Instructions: Please about one application (Form C-144 CLE2) per Individual closed-loop system request. For one application request other than for a closed-loop system that only use about a form C-144. Prease badvised that approval of this request does not relive the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances. Operator:	District I State of New Mexico Form C-144 CLEZ 1625 N. French Dr., Hobbs, NM 88240 HOBBS OCD Energy Minerals and Natural Resources District II Department Department 1301 W. Grand Avenue, Artesia, NM 88210 Department For closed-loop systems that only use above District III 0il Conservation Division foil Conservation Division foil Conservation Division 1000 Rio Brazos Road, Aztec, NM 8741MAR 0 5 2013 Oil Conservation Division foil Conservation Division foil Conservation Division 1220 S. St. Francis Dr., Santa Fe, NM 87505 Santa Fe, NM 87505 Santa Fe, NM 87505 For Closure Plan Application Closed-Loop System Permit or Closure Plan Application (that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure) Type of action: X Permit Closure		
environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances. Operator: APACHE CORPORATION OGRID #: 873 Address: M3 VETERANS AURARK LN, STE. 3000 MIDLAND_TEXAS_79765 Facility or well name: NMGSAU #383 OCD Permit Number: 9705 Pacility or well name: NMGSAU #383 OCD Permit Number: 9705 Pacility or well name: NMGSAU #383 OCD Permit Number: 9705 VIL or Qur(0tr H Section 24, Township 195 Range 36 E. County: LEA Center of Proposed Design: Latitude 32.645981 N_ Longitude 103.302817 W_ NAD: NAD: [] 1927] 1983 Surface Owner: Pederal Ø State Private [] Tribal Trust or Indian Allotment [] Pederal Ø State Private [] Tribal Trust or Indian Allotment * Cased-loop System: Subsection of of 19.15.17.11 NMAC [] PexA Ø Above Ground Steel Tanks or [] Haut-Off Bins \$ [] Pexa Permit Application Attachment Checkligt: Subsection E of 19.15.17.2 NMAC Instructions: Each of the following items smast be attached to the appropriate requirements of 19.15.17.12 NMAC [] Perviously Approved Design (attach copy of design) API Number: [] Perviously Approved Design (attach copy of design) API	closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144.		
Operator:	environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable gov	ernmental authority's rules, regulations or ordinances.	
Address: 303 VETERANS AIRPARK LN, STE. 3000 MIDLAND TEXAS 79705 Facility or well name: MGSAU #383 OCD Permit Number:		ID #: 873	
API Number: 30.425 41035 OCD Permit Number: 40.535 U/L or Qtr/Qtr H Section 24 Township 195 Range 36 E County: LEA Center of Proposed Design: Latitude 32.645981 N Longitude Longitude 103.302817 W NAD: NAD: [1927] 1983 Surface Owner: Federal 🗟 State Private Tribel Trust or Indian Allotment [100]		<u>05</u>	
U/L or Qtr/Qtr H Section 24 Township 195 Range 36 E County: LEA Center of Proposed Design: Latitude 32.645981 N Longitude 103.302817 W NAD: 1927 1983 Surface Owner: Pederal State Private Tribal Trust or Indian Allotment Image: Consect-teop System: Subsection H of 19.15.17.11 NMAC Operation: Diffing a new well Workover or Drifting (Applies to activities which require prior approval of a permit or notice of intent) P&A Stans: Subsection C of 19.15.17.11 NMAC Image: Diffing a new well Workover or Drifting (Applies to activities which require prior approval of a permit or notice of intent) P&A Stans: Subsection C of 19.15.17.11 NMAC Image: Diffing a new well permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC Image: Diffing and Maintenance Plan Attachment Checklist: Subsection B of 19.15.17.9 NMAC Imate: 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. M Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC M Operating and Maintenance Plan - 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 Design (attach copy of design) API Number: Maste Removal Closser For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC)<			
Center of Proposed Design: Latitude <u>32.645981 N</u> Longitude <u>103.302817 W</u> NAD: [31927] 1983 Surface Owner: Federal [3] State Private Tribal Trust or Indian Allotment			
1. Image: Subsection H of 19.15.17.11 NMAC Operation: Image: Operation Image: Subsection H of 19.15.17.11 NMAC Image: Subsection C of 19.15.17.11 NMAC Signed in compliance with 19.15.3.103 NMAC 4 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. Image: Design Plan - based upon the appropriate requirements of 19.15.17.12 NMAC Image: Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC Image: Subsection C of 19.15.17.13 NMAC Image: Previously Approved Design (attach copy of design) API Number: Image: Previously Approved Design (attach copy of design) API Number: Image: Previously Approved Design (attach copy of facilities for the disposal facility Permit Number: NM-01-0003 Disposal Facility Name: <t< td=""><td>Center of Proposed Design: Latitude <u>32.645981 N</u> Longitude <u>103.302817 W</u> NAD:</td><td>1927 🗖 1983</td></t<>	Center of Proposed Design: Latitude <u>32.645981 N</u> Longitude <u>103.302817 W</u> NAD:	1927 🗖 1983	
Closed-loop System: Subsection H of 19.15.17.11 NMAC Operation: Drilling a new well Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) P&A Above Ground Steel Tanks or Haul-off Bins * Signs: Subsection C of 19.15.17.11 NMAC 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers Signed in compliance with 19.15.3.103 NMAC 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. 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 NMAC * Previously Approved Operating and Maintenance Plan API Number: Previously Approved Design (attach copy of design) API Number: * Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: (19.15.17.13 D MAC) Instructions: Please Indentify the facility or facilities for the disposal Facility Permit Number: NM-01-00003			
Constructions: 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. 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 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 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 NMAC Operating and Maintenance Plan - 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:	Operation: Drilling a new well Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) P&A Above Ground Steel Tanks or Haul-off Bins 3. Signs: Subsection C of 19.15.17.11 NMAC		
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□ 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 NMAC □ Previously Approved Design (attach copy of design) API Number:	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.		
□ Previously Approved Design (attach copy of design) API Number:	Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC		
5. Waste 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 two facilities are required. Disposal Facility Name: SUNDANCE INCORPORATED Disposal Facility Permit Number: NM-01-0003 Disposal Facility Name: CRI Disposal Facility Permit Number: NM-01-0006 Will 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 operations? 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 Revegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC			
Waste 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 two facilities are required. Disposal Facility Name: SUNDANCE INCORPORATED Disposal Facility Permit Number: NM-01-0003 Disposal Facility Name: CRI Disposal Facility Permit Number: NM-01-0006 Will 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 operations? No 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 Revegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC	Previously Approved Operating and Maintenance Plan API Number:	·····	
Disposal Facility Name: CRI Disposal Facility Permit Number: NM-01-0006 Will 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 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	Waste 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 two		
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 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 	Yes (If yes, please provide the information below) X No		
Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC	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 Subse	ection H of 19.15.17.13 NMAC	

Oil Conservation Division

MAR 0 6 2013

6. 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): VICKI BROWN Title:	DRILLING TECH III	
Signature: Nicki Strow Dat	e: <u>MARCH 4. 2013</u>	
e-mail address: vicki.brown@apachecorp.com Telephon	e: <u>432-818-1117</u>	
7. <u>OCD Approval:</u> Remit Application (including closure plan) Closure Plan (only)		
OCD Representative Signature: Approval Date:Approval Date:Approv		
Title:	OCD Permit Number: <u>P1-05837</u>	
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. Closure Completion Date:		
9.		
Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: 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:		
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 operations: Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique		
10.		
Operator Closure Certification: 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:		
e-mail address:	Telephone:	

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DESIGN PLAN, OPERATING & MAINTENANCE PLAN, & CLOSURE PLAN FOR OCD FOR C-144

NMGSAU #383

DESIGN PLAN

Fluid & cuttings coming from drilling operations will pass over the Shale Shaker with the cuttings going to the Sundance Inc / CRI haul off bin and the cleaned fluid returning to the working steel pits.

Equipment includes:

- 2-500 bbl steel frac tanks (fresh water for drilling)
- 2-180 bbl steel working pits
- 3-75 bbl steel haul off bins
- 2 Pumps (6-1/2" x 10" PZ 10)
- 1 Shale shaker
- 1-Mud cleaner QMAX MudStripper

OPERATING AND MAINTENANCE PLAN

Inspection to occur every tour for proper operation of system and individual components. If any problems are found they will be repaired and/or corrected immediately.

CLOSURE PLAN

All haul bins containing cuttings will be removed from location and hauled to Sundance Incorporated (NM-01-0003) disposal site located 3 miles East of Eunice, NM on the Texas border / Controlled Recovery, Inc's (NM-01-0006) disposal site located near mile marker 66 on Highway 62/180.

Vicki Brown Drilling Tech