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 HOBBSOCD State of New Mexico Minerals and Natural Resources Department Oil Conservation Division 1220 S. St. Francis Dr., Santa Fe, NM 87505 HOBBSOCD Santa Fe, NM 87505	Form C-144 July 21, 2008 For temporary pits, closed-loop systems, and below-grade tanks, submit to the appropriate NMOCD District Office. For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.
Pit, Closed-Loop System, Below-Grade T	
Proposed Alternative Method Permit or Closure P	lan Application
Type of action: Permit of a pit, closed-loop system, below-grade tank, or Closure of a pit, closed-loop system, below-grade tank, or Modification to an existing permit X Closure plan only submitted for an existing permitted or system, below-grade tank, or proposed alternative method	or proposed alternative method
Instructions: Please submit one application (Form C-144) per individual pit, closed-loop syste	m, below-grade tank or alternative request
Please be advised that approval of this request does not relieve the operator of liability should operations result in environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable go	
I.     Operator:MELROSE OPERATING COOGRID #:	
Address:20333 State Highway 249, Suite 310, Houston TX 77077	
Facility or well name:       CONE JALMAT YATES POOL UNIT #145         API Number:	<u> </u>
API Number: OCD Permit Number:	P1-02656
U/L or Qtr/QtrFSection24Township22SRange35E	_County:LEA
Center of Proposed Design: Latitude 32.377374° N Longitude 103.32474	8° W NAD: X 1927 🗌 1983
Surface Owner: 🗌 Federal X State Private 🗌 Tribal Trust or Indian Allotment 🦯	
2. X Pit: Subsection F or G of 19.15.17.11 NMAC	
Temporary: X Drilling 🗌 Workover	
Permanent Emergency Cavitation P&A	
X Lined Unlined Liner type: Thickness 20 mil X LLDPE HDPE PVC Other	-
X Ering-Reinforced	
Liner Seams: Welded X Factory Other Volume: Volume: 3000bbl I	Dimensions: L_85' x W_85' x D5'
3. Closed-loop System: Subsection H of 19.15.17.11 NMAC	
Type of Operation: P&A Drilling a new well Workover or Drilling (Applies to activities which intent)	ch require prior approval of a permit or notice of
Drying Pad Above Ground Steel Tanks Haul-off Bins Other	
Lined Unlined Liner type: Thicknessmil LLDPE HDPE PVC	Other
Liner Seams: Welded Factory Other	
4.	
Below-grade tank: Subsection I of 19.15.17.11 NMAC	
Volume:bbl Type of fluid:	
Tank Construction material:	
Secondary containment with leak detection 🗌 Visible sidewalls, liner, 6-inch lift and automatic over	erflow shut-off
□ Visible sidewalls and liner □ Visible sidewalls only □ Other	
Liner type: Thicknessmil  HDPE PVC Other	
<ul> <li>5.</li> <li>Alternative Method:</li> <li>Submittal of an exception request is required. Exceptions must be submitted to the Santa Fe Environment</li> </ul>	ntal Bureau office for consideration of approval.

Fencing: Subsection D of 19.15.17.11 NMAC (Applies to permanent pits, temporary pits, and below-grade tanks)

Chain link, six feet in height, two strands of barbed wire at top (Required if located within 1000 feet of a permanent residence, school, hospital, institution or church)

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

X Alternate. Please specify 4' HIGH, 10 GAUGE, FIELD FENCE, 6" x 6" SQUARE PATTERN w/Tee Post EVERY 10', BARB WIRE ON TOP

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

Screen Netting Other

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

Signs: Subsection C of 19.15.17.11 NMAC

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

Signed in compliance with 19.15.3.103 NMAC

## Administrative Approvals and Exceptions:

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

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

Administrative approval(s): Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for consideration of approval.

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

10. Siting Criteria (regarding permitting): 19.15.17.10 NMAC

Siting Criteria (regarding permitting): 19.15.17.10 NMAC Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of accept material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appro- office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of a Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to dryn above-grade tanks associated with a closed-loop system.	priate district pproval.
<ul> <li>Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank.</li> <li>NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells</li> </ul>	Yes X No
<ul> <li>Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).</li> <li>Topographic map; Visual inspection (certification) of the proposed site</li> </ul>	Yes X No
<ul> <li>Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.</li> <li>(Applies to temporary, emergency, or cavitation pits and below-grade tanks)</li> <li>Visual inspection (certification) of the proposed site; Aerial photo; Satellite image</li> </ul>	☐ Yes X No ☐ NA
<ul> <li>Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.</li> <li>(Applies to permanent pits)</li> <li>Visual inspection (certification) of the proposed site; Aerial photo; Satellite image</li> </ul>	☐ Yes X No ☐ NA
<ul> <li>Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application.</li> <li>NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site</li> </ul>	Yes X No
<ul> <li>Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended.</li> <li>Written confirmation or verification from the municipality; Written approval obtained from the municipality</li> </ul>	Yes X No
<ul> <li>Within 500 feet of a wetland.</li> <li>US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site</li> </ul>	Yes X No
<ul> <li>Within the area overlying a subsurface mine.</li> <li>Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division</li> </ul>	Yes X No
<ul> <li>Within an unstable area.</li> <li>Engineering measures incorporated into the design; NM Bureau of Geology &amp; Mineral Resources; USGS; NM Geological Society; Topographic map</li> </ul>	Yes X No
Within a 100-year floodplain.	Yes X No

- FEMA map

11. <b>Temporary Pits, Emergency Pits, and Below-grade Tanks Permit Application Attachment Checklist</b> : Subsection B of 19.15.17.9 NMAC <i>Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached.</i> <ul> <li>Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC</li> <li>Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC</li> <li>Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC</li> <li>Design Plan - based upon the appropriate requirements of 19.15.17.10 NMAC</li> <li>Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC</li> <li>Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC</li> <li>and 19.15.17.13 NMAC</li> </ul> <li>X Previously Approved Design (attach copy of design) API Number: 30-025-38921 or Permit Number:</li>		
12.         Closed-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 are attached.            Geologic and Hydrogeologic Data (only for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9            Siting Criteria Compliance Demonstrations (only for on-site closure) - based upon the appropriate requirements of 19.15.17.10 NMAC            Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC         Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC         Closure Plan (Please complete Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC         and 19.15.17.13 NMAC		
Previously Approved Design (attach copy of design) API Number:		
Previously Approved Operating and Maintenance Plan API Number:		
13.         Permanent Pits Permit Application 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 are attached.         Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 NMAC         Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC         Climatological Factors Assessment         Certified Engineering Design Plans - based upon the appropriate requirements of 19.15.17.11 NMAC         Dike Protection and Structural Integrity Design - based upon the appropriate requirements of 19.15.17.11 NMAC         Leak Detection Design - based upon the appropriate requirements of 19.15.17.11 NMAC         Quality Control/Quality Assurance Construction and Installation Plan         Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.11 NMAC         Nuisance or Hazardous Odors, including H <sub>2</sub> S, Prevention Plan         Emergency Response Plan         Oil Field Waste Stream Characterization         Monitoring and Inspection Plan         Erosion Control Plan         Closure Plan - based upon the appropriate requirements of 19.15.17.9 NMAC and 19.15.17.13 NMAC		
Proposed Closure: 19.15.17.13 NMAC		
Instructions: Please complete the applicable boxes, Boxes 14 through 18, in regards to the proposed closure plan.         Type: X Drilling Workover Emergency Cavitation P&A Permanent Pit Below-grade Tank Closed-loop System         Alternative         Proposed Closure Method: Waste Excavation and Removal         Waste Removal (Closed-loop systems only)         X On-site Closure Method (Only for temporary pits and closed-loop systems)         In-place Burial X On-site Trench Burial         Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for consideration)		
<ul> <li><sup>15.</sup> Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indicate, by a check mark in the box, that the documents are attached.</li> <li>X Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC</li> <li>X Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC</li> <li>X Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings)</li> <li>X Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC</li> <li>X Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC</li> <li>X Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC</li> </ul>		

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16. <u>Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only</u> : (19.15.17.13 <i>Instructions: Please indentify the facility or facilities for the disposal of liquids, drilling fluids and drill cuttings. Use attachment if</i> <i>facilities are required.</i>			
Disposal Facility Name: Disposal Facility Permit Number:			
Disposal Facility Name: Disposal Facility Permit Number:			
Will any of the proposed closed-loop system operations and associated activities occur on or in areas that <i>will not</i> be used for future service and operations? Yes (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			
<sup>17.</sup> <u>Siting Criteria (regarding on-site closure methods only)</u> : 19.15.17.10 NMAC Instructions: Each siting criteria requires a demonstration of compliance in the closure plan. Recommendations of acceptable son provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate dis considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Just demonstrations of equivalency are required. Please refer to 19.15.17.10 NMAC for guidance.	trict office or may be		
<ul> <li>Ground water is less than 50 feet below the bottom of the buried waste.</li> <li>NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells</li> </ul>	☐ Yes X No ☐ NA		
Ground water is between 50 and 100 feet below the bottom of the buried waste - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	☐ Yes X No ☐ NA		
<ul> <li>Ground water is more than 100 feet below the bottom of the buried waste.</li> <li>NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells</li> </ul>	X Yes 🗌 No 🗌 NA		
<ul> <li>Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).</li> <li>Topographic map; Visual inspection (certification) of the proposed site</li> </ul>	Yes X No		
<ul> <li>Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.</li> <li>Visual inspection (certification) of the proposed site; Aerial photo; Satellite image</li> </ul>	Yes X No		
Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application. - NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site	Yes X No		
<ul> <li>Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended.</li> <li>Written confirmation or verification from the municipality; Written approval obtained from the municipality</li> </ul>	Yes X No		
<ul> <li>Within 500 feet of a wetland.</li> <li>US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site</li> </ul>	Yes X No		
<ul> <li>Within the area overlying a subsurface mine.</li> <li>Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division</li> </ul>	Yes X No		
<ul> <li>Within an unstable area.</li> <li>Engineering measures incorporated into the design; NM Bureau of Geology &amp; Mineral Resources; USGS; NM Geological Society; Topographic map</li> </ul>	Yes X No		
Within a 100-year floodplain. - FEMA map	Yes X No		
18. On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indicate,			

by a check mark in the box, that the documents are attached.

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- X Siting Criteria Compliance Demonstrations based upon the appropriate requirements of 19.15.17.10 NMAC
- X Proof of Surface Owner Notice based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
- X Construction/Design Plan of Burial Trench (if applicable) based upon the appropriate requirements of 19.15.17.11 NMAC
- Construction/Design Plan of Temporary Pit (for in-place burial of a drying pad) based upon the appropriate requirements of 19.15.17.11 NMAC X Protocols and Procedures based upon the appropriate requirements of 19.15.17.13 NMAC
- X Confirmation Sampling Plan (if applicable) based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
- X Waste Material Sampling Plan based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC
- X Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings or in case on-site closure standards cannot be achieved)
- X Soil Cover Design based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC
- X Re-vegetation Plan based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC
- X Site Reclamation Plan based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

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19. Operator 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.
Name (Print):Billy C. Robbins	Title: Production Forman
Signature: Billy C. Robelton	Date: 11/23/10
Signature: Dury Charton	Date: /////
e-mail address:maximum@valornet.com	Telephone:575-390-4666
20.	
<b>OCD Approval:</b> Permit Application (including closure plan)	Closure Plan (only) OCD Conditions (see attachment)
OCD Representative Signature:	
	OCD Permit Number: 121-02656
Title:	OCD Permit Number:
21.	
Closure Report (required within 60 days of closure completion):	Subsection K of 19 15 17 13 NMAC
	re plan prior to implementing any closure activities and submitting the closure report.
	in 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 obtain	
section of the form units an approved closure plan has been obtain	
	Closure Completion Date:
A2	
22. Closure Method:	
	Alternative Closure Method Waste Removal (Closed-loop systems only)
If different from approved plan, please explain.	And mative closure method in waste Kennovan (closed-loop systems only)
I in unicient nom approved plan, please explain.	
23.	
<b>Closure Report Regarding Waste Removal Closure For Closed-</b>	loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only:
Instructions: Please indentify the facility or facilities for where th	e 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 per	rformed on or in areas that will not be used for future service and operations?
Yes (If yes, please demonstrate compliance to the items below	N) 🗌 No
Required for impacted areas which will not be used for future service	
Site Reclamation (Photo Documentation)	
Soil Backfilling and Cover Installation	
Re-vegetation Application Rates and Seeding Technique	
24.	
	e following items must be attached to the closure report. Please indicate, by a check
mark in the box, that the documents are attached.	
Proof of Closure Notice (surface owner and division)	
Proof of Deed Notice (required for on-site closure)	
Plot Plan (for on-site closures and temporary pits)	
Confirmation Sampling Analytical Results (if applicable)	
Waste Material Sampling Analytical Results (required for on-	-site closure)
Disposal Facility Name and Permit Number	
<ul> <li>Disposal Facility Name and Permit Number</li> <li>Soil Backfilling and Cover Installation</li> </ul>	
<ul> <li>Disposal Facility Name and Permit Number</li> <li>Soil Backfilling and Cover Installation</li> <li>Re-vegetation Application Rates and Seeding Technique</li> </ul>	
<ul> <li>Disposal Facility Name and Permit Number</li> <li>Soil Backfilling and Cover Installation</li> <li>Re-vegetation Application Rates and Seeding Technique</li> <li>Site Reclamation (Photo Documentation)</li> </ul>	
<ul> <li>Disposal Facility Name and Permit Number</li> <li>Soil Backfilling and Cover Installation</li> <li>Re-vegetation Application Rates and Seeding Technique</li> </ul>	Longitude NAD: 1927 1983
<ul> <li>Disposal Facility Name and Permit Number</li> <li>Soil Backfilling and Cover Installation</li> <li>Re-vegetation Application Rates and Seeding Technique</li> <li>Site Reclamation (Photo Documentation) On-site Closure Location: Latitude</li> </ul>	Longitude NAD: 1927 1983
<ul> <li>Disposal Facility Name and Permit Number</li> <li>Soil Backfilling and Cover Installation</li> <li>Re-vegetation Application Rates and Seeding Technique</li> <li>Site Reclamation (Photo Documentation) On-site Closure Location: Latitude</li> </ul>	Longitude NAD: 1927 1983
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<ul> <li>Disposal Facility Name and Permit Number</li> <li>Soil Backfilling and Cover Installation</li> <li>Re-vegetation Application Rates and Seeding Technique</li> <li>Site Reclamation (Photo Documentation) On-site Closure Location: Latitude</li> <li>25.</li> <li>Operator Closure Certification: I hereby certify that the information and attachments submitted with</li> </ul>	
<ul> <li>Disposal Facility Name and Permit Number</li> <li>Soil Backfilling and Cover Installation</li> <li>Re-vegetation Application Rates and Seeding Technique</li> <li>Site Reclamation (Photo Documentation) On-site Closure Location: Latitude</li> </ul> 25. Operator Closure Certification: I hereby certify that the information and attachments submitted with belief. I also certify that the closure complies with all applicable closure	this closure report is true, accurate and complete to the best of my knowledge and osure requirements and conditions specified in the approved closure plan.
<ul> <li>Disposal Facility Name and Permit Number</li> <li>Soil Backfilling and Cover Installation</li> <li>Re-vegetation Application Rates and Seeding Technique</li> <li>Site Reclamation (Photo Documentation) On-site Closure Location: Latitude</li> <li>25.</li> <li>Operator Closure Certification: I hereby certify that the information and attachments submitted with</li> </ul>	this closure report is true, accurate and complete to the best of my knowledge and osure requirements and conditions specified in the approved closure plan.
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<ul> <li>Disposal Facility Name and Permit Number</li> <li>Soil Backfilling and Cover Installation</li> <li>Re-vegetation Application Rates and Seeding Technique</li> <li>Site Reclamation (Photo Documentation) On-site Closure Location: Latitude</li> </ul> 25. Operator Closure Certification: I hereby certify that the information and attachments submitted with belief. I also certify that the closure complies with all applicable closure	this closure report is true, accurate and complete to the best of my knowledge and osure requirements and conditions specified in the approved closure plan. Title:
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Oil Conservation Division