1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Road Artec. NM 87410 1000 Rio Brazos Road Artec. NM 87410 1000 Rio Brazos Road Artec. NM 87410	lew Mexico nd Natural Resources artment ation Division St. Francis Dr. NM 87505	Form C-144 CLEZ Revised August 1, 2011 For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.
Closed-Loop System Permi	it or Closure Plan	Application
(that only use above ground steel tanks or haul-off bi	ns and propose to implem	
	X Permit 🗌 Closure	
Instructions: Please submit one application (Form C-144 CLEZ) per individu closed-loop system that only use above ground steel tanks or haul-off bins and		
Please be advised that approval of this request does not relieve the operator of liabienvironment. Nor does approval relieve the operator of its responsibility to comply	ility should operations result i	in pollution of surface water, ground water or the
1. Operator: Caza Operating, LLC	OGRID #:	249099
Address: 200 N. Loraine, Suite 1550, Midland, Texas		
Facility or well name: West Copperline 29 State Com # 11		OR RECORD ONLY
U/L or Qtr/Qtr Section _29 Township _23 S		County: Lea
	Longitude 103.493736	
Surface Owner: 🗋 Federal 🕱 State 🗋 Private 🗋 Tribal Trust or Indian Al	llotment	
 Above Ground Steel Tanks or Haul-off Bins 3. Signs: Subsection C of 19.15.17.11 NMAC 12"x 24", 2" lettering, providing Operator's name, site location, and emer Signed in compliance with 19.15.16.8 NMAC 	rgency telephone numbers	
 Closed-loop Systems Permit Application Attachment Checklist: Subsect Instructions: Each of the following items must be attached to the applicate attached. Design Plan - based upon the appropriate requirements of 19.15.17.11 Operating and Maintenance Plan - based upon the appropriate require Closure Plan (Please complete Box 5) - based upon the appropriate re Previously Approved Design (attach copy of design) API Number: Previously Approved Operating and Maintenance Plan API Number: 	ion. Please indicate, by a c NMAC ments of 19.15,17.12 NMA quirements of Subsection C	heck mark in the box, that the documents are C
5.		
<u>Waste Removal Closure For Closed-loop Systems That Utilize Above G</u> . Instructions: Please indentify the facility or facilities for the disposal of the facilities are required.	round Steel Tanks or Hau quids, drilling fluids and di	<u>Loff Bins Only:</u> (19.15.17.13.D NMAC) rill cuttings. Use attachment if more than two
Disposal Facility Name: R-360	Disposal Facility Pe	rmit Number: NM 01-0006
Disposal Facility Name: Parabo "Sundance"	Disposal Facility Pe	
Will any of the proposed closed-loop system operations and associated activ Yes (If yes, please provide the information below) X No	vities occur on or in areas the	at will not be used for future service and operations
Les (11 yes, piease provide me information below) (A 100		
Required for impacted areas which will not be used for future service and op Soil Backfill and Cover Design Specifications based upon the appr Re-vegetation Plan - based upon the appropriate requirements of Subs Site Reclamation Plan - based upon the appropriate requirements of S	opriate requirements of Sub section I of 19.15.17.13 NM	IAC
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Required for impacted areas which will not be used for future service and op Soil Backfill and Cover Design Specifications based upon the appr Re-vegetation Plan - based upon the appropriate requirements of Subs Site Reclamation Plan - based upon the appropriate requirements of S Coperator Application Certification:	section I of 19.15.17.13 NM bubsection G of 19.15.17.13 and bubsection G of 19.15.17.13 accurate and complete to th	IAC NMAC
Required for impacted areas which will not be used for future service and op Soil Backfill and Cover Design Specifications based upon the appro- Re-vegetation Plan - based upon the appropriate requirements of Sub- Site Reclamation Plan - based upon the appropriate requirements of S Coperator Application Certification: I hereby certify that the information submitted with this application is true,	section I of 19.15.17.13 NM bubsection G of 19.15.17.13 and bubsection G of 19.15.17.13 accurate and complete to th	IAC NMAC e best of my knowledge and belief. ations Manager
Required for impacted areas which will not be used for future service and op Soil Backfill and Cover Design Specifications based upon the appr Re-vegetation Plan - based upon the appropriate requirements of Subs Site Reclamation Plan - based upon the appropriate requirements of S Operator Application Certification: I hereby certify that the information submitted with this application is true, Name (Print): <u>Richard L. Wright</u>	section I of 19.15.17.13 NM bubsection G of 19.15.17.13 accurate and complete to th Title: Oper Date: 5/1	IAC NMAC e best of my knowledge and belief. ations Manager

7. OCD Approval: Permit Application (including closure plan) Closure P	Plan (only) FOR RECORD ONLY	
OCD Representative Signature:	Approval Date:	
Title:	OCD Permit Number:	
8. <u>Closure Report (required within 60 days of closure completion)</u> : 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.		
9. <u>Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:</u> Instructions: Please indentify the facility or facilities for where the liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than two facilities were utilized.		
Disposal Facility Name:	Disposal Facility Permit Number:	
Disposal Facility Name:	Disposal Facility Permit Number:	
Were the closed-loop system operations and associated activities performed on o	or in areas that will not be used for future service and operations?	
Required for impacted areas which will not be used for future service and operation Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique	tions:	
^{19.} <u>Operator Closure Certification</u> : I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.		
Name (Print):	Title:	
Signature:	Date:	
e-mail address:	Telephone:	



West Copperline 29 State Com # 1H Closed Loop Drilling System

Operations and Maintenance Plan

Closed Loop equipment will be inspected and monitored closely on a daily basis by each drilling rig Tour and by those hired specifically to operate the equipment. Any leak or release detected will be repaired immediately and the proper NMOCD official will be notified within the 48 hr requirement. A large release will require Caza Operating, LLC representatives to contact BLM immediately at the Carlsbad office "575 234 5972" Hobbs "575 393 3612" as well as the NMOCD @ 575 393 6161 as stated by NMOCD rule 116.

Closure Plan

During and after drilling operations, liquids (which apply), all drill cuttings and drilling fluids will be hauled and disposed of at the R-360 disposal (permit number NM 01-0006) located about 30 miles East of Carlsbad, New Mexico. An alternate approved disposal site has been selected Parabo disposal "Sundance" which is 4 miles East of Eunice (permit number NM 01-0003). The Second site would be used in the event of economics or physical problems with R-360 disposal.