Form C-144 C Revised August J
For closed-loop systems that only use above
ground steel tanks or haul-off bins and pro to implement waste removal for closure, su
to the appropriate NMOCD District Office.
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Application
nent waste removal for closure)
t. For any application request other than for a removal for closure, please submit a Form C-14
n pollution of surface water, ground water or the overnmental authority's rules, regulations or ordin
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County: ROOSEVELT
NAD: 1927 198
proval of a permit or notice of intent) 🔳 P&.
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heck mark in the box, that the documents are
of 19.15.17.9 NMAC and 19.15.17.13 NMAC
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<u>-off Bins Only</u> : (19.15.17.13.D NMAC) ill cuttings. Use attachment if more than two
mit Number: <u>NM 01-0019</u>
mit Number: NM 01-0003
t will not be used for future service and operation
section H of 19.15.17.13 NMAC AC
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best of my knowledge and belief.
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7. <u>OCD Approval</u> : Permit Application (including Closure plan) Closure Plan (only)		
OCD Representative Signature: Approval Date	te: 4-11-2013	
Title:OCD Permit Number:	te: 4-11-201= 1-06032	
^{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. <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: Disposal Facility Permit Number:		
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) 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: Date:		
e-mail address: Telephone:		

Halcón Holdings, Inc. (formerly RAM Energy, Inc.)

El Zorro E Federal #001 Unit O Sec. 28, T-08-S, R-37-E Roosevelt Co., NM API#: 30-041-20423

Equipment & Design:

Halcón Holdings, Inc. (formerly RAM Energy, Inc.) will use a closed loop system in the plug and abandonment of this well. The following equipment will be on location:

(1) 250 bbl steel reverse 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 NMOCD's rule 19.15.29.8.

Closure:

After plugging operations, fluids and solids will be hauled and disposed at Gandy-Marley Disposal's location, permit number NM 01-0019. Secondary site will be Sundance Disposal, permit number NM 01-0003.