District I HOBBS OCD 1625 N. French Dr., Hobbs, NM 88240 District III 1391 W. Grand Avenue, Artesia, NM 88210 9 2013 District III 1000 Rio Brazos Road, Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 EIVED	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.	
(that only use above ground st Instructions: Please submit one application (Form closed-loop system that only use above ground steel Please be advised that approval of this request does not	OGRID #: 025575	<u>ment waste removal for closure)</u> st. For any application request other than for a e removal for closure, please submit a Form C-144.	
U/L or Qtr/Qtr <u>M</u> Section <u>29</u> Center of Proposed Design: Latitude <u>N. 32</u> Surface Owner: A Federal State Private	Township22SRange32E .35618LongitudeW. 104.70382	ECounty: Lea NAD: 🛛 1927 🗍 1983	
 ^{2.} <u>Closed-loop System</u>: 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			
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. □ 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:			
5. Waste Removal Closure For Closed-loop System	18 That Utilize Above Ground Steel Tanks or Hau		
Required for impacted areas which will not be used Soil Backfill and Cover Design Specification Re-vegetation Plan - based upon the appropr Site Reclamation Plan - based upon the appr	d for future service and operations: ns based upon the appropriate requirements of Sub iate requirements of Subsection I of 19.15.17.13 NM opriate requirements of Subsection G of 19.15.17.13	bsection H of 19.15.17 AC NMAC NMAC NMAC NMAC NMAC NMAC NMAC NMAC NMAC NMAC	

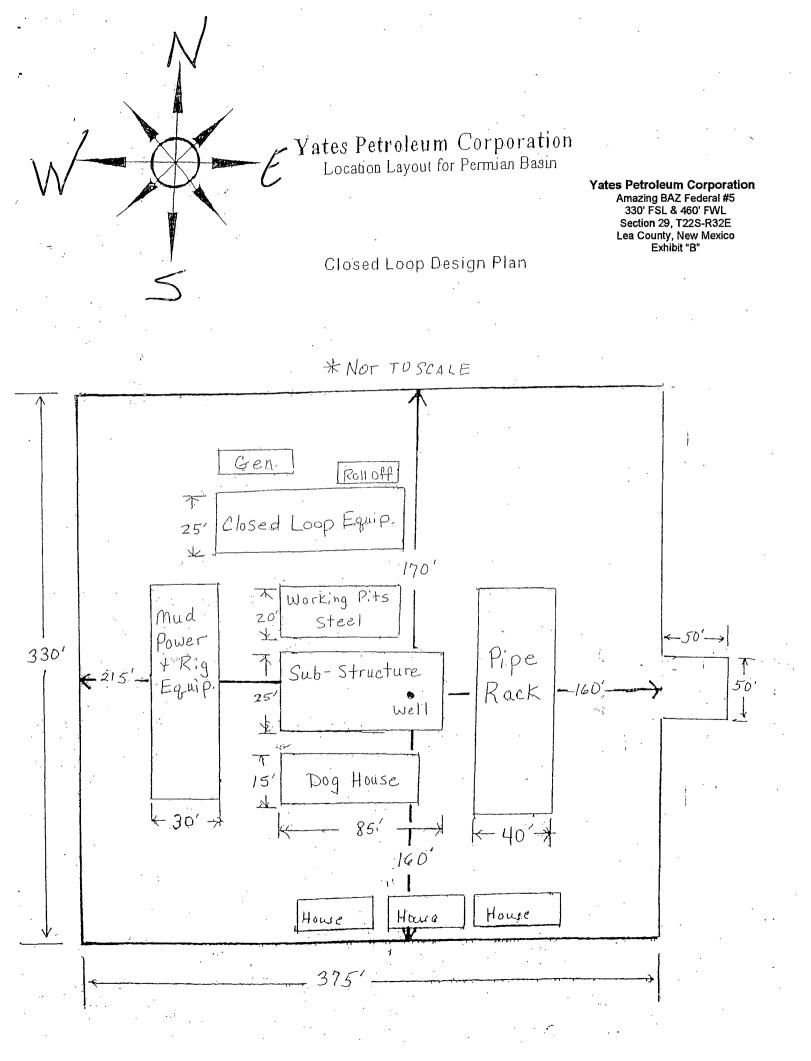
Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection H of 19.15.1
Re-vegetation Plan - based upon the appropriate requirements of Subsection I of 19.15.17.13 NMAC
Site Reclamation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC

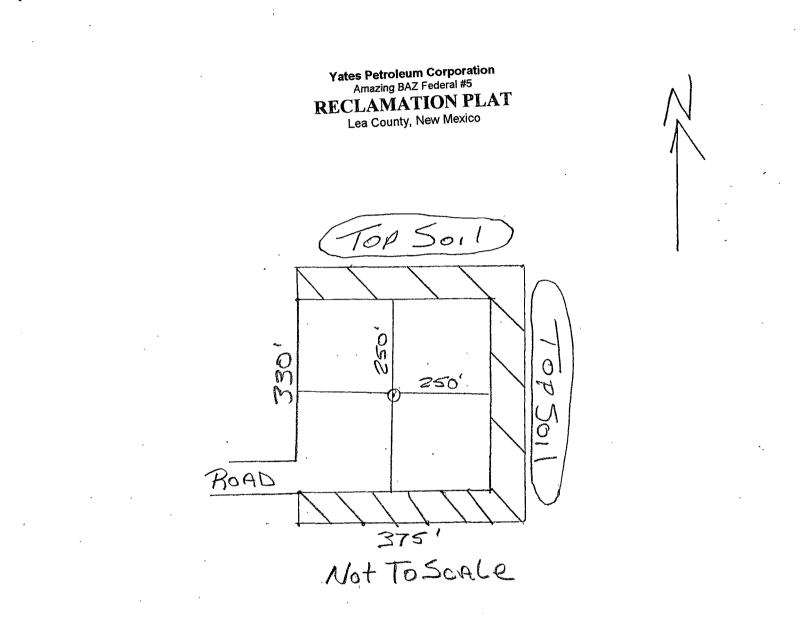


Oil Conservation Division

JUL 1 5 2013

6. Operator Application Certification: I hereby certify that the information Submitted with this application is true, accur	ate and complete to the best of my knowledge and belief		
· Name (Print): Cy Cewan	Title: Land Regulatory Agent		
Signature:	Date: 2/14/12		
e-mail address cy@yatespetroleum.com Telephone:	<u>575-748-4372</u>		
7. OCD Approval: Permit Application (including closure plan) Closure P	lan (only)		
OCD Representative Signature:	Approval Date: 07/10/13		
Title: Petroleum Engineer	Approval Date: <u>09/10/13</u> OCD Permit Number: <u>P1-06491</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. 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:			
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			
 <u>Operator Closure Certification</u>: 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:		
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THEFINAL Reclamation May Look Different THAM this PLAC

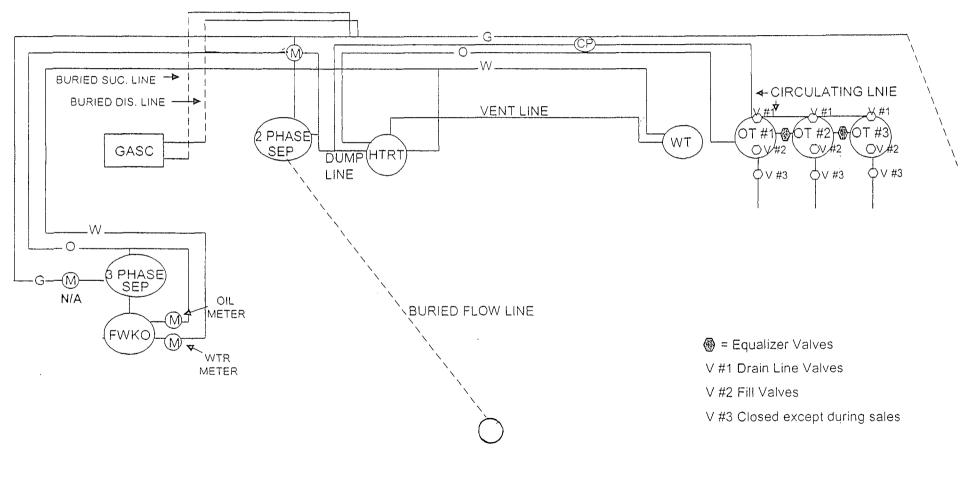
Possible Reclamed AREA



105 South 4th Street * Artesia, NM 88210 (575)-748-1471

> -Danny Matthews June, 2010

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