State of New Mexico Energy Minerals and Natural Resources Department Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505

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 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: Permit Closure

Instructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a 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. Please be advised that approval of this request does not relieve the operator of liability should operations result in pollution of surface water, ground water or the
environment. Nor does approval relieve the operator of its responsibility to comply with any other applicable governmental authority's rules, regulations or ordinances
Operator: LINN Operating, Inc OGRID #: 269324
Address: 600 Travis Street, Suite 5100 Houston, Texas 77002
Facility or well name: Phillips Lea #004
API Number: 30-025-02156 OCD Permit Number: P1-05976
U/L or Qtr/Qtr M Section 31 Township 17S Range 34E County: Lea
Center of Proposed Design: Latitude <u>32.7848876953645</u> Longitude <u>-103.606964607584</u> NAD: []1927 [] 1983
Surface Owner: 🔲 Federal 🛛 State 🔲 Private 🛄 Tribal Trust or Indian Allotment
2.
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) De&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
<b><u>Closed-loop Systems Permit Application Attachment Checklist</u>: 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</b>
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 Design (attach copy of design) API Number:
Previously Approved Operating and Maintenance Plan 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 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: CR1 (Control Recovery Inc.) Disposal Facility Permit Number: NM01-0019
Disposal Facility Name: <u>Gandy-Marley Disposal</u> Disposal Facility Permit Number: <u>NM01-0003</u>
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?
$\square$ Yes (If yes, please provide the information below) $\boxtimes$ 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
6. Operator Application Certification:
1 hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief.
1/10/2012
Signature Date: 4/01/010
e-mail address: TCallahan@linnenergy.com Telephone: 281-840-4272
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7. <u>OCD Approval</u> : I Permit Application (incluting closure plan) I Closure Plan (only)
OCD Representative Signature Jonneha Approval Date: 4-2-2013
Title: Dist. Mar OCD Permit Number: 91-05976
8. <u>Closure Report (required within 60 davs 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: 3/8/2013
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: LEA LAND, LLC Disposal Facility Permit Number: SWM131401
Disposal Facility Name: Disposal Facility Permit Number:
Were the closed-loop system operations and associated activities performed on or in areas that <i>will not</i> be used for future service and operations? Yes (If yes, please demonstrate compliance to the items below)
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: Date:
c-mail address: Telephone:

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### LINN OPERATING, INC.

## PHILLIPS LEA #004

## UNIT M, SEC 31, T-17-S, R-34-E

#### LEA COUNTY, NM

#### AP1#: 30-025-02156

### Item #4 Form C-144 CLEZ Attachment

#### Equipment & Design:

LINN Operating, Inc. will use a closed loop system in the workover of this well. The following equipment will be on location:

(1) 500 bbl steel tank

### **Operations & Maintenance**

During each day of operation, the rig's crew will inspect and closely monitor the fluids contained within the steel tank and visually monitor any release that may occur. Should a release, spill or leak occur, the NMOCD District 1 office Hobbs (575-393-6161) will be notified, as required in the NMOCD's rule 19.15.29.8.

## <u>Closure</u>

After workover, fluids and solids will be hauled and disposed at CRI's (Control Recovery Inc.) location, permit number NM 01-0019. Secondary site will be Gandy-Marley Disposal, permit number NM 01-0006.