Bit Methology (Minerals and Natural Resources       Evented Adaption (Minerals and Natural Resources)         Bit Mineral (Minerals)       Department (Minerals)         Bit Minerals (Minerals)       FEB # 7 2000;1 Conservation Division (Minerals)         Bit Minerals (Minerals)       FEB # 7 2000;1 Conservation Division (Minerals)         Bit Minerals (Minerals)       Sata Te (Nin Wits)         Bit Minerals (Minerals)       Sata Te (Nin Wits)         Bit Minerals (Minerals)       Sata Te (Nin Wits)         Bit Minerals)       Sata Te (Nin Wits)         Bit Minerals) <td< th=""><th>•</th><th>Treating</th><th></th><th>Calling .</th><th><math>\bigcap</math></th></td<>	•	Treating		Calling .	$\bigcap$
End 1, most Notes Not 1992     End 19 y milet as and valued Resources     Department     De	District 1	HOBBSACA	state of New Mexico	·	Form C-144 Cl
115 First S, Atosia, NN 8820       FFEB Ø # 20001 Conservation Division       Free closed-loop systems that only use allow provide that and by use that only use that on the set of the planned	1625 N. French Dr., Hobbs, NM 88240	Energy N	finerals and Natural Reso	urces	Revised August 1,
1220 South SL. Francis Dr.       to the appropriate NMOCDD Bistrict Office         220 S. St. Francis Dr., Suna Fe, NM, 1705       Closed-Loop, System Permit or Closure Plan Application         (hat only use above ground side lanks on haud-off bins and propose to Implement waste removal for closure)         Type of action: Appendix closed-loop system request. For any application request other than for incomposition of the state of th		FFD & F ANY	Department	For closed-loon	systems that only use above
1220 South SL. Francis Dr.       to the appropriate NMOCDD Bistrict Office         220 S. St. Francis Dr., Suna Fe, NM, 1705       Closed-Loop, System Permit or Closure Plan Application         (hat only use above ground side lanks on haud-off bins and propose to Implement waste removal for closure)         Type of action: Appendix closed-loop system request. For any application request other than for incomposition of the state of th	District III	FEP 87 2018Oil	Conservation Division	ground steel tan	ks or haul-off bins and prop
2013. Set Hunder, Dr., Statter, NM 87203       Closed-Loop System Permit or Closure Plan Application         (that only use above ground setel tanks or Inhull of Niss and propose to implement waste removal for closure)         Type of action: APPermit □ Closure         Instructions:       Plans building of the above ground setel tanks or Inhull of Niss and propose to implement waste memory for cleave, plans tability for the approach of the approac	District IV	122	0 South St. Francis Dr.	to implement we	aste removal for closure, subr
Closed-Loop System Permit or Closure Plan Application         Improduction (Form C-144 CLE2) per Individual closed/op grain reguest. For any opticular project of the rhom for closure)         Improduction (Form C-144 CLE2) per Individual closed/op grain reguest. For any opticular project of the rhom for closure plane to any opticular project of the reguent of the table of the plane mater and the reguent of th	1220 S. St. Francis Dr., Santa Fe, NM 87505			to the appropriat	e haloed Distilet office.
(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)         Type of action:       Implement waste removal for closure         instructions:       Please submit one application from C-144 CE2 per individual closub-loop system request. For any application request other than for closure provide the properties of the peritor of listing submit provide provide the peritor of listing submit provide the peritor of listing submit provide the peritor provide peritor the peritor the peritor the peritor the peritor of listing the peritor the peritor the peritor the peritor the peritor provide peritor the peritor	Clo			Plan Application	
Immediate: Please rubmit one application (Form C-144 CLE2) per Individual disord-loop system request. For any application request of the form C- idead-loop system that approval of his request does not relieve the operator of liability doed operations result in pollution of surface water, ground water of the backweet that approval of his request does not relieve the operator of liability to comply with any other applicable governmental autority's rules, regulations or ord perator: Seely Oil Company       OCRID #: 20497         defers: 815 W, 10° Sz, FL Worth, TX 76102       aclity or well name: No Educate, "A" Fuel Load # (COD Permit Number:		ground steel tanks or	haul-off bins and propose t	o implement waste remov	
Itacked loop system that only use above ground steel tanks or hand-off bins and propose to implement waits removal for closure, places submit a Porm C- ase backed back has approval of bits responsibility to comply with any other applicable governmental authority's rules, regulations or ord perstor: Seely Oil Company OGRID #: 20497         offers is 15 W. 10° St. FL worth, TX 76102 aclility or well name: Acc Educate. "A "Federal # [		Type of	action: A Permit Clo	osure	
perator:       Secti Oil Company       OGRID #: 20497         ddress:       815 W. 10 <sup>6</sup> SL, FL Worth, TX 76102       #1	closed-loop system that only use above g lease be advised that approval of this reque	round steel tanks or haul- est does not relieve the ope	off bins and propose to implem rator of liability should operatio	ent waste removal for closur ns result in pollution of surfa	e, please submit a Form C-144 ce water, ground water or the
deres:       815 W. 10 <sup>6</sup> St., F. Worth, TX 76102         acility or well name:       Ac EQUAD. 'A' Fedetzed #1         Pl Number:       J0425 35049         OCD Permit Number: <u>Pl - D5928</u> Int or Qur(or A section 30 Township 185 Range 34E County:       Lean         write of Proposed Design:       Latitude	nvironment. Nor does approval relieve the	operator of its responsibil	ity to comply with any other app	licable governmental author	ly's rules, regulations or ordina
acility or well name: AccElscin: "A"Federal # 1 Pl Number: <u>Pl - D5928</u> NL or QV[0tr <u>A</u> section <u>30</u> Township <u>185</u> Range <u>34E</u> County: <u>Lea</u> mater of Proposed Design: Latitude	Operator: Seely Oil Company	0	GRID #: 20497		<i></i>
PI Number:       30-025-35044       OCD Permit Number:					
PI Number:       30-025-35044       OCD Permit Number:	Facility or well name: Mc Eluan	"A" Federal #1		A	DY
Interconnection       Invate       Inva	API Number: 30-025-35049		OCD Permit Number:	HI- 0592	<b>5</b>
Interconnection       Invate       Inva	U/L or Otr/Otr A Section	n 30 Towns	hin 185 Range 3	LE County:	20 - az
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Interconnection       Invate       Inva	Surface Ourses A Federal A State		Congredue		
peration:       □ Drilling a new well Ø Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent)       □ P         □ Above Ground Steel Tanks or       □ Haul-off Bins         igns:       Subsection C of 19.15.17.11 NMAC         □ 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers         ③ Signed in compliance with 19.15.16.8 NMAC         inseed-loop Systems Permit Application Attachment Checklist:       Subsection B of 19.15.17.9 NMAC         instructions:       Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents a tached.         [] Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC       Operating and Maintenance Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NM.         □ Previously Approved Design (attach copy of design)       API Number:					·····
<pre>nstructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents a traced. Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC Closure Plan (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMA Previously Approved Design (attach copy of design) API Number: Previously Approved Operating and Maintenance Plan API Number: Vaste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC) nstructions: Please indentify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than twe clifties are required. Disposal Facility Name: Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC Deterator Application Certification: hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief. Iame (Print) Date: Dat</pre>			on, and emergency telephone r	numbers	
Previously Approved Operating and Maintenance Plan       API Number:	Instructions: Each of the following ite attached. Design Plan - based upon the app Operating and Maintenance Plan Closure Plan (Please complete B	ms must be attached to the propriate requirements of - based upon the appropriate of the based upon the appropriate of the second sec	he application. Please indica 19.15.17.11 NMAC riate requirements of 19.15.17. propriate requirements of Sub	te, by a check mark in the 12 NMAC section C of 19.15.17.9 NM	
Vaste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC)         Instructions: Please indentify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if more than the cuttities are required.         Disposal Facility Name:					
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Disposal Facility Name: Disposal Facility Permit Number: Vill any of the proposed closed-loop system operations and associated activities occur on or in areas that will not be used for future service and oper Pres (If yes, please provide the information below) No required for impacted areas which will not be used for future service and operations: Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC Deerator Application Certification: hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief. Name (Print): David L. Henderson, President ignature:	Waste Removal Closure For Closed-I	<u>oop Systems That Utiliz</u> lity or facilities for the d	<u>e Above Ground Steel Tank</u> isposal of liquids, drilling flui	s or Haul-off Bins Only: ( ds and drill cuttings. Use a	19.15.17.13.D NMAC) ttachment if more than two
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Yes (If yes, please provide the information below)       No         lequired for impacted areas which will not be used for future service and operations:         Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC         Re-vegetation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Prerator Application Certification:         I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.         Jame (Print):       David L. Henderson, President         ignature:       Date:       State					
Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC         Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC         Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC         Deerator Application Certification:         hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.         Jame (Print):       David L. Henderson, President         ignature:       Date:       Store	Will any of the proposed closed-loop sy Yes (If yes, please provide the in	stem operations and asso formation below) 🔲 No	ociated activities occur on or in	areas that will not be used	for future service and operation
Decrator Application Certification: hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief. Jame (Print): David L. Henderson, President ignature: Date: 82112	Soil Backfill and Cover Design S Re-vegetation Plan - based upon	Specifications based up the appropriate requirem	oon the appropriate requirements of Subsection I of 19.15.1	7.13 NMAC	5.17.13 NMAC
hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief. Name (Print): David L. Henderson, President ignature: Date: 82112	6. Operator Application Certification:				
ignature: Date: 8/21/12		bmitted with this applica	tion is true, accurate and comp	lete to the best of my know	ledge and belief.
ignature: Date: 8/21/12	Name (Print) David L. Henderson, P.	resident			
mail address: dhenderson@seelvoil.com	Signature: Cant Dar	1	Da	ne: 8/21/12	<i>۲</i>
	e-mail address: <u>dhenderson@seelyoil.</u>	com × `	Telephone:	817-332-1377	
-mail address: <u>dhenderson@seelyoil.com</u> Form C-144 CLEZ Q Oil Conservation Division MAR P 8 2013	Form C-144 CLEZ	F	Oil Conservation Division		Page Lof 2

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7. OCD Approval: Permit Application (including close	ure plan) 🔲 Closure Plan (only)			
OCD Representative Signature: /	Approval Date: 03/27/13			
Title: Petroleum Engineer	OCD Permit Number: <u>PI-05928</u>			
Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed. Closure Completion Date:				
9.				
	or Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: or where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than			
Disposal Facility Name:	Disposal Facility Permit Number:			
	Disposal Facility Permit Number:			
	ctivities performed on or in areas that will not be used for future service and operations?			
Required for impacted areas which will not be used for fu Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Tech				
	mitted with this closure report is true, accurate and complete to the best of my knowledge and plicable closure requirements and conditions specified in the approved closure plan.			
Name (Print):	Title:			
Signature:	Date:			
e-mail address:	Telephone:			

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## Seely Oil Company Workover Closed Loop System Design Plan

## EQUIPMENT LIST:

1-210 bbl steel skid mounted tank

## **OPERATION AND MAINTENANCE:**

Closed Loop equipment will be inspected daily when in operation

Any leak will be repaired and/or contained immediately.

OCD will be notified within 48 hours.

Remediation process will be initiated.

## **CLOSURE PLAN:**

During workover operations, all liquids will be hauled to a commercial saltwater disposal system by Kennemore Welding transport truck.

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