District 1 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 882102 8 2013 District III 1000 Rio Brazos Road, Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 DECEIVED	State of New Mexico Energy Minerals and Natural Resources Department Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	Form C-144 CLEZ July 21, 2008 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.					
<u>Closed-Loop System Permit or Closure Plan Application</u> (that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure) Type of action: Permit Closure							
closed-loop system that only use above ground steel t	C-144 CLEZ) per individual closed-loop system reques anks or haul-off bins and propose to implement waste	removal for closure, please submit a Form C-144.					
Please be advised that approval of this request does not r environment. Nor does approval relieve the operator of i							
Operator:OXY USA WTP LP	OGRID #:						
Address:PO BOX 50250 - Midland, TX 79710	)						
Facility or well name:East Eumont Unit 202 API Number: 30 1025-40936	OCD Permit Number: <del>//</del>	* P1-057645					
	Township 19S Range 37E, NMPM (						
	2° Longitude _W 103.2428207°_						
Surface Owner: Federal 🛛 State 🗋 Private 🗍 T							
2. ∑ <u>Closed-loop System</u> : Subsection H of 19.15.17 Operation: ∑ Drilling a new well □ Workover or ∑ Above Ground Steel Tanks or ∑ Haul-off Bins	Drilling (Applies to activities which require prior ap	proval of a permit or notice of intent) D&A					
Signs:       Subsection C of 19.15.17.11 NMAC         ⊠ 12"x 24", 2" lettering, providing Operator's nam         ⊠ Signed in compliance with 19.15.3.103 NMAC	e, site location, and emergency telephone numbers						
	attached to the application. Please indicate, by a characteristic of 19.15.17.11 NMAC the appropriate requirements of 19.15.17.12 NMAC	neck mark in the box, that the documents are					
	upon the appropriate requirements of Subsection C						
Previously Approved Design (attach copy of des	· · · · · · · · · · · · · · · · · · ·	-					
Previously Approved Operating and Maintenance	e Plan API Number:						
5. <u>Waste Removal Closure For Closed-loop Systems</u> Instructions: Please indentify the facility or faciliti							
facilities are required. Disposal Facility Name: <u>Control-Recovery-Ine.</u>	P31.0	AM ALADA					
		mit Number:					
Disposal Facility Name:NM-01-003 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							
Re-vegetation Plan - based upon the appropria	for future service and operations: based upon the appropriate requirements of Subs te requirements of Subsection I of 19.15.17.13 NMA priate requirements of Subsection G of 19.15.17.13 N	AC					
6. Operator Application Certification:							
I hereby certify that the information submitted with							
Name (Print): Anthony Tschacher		lling Engineer					
Signature: 14 12h	Date:	13/13					
c-mail address:anthony_tschacher@oxy.com	· · · · · · · · · · · · · · · · · · ·	(713) 985-6949					
Form C-144 CLEZ	Oil Conservation Division	Page 1 of 2					

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7. <u>OCD Approva</u> l:  Permit Application (including) closure pjan)  Que view Plan (only)					
OCD Representative Signature: Approval Date: -29-2013					
Title:	Approval Date: <u>29-2013</u> OCD Permit Number: <u>P1 D5645</u>				
8. 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.					
9. Closure Report Regarding Waste Removal Closure For Closed-loop System Instructions: Please indentify the facility or facilities for where the liquids, dr two facilities were utilized.	s That Utilize Above Ground Steel Tanks or Haul-off Bins Only:				
Disposal Facility Name:	Disposal Facility Permit Number:				
Disposal Facility Name:	•				
Were the closed-loop system operations and associated activities performed on or in areas that will not be used for future service and operations? Yes (If yes, please demonstrate compliance to the items below) No					
Required for impacted areas which will not be used for future service and operation         Site Reclamation (Photo Documentation)         Soil Backfilling and Cover Installation         Re-vegetation Application Rates and Seeding Technique	tions:				
<ul> <li>Derator Closure Certification:</li> <li>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.</li> </ul>					
me (Print): Title:					
Signature:	Date:				
c-mail address:	Telephone:				

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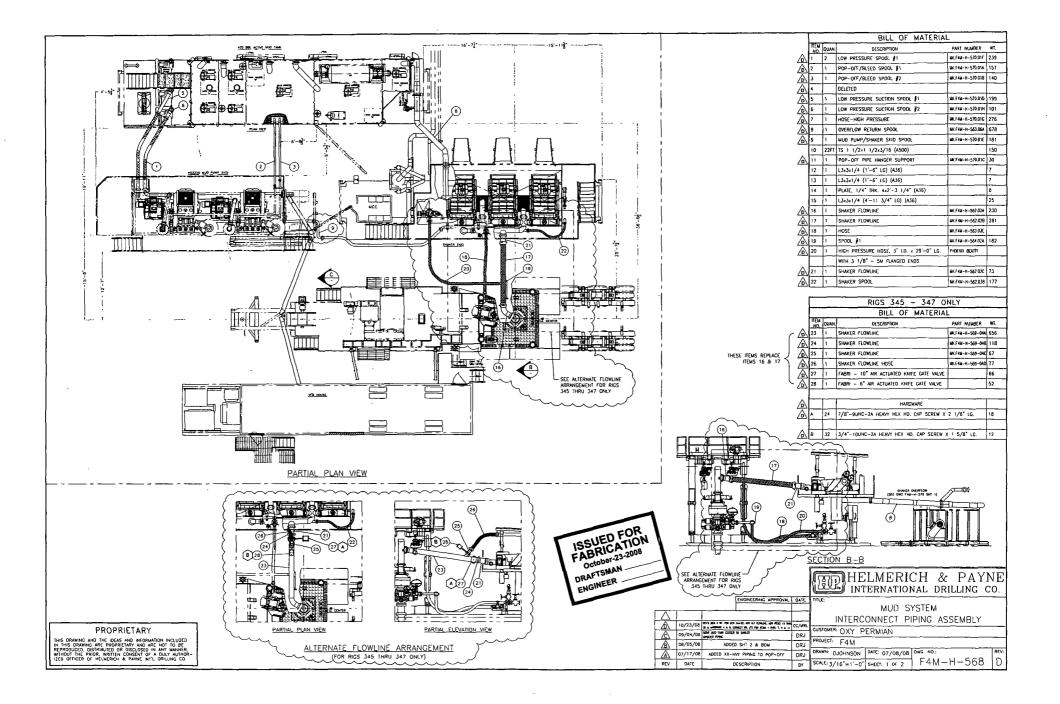


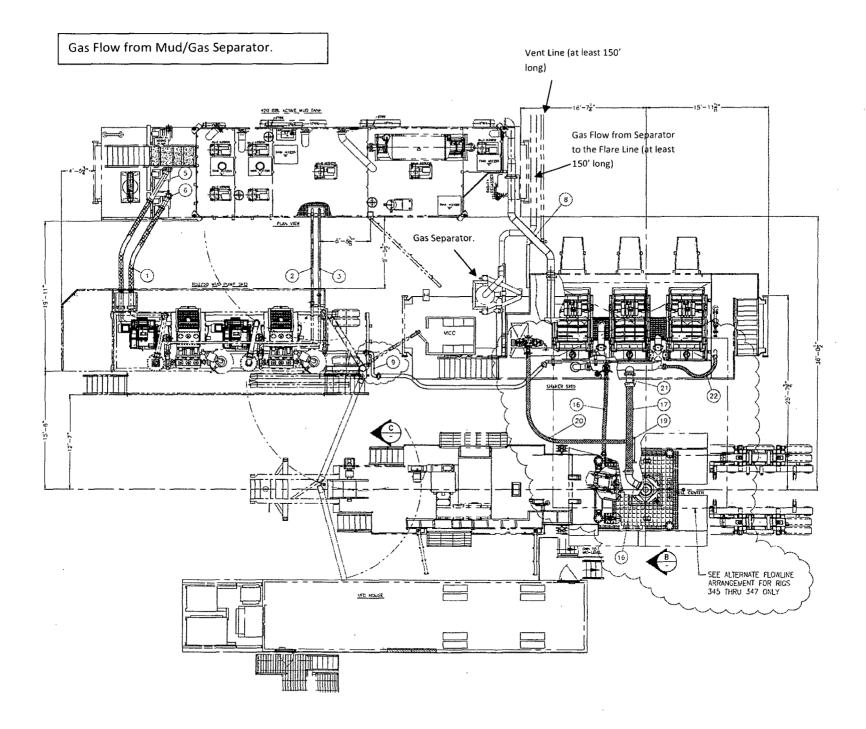
## New Mexico Drilling Daily Circulating System Inspection For Closed Loop Systems

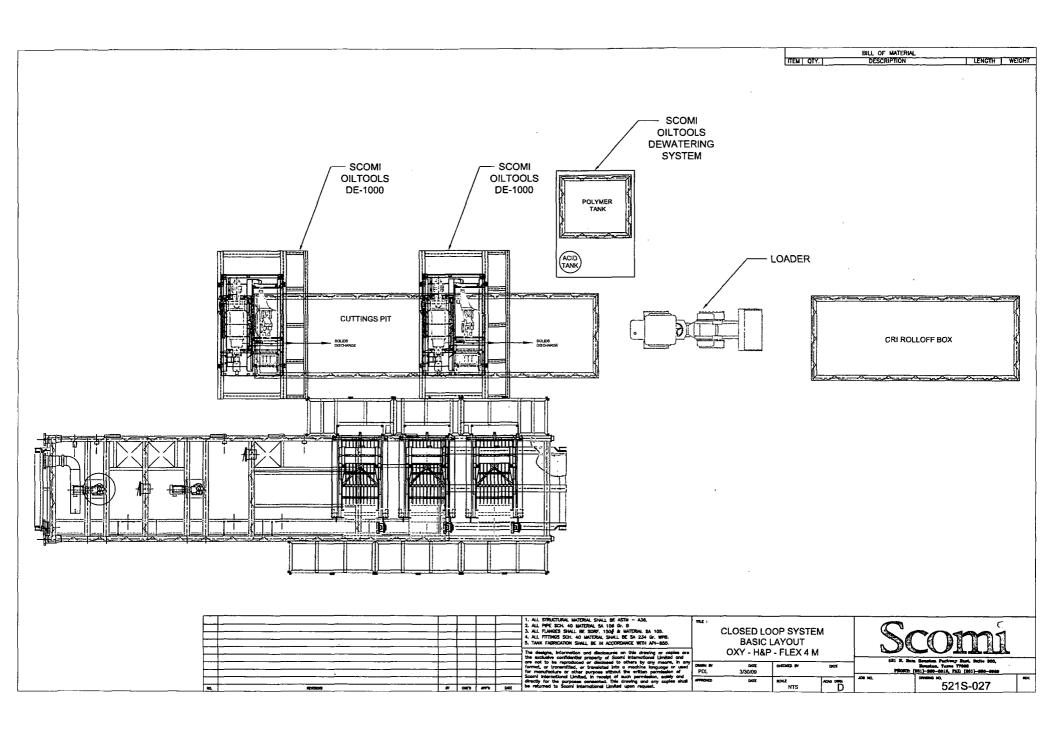
Wellname:	2:		Permit #:	Permit #:		ate:	
County:			Rig Dem		e Date:		
Inspection Date	Time	By Whom	Any drips or leaks from contained?* Explain.	m steel tanks, lines or	<sup>,</sup> pumps not	Has any disposed	hazardous waste been of in system?
	<u>,</u>						
					······		
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All circulating systems to be inspected DAILY during drilling operations. \*Any leak of the steel tanks, lines or pumps shall be reported to the NMOCD and repaired within 48 hours.

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