<u>)istrict 1</u> 625 N. French Dr., Hobbs, NM 88240	State of New Mexico Energy Minerals and Natural Resources	Form C-144 CLEZ
dia fia m	BS OCD Department	July 21, 2008
istrict III	Oil Conservation Division	For closed-loop systems that only use above ground steel tanks or haul-off bins and propose
istrict IV ADD	0 3 2013 ¹²²⁰ South St. Francis Dr.	to implement waste removal for closure, submit to the appropriate NMOCD District Office.
220 S. St. Francis Dr., Santa Fe, NM 87505 AFR	Santa Fe, NM 87505	<u>\</u>
Closed	ooprSystem Permit or Closure Plan	Application
(that only use above ground	steel tanks or haul-off bins and propose to imple	ment waste removal for closure)
	Type of action: 🗌 Permit 🔳 Closure	2.
closed-loop system that only use above ground ste ase be advised that approval of this request does n	m C-144 CLEZ) per individual closed-loop system request set tanks or haul-off bins and propose to implement wasted of relieve the operator of liability should operations result of its responsibility to comply with any other applicable g	e removal for closure, please submit a Form C-144. in pollution of surface water, ground water or the
Barry Easken Oil and Banch II	D. OGRID #: 1	51/16
	D0000#: idland, TX 79707	
acility or well name: Denton No. 14		
PI Number: <u>30-025-05301</u>	OCD Permit Number: P1-(75561
	11 Township 15S Range 37E	
	Longitude	
urface Owner: 🛄 Federal 🔀 State 🗌 Private [NAD. [1727] 1765
Above Ground Steel Tanks or Haul-off B		
	name, site location, and emergency telephone numbers	
		2
losed-loop Systems Permit Application Attac istructions: Each of the following items must tached. Design Plan - based upon the appropriate n Operating and Maintenance Plan - based u	Chment Checklist: Subsection B of 19.15.17.9 NMAC be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA	heck mark in the box, that the documents are C
Closed-loop Systems Permit Application Attac instructions: Each of the following items must ttached. Design Plan - based upon the appropriate r Operating and Maintenance Plan - based u	chment Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C	<i>heck mark in the box, that the documents are</i> C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Closed-loop Systems Permit Application Attac instructions: Each of the following items must ttached. Design Plan - based upon the appropriate n Operating and Maintenance Plan - based u Closure Plan (Please complete Box 5) - ba	chment Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C design) API Number:	<i>heck mark in the box, that the documents are</i> C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Iosed-loop Systems Permit Application Attaches istructions: Each of the following items must trached. Design Plan - based upon the appropriate n Operating and Maintenance Plan - based u Closure Plan (Please complete Box 5) - ba Previously Approved Design (attach copy of Previously Approved Operating and Mainten Vaste Removal Closure For Closed-loop Systemstructions: Please indentify the facility or face	chment Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C design) API Number:	<i>heck mark in the box, that the documents are</i> C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC – – – – ––––––––––––––––––––––––––––
Iosed-loop Systems Permit Application Attached instructions: Each of the following items must tached. Design Plan - based upon the appropriate for the properties of the complete Box 5) - based upon the approved Plan - based upon the approved Design (attach copy of Previously Approved Design (attach copy of Previously Approved Operating and Mainten Vaste Removal Closure For Closed-loop Systemstructions: Please indentify the facility or factorilities are required.	Chment Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C design) API Number: mance Plan API Number: ems That Utilize Above Ground Steel Tanks or Hau cilities for the disposal of liquids, drilling fluids and dr	<i>heck mark in the box, that the documents are</i> C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC – – – – ––––––––––––––––––––––––––––
Iosed-loop Systems Permit Application Attac istructions: Each of the following items must ttached. Design Plan - based upon the appropriate n Operating and Maintenance Plan - based u Closure Plan (Please complete Box 5) - ba Previously Approved Design (attach copy of Previously Approved Operating and Mainten Vaste Removal Closure For Closed-loop System istructions: Please indentify the facility or fac- recilities are required. Disposal Facility Name:	<u>Chment Checklist</u> : Subsection B of 19.15.17.9 NMAG <i>be attached to the application. Please indicate, by a c</i> requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C design) API Number:	heck mark in the box, that the documents are C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Iosed-loop Systems Permit Application Attached. istructions: Each of the following items must tached. Design Plan - based upon the appropriate n Operating and Maintenance Plan - based u Closure Plan (Please complete Box 5) - ba Previously Approved Design (attach copy of Previously Approved Operating and Mainten /aste Removal Closure For Closed-loop System istructions: Please indentify the facility or factor icilities are required. Disposal Facility Name: Disposal Facility Name:	Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C design) API Number:	heck mark in the box, that the documents are C C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Iosed-loop Systems Permit Application Attached. istructions: Each of the following items must tached. Design Plan - based upon the appropriate f Operating and Maintenance Plan - based u Closure Plan (Please complete Box 5) - ba Previously Approved Design (attach copy of Previously Approved Operating and Mainten //aste Removal Closure For Closed-loop System istructions: Please indentify the facility or factor icilities are required. Disposal Facility Name: //ill any of the proposed closed-loop system ope Yes (If yes, please provide the information equired for impacted areas which will not be us Soil Backfill and Cover Design Specificati Re-vegetation Plan - based upon the appro	chment Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C design) API Number:	heck mark in the box, that the documents are C C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Iosed-loop Systems Permit Application Attactions: Each of the following items must trached. Design Plan - based upon the appropriate n Operating and Maintenance Plan - based u Closure Plan (Please complete Box 5) - ba Previously Approved Design (attach copy of Previously Approved Operating and Mainten Vaste Removal Closure For Closed-loop Systemstructions: Please indentify the facility or factoricilities are required. Disposal Facility Name: Disposal Facility Name: Vaste (If yes, please provide the information equired for impacted areas which will not be us Soil Backfill and Cover Design Specificati Re-vegetation Plan - based upon the appro Site Reclamation Plan - based upon the appro	chment Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C 'design) API Number: mance Plan API Number: cilities for the disposal of liquids, drilling fluids and dr cilities for the disposal of liquids, drilling fluids and dr cilities and associated activities occur on or in areas that below) No read for future service and operations: ions based upon the appropriate requirements of Subsection I of 19.15.17.13 NM	heck mark in the box, that the documents are C C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Iosed-loop Systems Permit Application Attached. istructions: Each of the following items must tached. Design Plan - based upon the appropriate n Operating and Maintenance Plan - based u Closure Plan (Please complete Box 5) - ba Previously Approved Design (attach copy of Previously Approved Operating and Mainten /aste Removal Closure For Closed-loop System istructions: Please indentify the facility or factor istructions: Please provide the information isiposal Facility Name: Disposal Facility Name: iiii any of the proposed closed-loop system ope Yes (If yes, please provide the information equired for impacted areas which will not be us Soil Backfill and Cover Design Specificati Re-vegetation Plan - based upon the appro Site Reclamat	chment Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C design) API Number:	heck mark in the box, that the documents are C C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Iosed-loop Systems Permit Application Attactions: Each of the following items must trached. Design Plan - based upon the appropriate n Operating and Maintenance Plan - based u Closure Plan (Please complete Box 5) - ba Previously Approved Design (attach copy of Previously Approved Operating and Mainten //aste Removal Closure For Closed-loop System astructions: Please indentify the facility or factor actilities are required. Disposal Facility Name: //ill any of the proposed closed-loop system ope Yes (If yes, please provide the information equired for impacted areas which will not be us Soil Backfill and Cover Design Specificati Re-vegetation Plan - based upon the appro Site Reclamation Plan - based upon the appro preator Application Certification: hereby certify that the information submitted w	chment Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a conservation of 19.15.17.12 NMAC requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection Conservation Subsection Conservation idesign) API Number:	theck mark in the box, that the documents are C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Iosed-loop Systems Permit Application Attached. Instructions: Each of the following items must trached. Design Plan - based upon the appropriate n Operating and Maintenance Plan - based u Closure Plan (Please complete Box 5) - based Previously Approved Design (attach copy of Previously Approved Operating and Mainten Vaste Removal Closure For Closed-loop System Instructions: Please indentify the facility or factor Instructions: Please provide the information Instructions: Please provide the information Insposal Facility Name: Instruction Instruction Soil Backfill and Cover Design Specificati Re-vegetation Plan - based upon the appro Site Reclamation Plan - based upon the appro Site Reclamation Plan - based upon the appro Site Reclamation Plan - based upon the appro Instructing the information submitted wate (Print):	chment Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C design) API Number: nance Plan API Number:	theck mark in the box, that the documents are C C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Instructions: Each of the following items must ttached. Design Plan - based upon the appropriate n Operating and Maintenance Plan - based u Closure Plan (Please complete Box 5) - ba Previously Approved Design (attach copy of Previously Approved Operating and Mainten Vaste Removal Closure For Closed-loop System Instructions: Please indentify the facility or factorial Disposal Facility Name: Disposal Facility Name: Vill any of the proposed closed-loop system ope Yes (If yes, please provide the information equired for impacted areas which will not be us Soil Backfill and Cover Design Specificati Re-vegetation Plan - based upon the appro Site Reclamation Plan - based upon the appro Site Reclamation Plan - based upon the appro Site Reclamation Plan - based upon the appro Image: Prevator Application Certification: hereby certify that the information submitted w ame (Print): ignature:	chment Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C design) API Number: nance Plan API Number:	theck mark in the box, that the documents are C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC
Iosed-loop Systems Permit Application Attached. Image: Design Plan - based upon the appropriate in trached. Image: Design Plan - based upon the appropriate in Operating and Maintenance Plan - based upon the appropriate in Operating and Maintenance Plan - based upon the approved Design (attach copy of Previously Approved Design (attach copy of Previously Approved Operating and Maintenance Plan - based upon the approved Operating and Maintenance Plan - based upon the facility or factors: Please indentify the proposed closed-loop system operators: Please provide the information end in the proposed closed-loop system operators: Please indentify the factors: Please indentify the information submitted wate (Print):	chment Checklist: Subsection B of 19.15.17.9 NMAG be attached to the application. Please indicate, by a c requirements of 19.15.17.11 NMAC pon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of 19.15.17.12 NMA sed upon the appropriate requirements of Subsection C design) API Number: nance Plan API Number:	theck mark in the box, that the documents are C C of 19.15.17.9 NMAC and 19.15.17.13 NMAC

7. <u>OCD Approva</u> l: Permit Application (including closure plan) (Sosure P	lan (only)					
OCD Representative Signature:	Approval Date:					
Title:	OCD Permit Number 7-0556					
 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: <u>3-27-2013</u> 						
9. Closure Report Regarding Waste Removal Closure For Closed-loop Systems Instructions: Please indentify the facility or facilities for where the liquids, drive two facilities were utilized. Disposal Facility Name: Disposal Facility Name:	lling fluids and drill cuttings were disposed. Use attachment if more than					
Disposal Facility Name:	Disposal Facility Permit Number:					
Were the closed-loop system operations and associated activities performed on or Yes (If yes, please demonstrate compliance to the items below) No	in areas that <i>will not</i> be used for future service and operations?					
Required for impacted areas which will not be used for future service and operate Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique	ions:					
Information Information Information Information and attachments submitted with this closure belief. I also certify that the closure complies with all applicable closure requirer Name (Print): Kim Tyson						
Signature: <u>kimt@forl.com</u>	Date: 4-1-2013					
e-mail address: kimt@forl.com	Telephone: 432-687-1777					

•

•

Permitinio	(Soungenry Neme	Hilemilia Colliniy	Annual Constant actility/Name Constant Annual	tegals the second	
19	GANDY MARLEY INC	10/06/1994 Chaves	GANDY MARLEY LANDFARM	-4-11 S-31 E	
28	OLD LOCO OIL CO	07/02/1985 Eddy	OLD LOCO TREATING PLANT	-19-17 S-31 E	
43	Loco Hills Landfarm LLC	11/08/2004 Eddy	Loco Hills Landfarm	m-32-16 S-30 E	÷
4	LOCO HILLS WATER DISPOSAL	10/30/1981 Eddy	LOCO HILLS WATER DISPOSAL	M-16-17 S-30 E	
36	OK HOT OIL SERVICE INC	08/16/2000 Eddy	OK HOT OIL SERVICES INC	O-14-17 S-28 E	
24	CHAPARRAL SWD	01/31/1995 Lea	CHAPARRAL TREATING PLANT	B-17-23 S-37 E	
35	LEA LAND INC	01/05/2000 Lea	LEA LAND LANDFILL	-32-20 S-32 E	
12	C&C LANDFARM INC	11/16/1992 Lea	C&C LANDFARM	B-3-20 S-37 E	
13	ENVIRONMENTAL PLUS INC	02/15/1993 Lea	ENVIRONMENTAL PLUS LANDFARM	-14-22 S-37 E	
15	GOO YEA LANDFARM INC	11/16/1992 Lea	GOO YEA LANDFARM	-14-11 S-38 E	
23	J&L LANDFARM INC	05/10/1998 Lea	J&L LANDFARM	-9-20 S-38 E	
25	GANDY CORP	06/27/1973 Lea	Gandy Corp. Treating Plant	-11-10 S-35 E	
26	JENEX OPERATING CO	09/21/1983 Lea	JENEX TREATING PLANT	D-14-20 S-38 E	
30	ARTESIA AERATION LLC	06/29/1999 Lea	ARTESIA AERATION LANDFARM	-7-17 S-32 E	
32	SOUTH MONUMENT SURFACE WASTE FACILITY LLC	10/04/1999 Lea	SOUTH MONUMENT LANDFARM	A-25-36 S-20 E	
33	DOOM LANDFARM	04/03/2000 Lea	DOOM LANDFARM	g-5-25 S-37 E	
34	DD LANDFARM INC	04/12/2000 Lea	DD LANDFARM	-31-21 S-38 E	
21	RHINO OILFIELD DISPOSAL INC	11/17/1997 Lea	RHINO OILFIELD LANDFARM	-34-20 S-38 E	
44	COMMERCIAL EXCHANGE, INC.	11/01/2004 Lea	Blackwater Oil Reclamation Facility	d-1-25 S-37 E	
39	PITCHFORK LANDFARM LLC	10/30/2002 Lea	PITCHFORK LANDFARM	A-5-24 S-34 E	
> 6	CONTROLLED RECOVERY INC	04/27/1990 Lea	CONTROLLED RECOVERY	-27-20 S-32 E	
42	COMMERCIAL EXCHANGE, INC.	07/22/2004 Lea	Blackwater Landfarm	f-1-25 S-37 E	
38	SAUNDERS LANDFARM LLC	10/28/2002 Lea	SAUNDERS LANDFARM	M-7-14 S-34 E	
41	LAZY ACE LANDFARM LLC	03/09/2004 Lea	LAZY ACE LANDFARM	M-22-20 S-34 E	
3	SUNDANCE SERVICES, INC.	08/30/1977 Lea	SUNDANCE PARABO	m-29-21 S-38 E	
37	COMMERCIAL EXCHANGE, INC.	03/31/2003 Lea	COMMERCIAL SURFACE WM FACILITY	A-1-20 S-36 E	
8	T-N-T ENVIRONMENTAL INC	01/19/1987 Rio Arriba	TNT EVAP POND/LANDFARM	-8-25 N-3 W	
11	ENVIROTECH INC	07/07/1992 San Juan	ENVIROTECH LANDFARM #2	-6-26 N-10 W	
9	KEY FOUR CORNERS INC	04/02/1991 San Juan	KEY EVAP POND and Landfarm	E-2-29 N-12 W	
10	JFJ LANDFARM LLC	07/22/2002 San Juan	JFJ Land Farm Crouch Mesa (Formerly Tierra)	j-2-29 N-12 W	
5	BASIN DISPOSAL INC	10/16/1987 San Juan	BASIN DISPOSAL EVAP. POND	F-3-29 N-11 W	