  
1000 AVE N  
EUNICE, NEW MEXICO  
88231

4a. Article Number 2 576 998 027

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9 SEP 1998

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Robert A. McCasland

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

RUTH G. THOMPSON  
2700 WINDSOR BLVD  
OKLAHOMA CITY, OKLA  
73127

4a. Article Number 2 576 998 037

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9-8-98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Ruth G. Thompson

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

CHARLES MEYERS  
3700 TIPTON DR.  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2 576 998 038

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9/10/98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Charles Meyers

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

W.O. COLLINS, EST.  
70 PEGGY WRIGHT  
7632 PONTIAC PK. SW  
ALBUQUERQUE, NEW MEXICO 84105

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

4a. Article Number

RETURN RECEIPT REQUESTED

4b. Service Type

- |                                                         |                                               |
|---------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Registered                     | <input checked="" type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail                   | <input type="checkbox"/> Insured              |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD                  |

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:  
CARL GREENWOOD  
6021 GREENWOOD PIC  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2576998028  
RETURN RECEIPT REQUESTED

4b. Service Type

☐ Registered ☒ Certified

☐ Express Mail ☐ Insured

☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery 9/8/92

5. Received By: (Print Name)  
CARL GREENWOOD

6. Signature: (Addressee or Agent)  
X Carl Greenwood

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:  
M. H. THE GRAIL + E. KORNIGAY  
TRUST BANK  
500 N. MAIN  
ROSWELL, NEW MEXICO  
88201

4a. Article Number 2576998029  
RETURN RECEIPT REQUESTED

4b. Service Type

☐ Registered ☒ Certified

☐ Express Mail ☐ Insured

☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery 9/8/98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)  
X Betty Sanchez

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:  
LEON NOVALSKY + CHARLES  
CARIBI  
711 AURORA AVE, STE A  
METairie, LOUISIANA  
70006

4a. Article Number 2576998030  
RETURN RECEIPT REQUESTED

4b. Service Type

☒ Certified ☐ Registered

☐ Express Mail ☐ Insured

☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery 9/8/98

5. Received By: (Print Name)  
C. Gail

6. Signature: (Addressee or Agent)  
X

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

D. K. RANDOLPH  
1000 W. BATA DR.  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2 526 995 391

RETURN REC. REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

9/5/98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X D. K. Randolph

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

JUAN HUERTA  
300 E. LEA  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2 576 998 031

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

2-5-98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X Andres Huertas

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

CLYDE ARSBON  
219 W. STANN PK.  
HOBBS, NEW MEXICO  
88240

4a. Article Number 2 576 998 032

RETURN RECEIPT REQUESTED

4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

X Clyde Arson

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

## 3. Article Addressed to:

ANTONIO CERVANTES  
405 E. LEA  
HOBBS, NEW MEXICO  
88240

## 4a. Article Number 2576998036

RETURN RECEIPT REQUESTED

## 4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

## 7. Date of Delivery

8/5/88

## 5. Received By: (Print Name)

## 6. Signature: (Addressee or Agent)

*Antonio Cervantes*

## 8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

## 3. Article Addressed to:

R.N. Magee  
8830 EUNICE HWY.  
HOBBS, NEW MEXICO  
88240

## 4a. Article Number

2576998036

## 4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

## 7. Date of Delivery

9/8

## 5. Received By: (Print Name)

*Roy Magee*

## 6. Signature: (Addressee or Agent)

*X Roy Magee*

## 8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

## 3. Article Addressed to:

BILL HAZEL WOOD  
Rt. 69-42380 ST. HWY 18  
HOBBS, NEW MEXICO  
88240

## 4a. Article Number 2576998036

RETURN RECEIPT REQUESTED

## 4b. Service Type

- ☐ Registered ☒ Certified  
☐ Express Mail ☐ Insured  
☐ Return Receipt for Merchandise ☐ COD

## 7. Date of Delivery

9/8

## 5. Received By: (Print Name)

*BILL D. HAZELWOOD*

## 6. Signature: (Addressee or Agent)

*X B.D. Hazelwood*

## 8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 576 998 027

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

PS Form 3800, April 1995

|                                                             |                |
|-------------------------------------------------------------|----------------|
| Sent to<br><b>ROBERT A. McCASLAND</b>                       |                |
| Street & Number<br><b>1000 AVE N</b>                        |                |
| Post Office, State, & ZIP Code<br><b>FUNICE NM 88231</b>    |                |
| Postage                                                     | \$ <b>L</b>    |
| Certified Fee                                               | \$ <b>L</b>    |
| Special Delivery Fee                                        | \$ <b>L</b>    |
| Restricted Delivery Fee                                     | \$ <b>L</b>    |
| Return Receipt Showing to Whom & Date Delivered             | \$ <b>L</b>    |
| Return Receipt Showing to Whom, Date, & Addressee's Address | \$ <b>L</b>    |
| <b>TOTAL Postage &amp; Fees</b>                             | \$ <b>2.77</b> |
| Postmark or Date<br><b>SEP 10 1995</b>                      |                |

Z 576 998 037

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

PS Form 3800, April 1995

|                                                                    |                |
|--------------------------------------------------------------------|----------------|
| Sent to<br><b>RUTH G. THOMPSON</b>                                 |                |
| Street & Number<br><b>2700 WINDSOR BLVD</b>                        |                |
| Post Office, State, & ZIP Code<br><b>OKLAHOMA CITY, OKLA 73127</b> |                |
| Postage                                                            | \$ <b>L</b>    |
| Certified Fee                                                      | \$ <b>L</b>    |
| Special Delivery Fee                                               | \$ <b>L</b>    |
| Restricted Delivery Fee                                            | \$ <b>L</b>    |
| Return Receipt Showing to Whom & Date Delivered                    | \$ <b>L</b>    |
| Return Receipt Showing to Whom, Date, & Addressee's Address        | \$ <b>L</b>    |
| <b>TOTAL Postage &amp; Fees</b>                                    | \$ <b>2.77</b> |
| Postmark or Date<br><b>SEP 10 1995</b>                             |                |

PS Form 3800, April 1995

|                                                             |                |
|-------------------------------------------------------------|----------------|
| Sent to<br><b>JUAN HUSSETA</b>                              |                |
| Street & Number<br><b>300 W LERA</b>                        |                |
| Post Office, State, & ZIP Code<br><b>HARRIS, NM 88234</b>   |                |
| Postage                                                     | \$ <b>L</b>    |
| Certified Fee                                               | \$ <b>L</b>    |
| Special Delivery Fee                                        | \$ <b>L</b>    |
| Restricted Delivery Fee                                     | \$ <b>L</b>    |
| Return Receipt Showing to Whom & Date Delivered             | \$ <b>L</b>    |
| Return Receipt Showing to Whom, Date, & Addressee's Address | \$ <b>L</b>    |
| <b>TOTAL Postage &amp; Fees</b>                             | \$ <b>2.77</b> |
| Postmark or Date<br><b>SEP 10 1995</b>                      |                |

Z 576 998 039

PS Form 3800, April 1995

|                                                                |                |
|----------------------------------------------------------------|----------------|
| Sent to<br><b>D. O. COLLINS, EST WARE</b>                      |                |
| Street & Number<br><b>7632 PONTIAC DR SW</b>                   |                |
| Post Office, State, & ZIP Code<br><b>ALBUQUERQUE, NM 87105</b> |                |
| Postage                                                        | \$ <b>L</b>    |
| Certified Fee                                                  | \$ <b>L</b>    |
| Special Delivery Fee                                           | \$ <b>L</b>    |
| Restricted Delivery Fee                                        | \$ <b>L</b>    |
| Return Receipt Showing to Whom & Date Delivered                | \$ <b>L</b>    |
| Return Receipt Showing to Whom, Date, & Addressee's Address    | \$ <b>L</b>    |
| <b>TOTAL Postage &amp; Fees</b>                                | \$ <b>2.77</b> |
| Postmark or Date<br><b>SEP 10 1995</b>                         |                |

Z 576 998 033



Z 576 998 030

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to

LEON NOWALSKI-CHARLES CRABBI

Street &amp; Number

711 AURORA AVE STE A

Post Office, State, &amp; ZIP Code

METairie, LOUISIANA 70005-0001

Postage

\$ C

Certified Fee

C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom &amp; Date Delivered

C

Return Receipt Showing to Whom, Date, &amp; Addressee's Address

TOTAL Postage &amp; Fees

\$ 27

Postmark or Date

Z 576 998 029

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to

M.H. McBRIL- E. KORMEYAN- J. ANST

Street &amp; Number

70 NATIONS BANK

Post Office, State, &amp; ZIP Code

ROSWELL, NM 88201

Postage

\$ C

Certified Fee

C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom &amp; Date Delivered

C

Return Receipt Showing to Whom, Date, &amp; Addressee's Address

TOTAL Postage &amp; Fees

\$ 27

Postmark or Date

PS Form 3800, April 1995

Z 576 995 391

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to

D.K. RANDOLPH

Street &amp; Number

1000 W. BATA DR

Post Office, State, &amp; ZIP Code

HOBBS, NM 88240

Postage

\$ C

Certified Fee

C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom &amp; Date Delivered

C

Return Receipt Showing to Whom, Date, &amp; Addressee's Address

TOTAL Postage &amp; Fees

\$ 27

Postmark or Date

PS Form 3800, April 1995

Z 576 998 028

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to

CARL GREENWOOD

Street &amp; Number

6021 GREENWOOD PK

Post Office, State, &amp; ZIP Code

HOBBS, NM 88240

Postage

\$ C

Certified Fee

C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom &amp; Date Delivered

C

Return Receipt Showing to Whom, Date, &amp; Addressee's Address

TOTAL Postage &amp; Fees

\$ 27

Postmark or Date

PS Form 3800, April 1995

Z 576 998 032

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to

CLYDE ARSBON

Street &amp; Number

219 W. STANN PK

Post Office, State, &amp; ZIP Code

HOBBS, NM 88240

Postage

\$ C

Certified Fee

C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom &amp; Date Delivered

C

Return Receipt Showing to Whom, Date, &amp; Addressee's Address

TOTAL Postage &amp; Fees

\$ 27

Postmark or Date

PS Form 3800, April 1995

Z 576 998 034

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to

BILL HOZELWOOD

Street &amp; Number

RT. 69-42380 ST HWY. 18

Post Office, State, &amp; ZIP Code

HOBBS, NM 88240

Postage

\$ C

Certified Fee

C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom &amp; Date Delivered

C

Return Receipt Showing to Whom, Date, &amp; Addressee's Address

TOTAL Postage &amp; Fees

\$ 27

Postmark or Date

PS Form 3800, April 1995

Z 576 998 036

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to

R.N. MAGEE

Street &amp; Number

8830 FUNICE HWY

Post Office, State, &amp; ZIP Code

HOBBS, NM 88240

Postage

\$ C

Certified Fee

C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom &amp; Date Delivered

C

Return Receipt Showing to Whom, Date, &amp; Addressee's Address

TOTAL Postage &amp; Fees

\$ 27

Postmark or Date

PS Form 3800, April 1995

Z 576 998 038

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to

CHARLES MEYERS

Street &amp; Number

3700 TIPTON DR.

Post Office, State, &amp; ZIP Code

HOBBS, NM 88240

Postage

\$ C

Certified Fee

C

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom &amp; Date Delivered

C

Return Receipt Showing to Whom, Date, &amp; Addressee's Address

TOTAL Postage &amp; Fees

\$ 27

Postmark or Date

PS Form 3800, April 1995

Z 576 997 031

US Postal Service

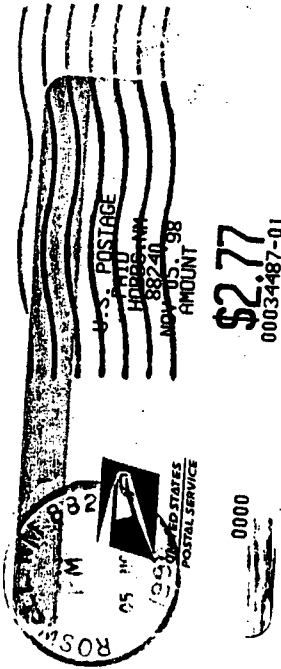
Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |             |
|-------------------------------------------------------------|-------------|
| Sent to                                                     |             |
| KEVIN MATTINGLY                                             |             |
| Street & Number                                             |             |
| 221 VICTORIA LANE                                           |             |
| Post Office, State, & ZIP Code                              |             |
| HOBBS NM 88240                                              |             |
| Postage                                                     | \$ 0.00     |
| Certified Fee                                               | ✓           |
| Special Delivery Fee                                        |             |
| Restricted Delivery Fee                                     |             |
| Return Receipt Showing to Whom & Date Delivered             | ✓           |
| Return Receipt Showing to Whom, Date, & Addressee's Address |             |
| TOTAL Postage & Fees                                        | \$ 0.00     |
| Postmark or Post Office                                     | NOV 05 1998 |

UNICE HWY  
NM 88240



0000

UNCLASSED  
KEVIN MATTINGLY  
221 VICTORIA LANE  
HOBBS, NM 88241-1294

Fold at line over top of envelope to the right of the return address

CERTIFIED

Z 576 997 031

MAIL

MATTINGLY, KEVIN  
PO BOX 1294  
HOBBS NM 88241-1294

NOV 05 1998

**NOTIFICATION OF APPLICATION TO STATE OF NEW MEXICO TO INSTALL  
LANDFARM WASTE MANAGEMENT FACILITY.**

This is to notify all landowners within one (1) mile of proposed facility that application has been made to State of New Mexico to construct a landfarm waste management facility.

**DESCRIPTION OF FACILITY:**

Facility will be a surface impoundment for the disposal of solid oil treated dirt. Area to be designated for facility will be two-hundred & eighty (280) acres.

**LOCATION OF FACILITY:**

Legal description of area: N2/4 N2/4 Section 9/10 Township 20 Range 38, Lea County, New Mexico.

**OPERATOR OF FACILITY:** J&L Landfarm

**CONTACT PERSON:** Judy L. Roberts  
8301 Eunice Highway  
Hobbs, New Mexico 88240  
Tele(505-393-9697)

For a viewing of the completed application, you may call or write me at the above address or contact the local Oil Conservation Division at 1000 W. Broadway, Hobbs, New Mexico, (505)393-6161.

Judy L. Roberts

Z 576 98 027

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

|                                                             |                     |
|-------------------------------------------------------------|---------------------|
| Sent to                                                     | ROBERT A. MCCASLAND |
| Street & Number                                             | 1000 AVE N          |
| Post Office, State, & ZIP Code                              | FUNICE NM 88231     |
| Postage                                                     | \$ L                |
| Certified Fee                                               | \$ L                |
| Special Delivery Fee                                        | \$ L                |
| Restricted Delivery Fee                                     | \$ L                |
| Return Receipt Showing to Whom & Date Delivered             | L                   |
| Return Receipt Showing to Whom, Date, & Addressee's Address | L                   |
| TOTAL Postage & Fees                                        | \$ 2.77             |
| Postmark or Date                                            |                     |

PS Form 3800, April 1995

Z 576 998 037

US Postal Service  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

|                                                             |                           |
|-------------------------------------------------------------|---------------------------|
| Sent to                                                     | RUTH G. THOMPSON          |
| Street & Number                                             | 2700 WINDSOR BLVD         |
| Post Office, State, & ZIP Code                              | OKLAHOMA CITY, OKLA 73127 |
| Postage                                                     | \$ L                      |
| Certified Fee                                               | \$ L                      |
| Special Delivery Fee                                        | \$ L                      |
| Restricted Delivery Fee                                     | \$ L                      |
| Return Receipt Showing to Whom & Date Delivered             | L                         |
| Return Receipt Showing to Whom, Date, & Addressee's Address | L                         |
| TOTAL Postage & Fees                                        | \$ 2.77                   |
| Postmark or Date                                            |                           |

PS Form 3800, April 1995

PS Form 3800, April 1995

|                                                                                                                                              |                       |
|----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| US Postal Service<br><b>Receipt for Certified Mail</b><br>No Insurance Coverage Provided.<br>Do not use for International Mail (See reverse) |                       |
| Sent to                                                                                                                                      | JUAN HUSETA           |
| Street & Number                                                                                                                              | 302 W LEA             |
| Post Office, State, & ZIP Code                                                                                                               | ALBUQUERQUE, NM 87244 |
| Postage                                                                                                                                      | \$ L                  |
| Certified Fee                                                                                                                                | \$ L                  |
| Special Delivery Fee                                                                                                                         | \$ L                  |
| Restricted Delivery Fee                                                                                                                      | \$ L                  |
| Return Receipt Showing to Whom & Date Delivered                                                                                              | L                     |
| Return Receipt Showing to Whom, Date, & Addressee's Address                                                                                  | L                     |
| TOTAL Postage & Fees                                                                                                                         | \$ 2.77               |
| Postmark or Date                                                                                                                             |                       |

Z 576 998 039

PS Form 3800, April 1995

|                                                                                                                                              |                            |
|----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| US Postal Service<br><b>Receipt for Certified Mail</b><br>No Insurance Coverage Provided.<br>Do not use for International Mail (See reverse) |                            |
| Sent to                                                                                                                                      | D. O. COLLINS, EST WARRIOR |
| Street & Number                                                                                                                              | 7632 PONTIAC BL SW         |
| Post Office, State, & ZIP Code                                                                                                               | ALBUQUERQUE, NM 87105      |
| Postage                                                                                                                                      | \$ L                       |
| Certified Fee                                                                                                                                | \$ L                       |
| Special Delivery Fee                                                                                                                         | \$ L                       |
| Restricted Delivery Fee                                                                                                                      | \$ L                       |
| Return Receipt Showing to Whom & Date Delivered                                                                                              | L                          |
| Return Receipt Showing to Whom, Date, & Addressee's Address                                                                                  | L                          |
| TOTAL Postage & Fees                                                                                                                         | \$ 2.77                    |
| Postmark or Date                                                                                                                             |                            |

Z 576 998 033

Z 576 998 030

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                                 |
|-------------------------------------------------------------|---------------------------------|
| Sent to                                                     | LEON NOWALSKI + CHARLES BABI    |
| Street & Number                                             | 711 RHORRA AVE STE A            |
| Post Office, State, & ZIP Code                              | MEATAIRIE, LOUISIANA 70065-0000 |
| Postage                                                     | \$ L                            |
| Certified Fee                                               | 1008 L                          |
| Special Delivery Fee                                        |                                 |
| Restricted Delivery Fee                                     |                                 |
| Return Receipt Showing to Whom & Date Delivered             | L                               |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                                 |
| TOTAL Postage & Fees                                        | \$ 277                          |
| Postmark or Date                                            |                                 |

PS Form 3800, April 1995

Z 576 995 391

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                 |
|-------------------------------------------------------------|-----------------|
| Sent to                                                     | D. K. RANDOLPH  |
| Street & Number                                             | 1000 W. BATA DR |
| Post Office, State, & ZIP Code                              | HOBBS, NM 88240 |
| Postage                                                     | \$ L            |
| Certified Fee                                               | L               |
| Special Delivery Fee                                        |                 |
| Restricted Delivery Fee                                     |                 |
| Return Receipt Showing to Whom & Date Delivered             | L               |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                 |
| TOTAL Postage & Fees                                        | \$ 277          |
| Postmark or Date                                            |                 |

PS Form 3800, April 1995

Z 576 500 028

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                   |
|-------------------------------------------------------------|-------------------|
| Sent to                                                     | CARL GREENWOOD    |
| Street & Number                                             | 6021 GREENWOOD PK |
| Post Office, State, & ZIP Code                              | HOBBS, NM 88240   |
| Postage                                                     | \$ L              |
| Certified Fee                                               | L                 |
| Special Delivery Fee                                        |                   |
| Restricted Delivery Fee                                     |                   |
| Return Receipt Showing to Whom & Date Delivered             | L                 |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                   |
| TOTAL Postage & Fees                                        | \$ 277            |
| Postmark or Date                                            |                   |

PS Form 3800, April 1995

Z 576 998 029

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                                    |
|-------------------------------------------------------------|------------------------------------|
| Sent to                                                     | M. H. McBRIDE + E. KORNELIUS TRUST |
| Street & Number                                             | 500 N. MAIN                        |
| Post Office, State, & ZIP Code                              | ROSWELL, NM 88201                  |
| Postage                                                     | \$ L                               |
| Certified Fee                                               | L                                  |
| Special Delivery Fee                                        |                                    |
| Restricted Delivery Fee                                     |                                    |
| Return Receipt Showing to Whom & Date Delivered             | L                                  |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                                    |
| TOTAL Postage & Fees                                        | \$ 277                             |
| Postmark or Date                                            |                                    |

PS Form 3800, April 1995

Z 576 998 026

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                   |
|-------------------------------------------------------------|-------------------|
| Sent to                                                     | ANTONIO CERVANTES |
| Street & Number                                             | 405 E. LEA        |
| Post Office, State, & ZIP Code                              | HOBBS, NM 88240   |
| Postage                                                     | \$ L              |
| Certified Fee                                               | L                 |
| Special Delivery Fee                                        |                   |
| Restricted Delivery Fee                                     |                   |
| Return Receipt Showing to Whom & Date Delivered             | L                 |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                   |
| TOTAL Postage & Fees                                        | \$ 277            |
| Postmark or Date                                            |                   |

PS Form 3800, April 1995

Z 576 998 032

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                 |
|-------------------------------------------------------------|-----------------|
| Sent to                                                     | CLYDE ARSBON    |
| Street & Number                                             | 219 W. STANN PK |
| Post Office, State, & ZIP Code                              | HOBBS, NM 88240 |
| Postage                                                     | \$ L            |
| Certified Fee                                               | L               |
| Special Delivery Fee                                        |                 |
| Restricted Delivery Fee                                     |                 |
| Return Receipt Showing to Whom & Date Delivered             | L               |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                 |
| TOTAL Postage & Fees                                        | \$ 277          |
| Postmark or Date                                            |                 |

PS Form 3800, April 1995

Z 576 998 034

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                         |
|-------------------------------------------------------------|-------------------------|
| Sent to                                                     | BILL HOZELWOOD          |
| Street & Number                                             | RT. 69-42380 ST HWY. 18 |
| Post Office, State, & ZIP Code                              | HOBBS, NM 88240         |
| Postage                                                     | \$ L                    |
| Certified Fee                                               | L                       |
| Special Delivery Fee                                        |                         |
| Restricted Delivery Fee                                     |                         |
| Return Receipt Showing to Whom & Date Delivered             | L                       |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                         |
| TOTAL Postage & Fees                                        | \$ 277                  |
| Postmark or Date                                            |                         |

PS Form 3800, April 1995

Z 576 998 036

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                 |
|-------------------------------------------------------------|-----------------|
| Sent to                                                     | R. N. MAGEE     |
| Street & Number                                             | 8830 FUNICE HWY |
| Post Office, State, & ZIP Code                              | HOBBS, NM 88240 |
| Postage                                                     | \$ L            |
| Certified Fee                                               | L               |
| Special Delivery Fee                                        |                 |
| Restricted Delivery Fee                                     |                 |
| Return Receipt Showing to Whom & Date Delivered             | L               |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                 |
| TOTAL Postage & Fees                                        | \$ 277          |
| Postmark or Date                                            |                 |

PS Form 3800, April 1995

Z 576 998 038

US Postal Service

**Receipt for Certified Mail**

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

|                                                             |                 |
|-------------------------------------------------------------|-----------------|
| Sent to                                                     | CHARLES MEYERS  |
| Street & Number                                             | 3700 TIPTON DR. |
| Post Office, State, & ZIP Code                              | HOBBS, NM 88240 |
| Postage                                                     | \$ L            |
| Certified Fee                                               | L               |
| Special Delivery Fee                                        |                 |
| Restricted Delivery Fee                                     |                 |
| Return Receipt Showing to Whom & Date Delivered             | L               |
| Return Receipt Showing to Whom, Date, & Addressee's Address |                 |
| TOTAL Postage & Fees                                        | \$ 277          |
| Postmark or Date                                            |                 |

PS Form 3800, April 1995

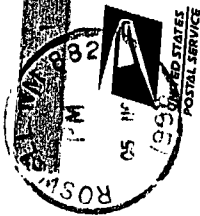
Robert  
8301 EUNICE NW4  
HOBBS, NM 88240

Fold at line over top of envelope to  
the right of the return address

CERTIFIED

Z 576 997 031

MAIL



U.S. POSTAGE  
PAID  
HOBBS, NM  
88240  
NOV 05 98  
AMOUNT

\$2.77  
00034487-01

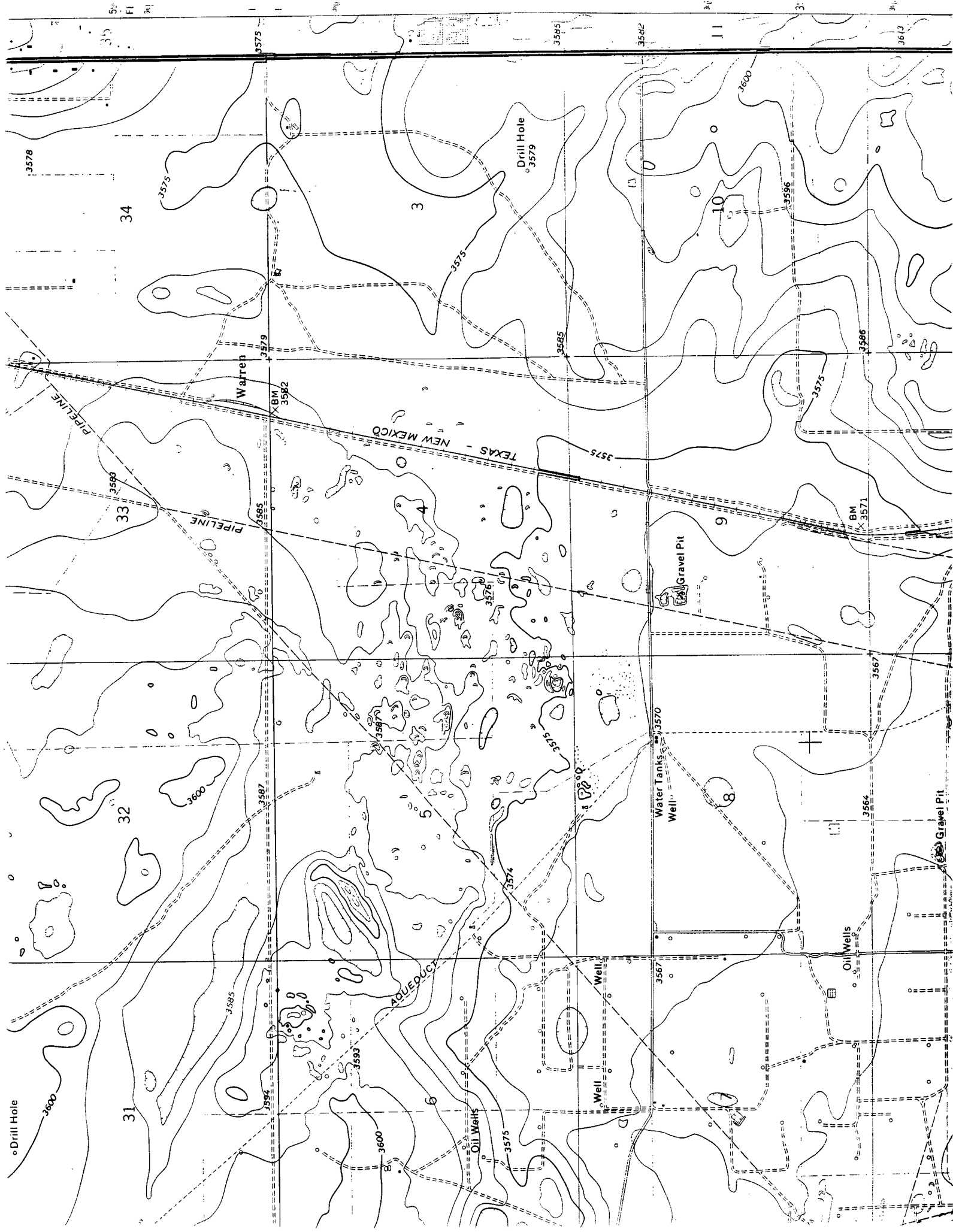
0000

UNCLAIMED  
KEVIN MATTINGLY  
221 Victoria Lane  
HOBBS,

NOV 12 1998

MATTI221 882402003 1998 04 11/07/98  
NOTIFY SENDER OF NEW ADDRESS  
MATTINGLY, KEVIN  
PO BOX 1294  
HOBBS NM 88241-1294







**NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT**

OIL CONSERVATION DIVISION  
2040 South Pacheco Street  
Santa Fe, New Mexico 87505  
(505) 827-7131

May 21, 1999

**CERTIFIED MAIL**  
**RETURN RECEIPT NO. P-326-936-536**

Ms. Judy L. Roberts  
J&L Landfarm, Inc.  
P.O. Box 356  
Hobbs, NM 88240

**RE: J&L Landfarm, Inc. Permit NM-01-0023**  
**Commercial Landfarm**  
**N/2 N/2 of Section 9 and the N/2 N/2 of Section 10, Township 20 South, Range 38 East,**  
**NMPM, Lea County, New Mexico**

Dear Ms. Roberts:

The New Mexico Oil Conservation Division (OCD) has identified an oil well located within the J&L Landfarm, Inc. (J&L) commercial landfarm that was not disclosed in the original permit application. J&L must submit a modification to their permit NM-01-0023 that discloses the location of all operating or plugged and abandon oil/gas wells, operational or abandoned pits, lease roads, flow lines, pipelines or other oil/gas related structures located within the permitted facility boundary.

The permit modification request must include a written description of the 20 foot set back and landfarm berms that must be constructed to separate contaminated soil from any non-landfarm activities. In addition, J&L must include a map disclosing the location of these features.

Enclosed are the Forms C-103 and C-137. **Please sign and return the Form C-137, attachments and required copies to the OCD Santa Fe office and Hobbs District office by June 25, 1999.** Please note that the Hobbs District office address has to 1625 N. French Drive, Hobbs, NM 87240.

If you have any questions please do not hesitate to contact me at (505) 827-7153.

Sincerely,

Martyne J. Kieling  
Environmental Geologist

xc with attachments:  
Hobbs OCD Office



Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals, and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:  
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator  
Tamarack Petroleum Company, Inc.

3. Address of Operator  
500 W. Texas, Suite 1485, Midland, TX 79701

4. Well Location  
Unit Letter D : 660 Feet From The North Line and 660 Feet From The West Line

Section 9 Township 20S Range 38E NMPM Lea Country

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3588' RKB

7. Lease Name or Unit Agreement Name

Speight

8. Well No.  
1

9. Pool name or Wildcat  
W. Nadine Blinebry

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: Open additional Blinebry pay ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

1. Ran bit & scraper to 6609', circ frac sand out of hole.
2. Perforated additional Blinebry pay as follows: 5879'-5932' (10 holes), 5942'-5943' (6 holes), 6107'-6137' (9 holes), 6194'-6263' (13 holes), 6308'-6332' (6 holes), 6383'-6413' (8 holes).
3. Acidized new & old perfs with 10,550 gals 15% NEFE acid, isolating selected zones with RBP plus packer.
4. Swabbed back load, pulled RBP and packer.
5. Ran tubing, pump & rods - returned well to prod.

Note: Work was completed 10/14/95. Notice of intention was not given.  
Please excuse this oversight.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TITLE

District Engineer

DATE

5/20/96

TYPE OR PRINT NAME

Hal Gill

(915) 683-5474  
TELEPHONE NO.

(This space for State Use)

DISTRICT 1 SUPERVISOR

MAY 23 1996

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

**NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-1  
Supersedes  
Effective

All distances must be from the outer boundaries of the Section

|                                                   |                                        |                                           |                             |                                 |                      |
|---------------------------------------------------|----------------------------------------|-------------------------------------------|-----------------------------|---------------------------------|----------------------|
| Operator<br><b>Tammerack Petroleum Co., Inc.,</b> |                                        |                                           | Lessee<br><b>Speight</b>    |                                 | Well No.<br><b>1</b> |
| Tract Letter<br><b>D</b>                          | Section<br><b>9</b>                    | Township<br><b>20 South</b>               | Range<br><b>38 East</b>     | County<br><b>Lea</b>            |                      |
| Actual Well Location of Well:                     |                                        |                                           |                             |                                 |                      |
| <b>660</b> feet from the <b>North</b> line and    |                                        | <b>660</b> feet from the <b>West</b> line |                             |                                 |                      |
| Ground Level Elev.<br><b>3575</b>                 | Producing Formation<br><b>Drinkard</b> |                                           | Pool<br><b>Undesignated</b> | Dedicated Acreage:<br><b>40</b> |                      |

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to well interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.

**CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name *C. A. Fitzmaurice*  
Position Prod. Supt.

Company Tammerack Petroleum Co.  
Date August 19, 1980

I hereby certify that the well location shown on this plat was plotted from notes of actual surveys made by \_\_\_\_\_ under my supervision and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed August 19, 1980

Registered Professional Engineer and/or Land Surveyor

*John W. West*  
Certificate No. JOHN W. WEST  
PATRICK A. ROMERO

660'

660'

**RECEIVED**

**AUG 22 1980**

**OIL CONSERVATION DIVISION  
SANTA FE**

**Petroleum Information.**

© Copyright Registration Protected

COUNTY **LEA** FIELD **Wildcat** STATE **NM**  
 OPR **TAMARACK PETROLEUM CO., INC.** API **30-025-27006**  
 NO **1** LEASE **Speight** MAP  
**Sec 9, T20S, R38E** (C)ORD  
**660 FNL, 660 FWL of Sec** **11-4-19 NM**  
**3 mi SW/Nadine** SPD **8-27-80** CMP **10-28-80**

|                                                             |                                     |       |           |       |
|-------------------------------------------------------------|-------------------------------------|-------|-----------|-------|
| CSC<br>8 5/8-1600-775 sx<br>4 1/2-7120-750 sx<br>2 3/8-6079 | WELL CLASS: INIT D FINWSD LSE. CODE |       |           |       |
|                                                             | FORMATION                           | DATUM | FORMATION | DATUM |
|                                                             |                                     |       |           |       |
|                                                             |                                     |       |           |       |
|                                                             |                                     |       |           |       |
|                                                             | ID 7120 (DRKD)                      |       | PRD 7067  |       |

IP (Blinebery) Perfs 6008-51 P 33 BOPD + 35 BW. Pot based  
 on 24 hr test. GOR 1212; gty NR

CONTR **Tom Brown** OPRSELEV **3575 GL** PD **7100 RT**

F.R. 8-25-80  
 (Blinebery)  
 11-22-80 AMEND FIELD & ZONE: Formerly reported as  
 Undesignated (Drinkard)  
 9-2-80 Drlg 3235 lm  
 9-8-80 Drlg 5388  
 DST (San Andres) 3020-3120 op 1 hr 15 mins,  
 (Sampler rec.7 CFT GAS w/tr MUD) 1 hr ISIP  
 632, FP 175-149, 2 hr FSIP 792, HP 1592-1597  
 9-16-80 Drlg 6510 lm & sh  
 9-23-80 TD 7120; PBD 7067; WOCT  
 10-7-80 TD 7120; PBD 7067; Prep Acid  
 Perf (Blinebery) 6008-51 (overall)  
 11-4-80 TD 7120; PBD 7067; RUP  
 Acid (6008-51) 2000 gals  
 Frac (6008-51) 25,000# sd  
 Ppd 30 BO + 18 BW in 24 hrs (6008-51)  
 11-17-80 TD 7120; PBD 7067; Complete  
 Blinebery Discovery; No suggested Field Name  
 LOG RUN: CORL  
 Rig Released 9-22-80 11-4-19 NM  
 11-22-80 COMPLETION ISSUED IC 30-025-70422-80

