District I
1625 N. French Dr., Hobbs, NM 8824 PECEIVE By Minerals and Natural Resources
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410 V 2 3 2010
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

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

For temporary pits, closed-loop systems, and below-grade tanks, submit to the appropriate NMOCD District Office.

For permanent pits and exceptions submit to the Santa Fe Environmental Bureau office and provide a copy to the appropriate NMOCD District Office.

## Pit, Closed-Loop System, Below-Grade Tank, or Proposed Alternative Method Permit or Closure Plan Application

Type of action:	Permit of a pit, closed-loop system, below-grade tank, or proposed alternative method
	Closure of a pit, closed-loop system, below-grade tank, or proposed alternative method
	☐ Modification to an existing permit
	X Closure plan only submitted for an existing permitted or non-permitted pit, closed-loop
system, below-g	rade tank, or proposed alternative method

Instructions: Please submit one application (Form C-144) per individual pit, closed-loop system, below-grade tank or alternative request

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:MELROSE OPERATING COOGRID #:184860						
Address:20333 State Highway 249, Suite 310, Houston TX 77077						
Facility or well name:CONE JALMAT YATES POOL UNIT #144						
API Number: 0CD Permit Number: 0						
U/L or Qtr/Qtr G Section 24 Township 22S Range 35E County: LEA						
Center of Proposed Design: Latitude 32.377198°N Longitude 103.320727°W NAD: X 1927 1983						
Surface Owner:  Federal X State Private Tribal Trust or Indian Allotment						
2.						
X Pit: Subsection F or G of 19.15.17.11 NMAC						
Temporary: X Drilling  Workover						
☐ Permanent ☐ Emergency ☐ Cavitation ☐ P&A						
X Lined Unlined Liner type: Thickness20mil X LLDPE  HDPE PVC Other						
X String-Reinforced						
Liner Seams: Welded X Factory Other Volume: 3000_bbl Dimensions: L_85'_x W_85'_x D_5'_						
3.						
Closed-loop System: Subsection H of 19.15.17.11 NMAC						
Type of Operation: P&A Drilling a new well Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent)						
☐ Drying Pad ☐ Above Ground Steel Tanks ☐ Haul-off Bins ☐ Other						
Lined Unlined Liner type: Thicknessmil LLDPE HDPE PVC Other						
Liner Seams: Welded Factory Other Other						
Below-grade tank: Subsection I of 19.15.17.11 NMAC						
Volume:bbl Type of fluid:						
Tank Construction material:						
Secondary containment with leak detection Visible sidewalls, liner, 6-inch lift and automatic overflow shut-off						
☐ Visible sidewalls and liner ☐ Visible sidewalls only ☐ Other						
Liner type: Thicknessmil						
Liner type: Thicknessmil						

Fencing: Subsection D of 19.15.17.11 NMAC (Applies to permanent pits, temporary pits, and below-grade tanks)  Chain link, six feet in height, two strands of barbed wire at top (Required if located within 1000 feet of a permanent residence, school, hospital, institution or church)  Four foot height, four strands of barbed wire evenly spaced between one and four feet  X Alternate. Please specify_4' HIGH, 10 GAUGE, FIELD FENCE, 6" x 6" SQUARE PATTERN w/Tee Post EVERY 10', BARB WIRE ON TOP_  Netting: Subsection E of 19.15.17.11 NMAC (Applies to permanent pits and permanent open top tanks)  Screen Netting Other_				
Monthly inspections (If netting or screening is not physically feasible)				
8.  Signs: Subsection C of 19.15.17.11 NMAC  X 12"x 24", 2" lettering, providing Operator's name, site location, and emergency telephone numbers  Signed in compliance with 19.15.3.103 NMAC				
Administrative Approvals and Exceptions:  Justifications and/or demonstrations of equivalency are required. Please refer to 19.15.17 NMAC for guidance.  Please check a box if one or more of the following is requested, if not leave blank:  Administrative approval(s): Requests must be submitted to the appropriate division district or the Santa Fe Environmental Bureau office for consideration of approval.  Exception(s): Requests must be submitted to the Santa Fe Environmental Bureau office for consideration of approval.				
Siting Criteria (regarding permitting): 19.15.17.10 NMAC Instructions: The applicant must demonstrate compliance for each siting criteria below in the application. Recommendations of acceptable source material are provided below. Requests regarding changes to certain siting criteria may require administrative approval from the appropriate district office or may be considered an exception which must be submitted to the Santa Fe Environmental Bureau office for consideration of approval. Applicant must attach justification for request. Please refer to 19.15.17.10 NMAC for guidance. Siting criteria does not apply to drying pads or above-grade tanks associated with a closed-loop system.				
Ground water is less than 50 feet below the bottom of the temporary pit, permanent pit, or below-grade tank.  - NM Office of the State Engineer - iWATERS database search; USGS; Data obtained from nearby wells	Yes X No			
Within 300 feet of a continuously flowing watercourse, or 200 feet of any other significant watercourse or lakebed, sinkhole, or playa lake (measured from the ordinary high-water mark).  - Topographic map; Visual inspection (certification) of the proposed site	Yes X No			
Within 300 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.  (Applies to temporary, emergency, or cavitation pits and below-grade tanks)  - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image	☐ Yes X No ☐ NA			
Within 1000 feet from a permanent residence, school, hospital, institution, or church in existence at the time of initial application.  (Applies to permanent pits)  - Visual inspection (certification) of the proposed site; Aerial photo; Satellite image	Yes X No			
Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application.  - NM Office of the State Engineer - iWATERS database search; Visual inspection (certification) of the proposed site	Yes X No			
Within incorporated municipal boundaries or within a defined municipal fresh water well field covered under a municipal ordinance adopted pursuant to NMSA 1978, Section 3-27-3, as amended.  - Written confirmation or verification from the municipality; Written approval obtained from the municipality	Yes X No			
Within 500 feet of a wetland.  - US Fish and Wildlife Wetland Identification map; Topographic map; Visual inspection (certification) of the proposed site	Yes X No			
Within the area overlying a subsurface mine.  - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division	☐ Yes X No			
<ul> <li>Within an unstable area.</li> <li>Engineering measures incorporated into the design; NM Bureau of Geology &amp; Mineral Resources; USGS; NM Geological Society; Topographic map</li> </ul>				
Within a 100-year floodplain FEMA map	Yes X No			

Form C-144

Temporary Pits, Emergency Pits, and Below-grade Tanks 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.  Hydrogeologic Report (Below-grade Tanks) - based upon the requirements of Paragraph (4) of Subsection B of 19.15.17.9 NMAC  Hydrogeologic Data (Temporary and Emergency Pits) - based upon the requirements of Paragraph (2) of Subsection B of 19.15.17.9 NMAC  Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC  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 Boxes 14 through 18, if applicable) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC  X Previously Approved Design (attach copy of design) API Number:30-025-38921 or Permit Number:				
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.  Geologic and Hydrogeologic Data (only for on-site closure) - based upon the requirements of Paragraph (3) of Subsection B of 19.15.17.9  Siting Criteria Compliance Demonstrations (only for on-site closure) - based upon the appropriate requirements of 19.15.17.10 NMAC  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 Boxes 14 through 18, if applicable) - 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:(Applies only to closed-loop system that use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)				
above ground steet tanks or natit-off bins and propose to implement waste removal for closure)				
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.    Hydrogeologic Report - based upon the requirements of Paragraph (1) of Subsection B of 19.15.17.9 NMAC   Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of 19.15.17.10 NMAC   Climatological Factors Assessment   Certified Engineering Design Plans - based upon the appropriate requirements of 19.15.17.11 NMAC   Dike Protection and Structural Integrity Design - based upon the appropriate requirements of 19.15.17.11 NMAC   Leak Detection Design - based upon the appropriate requirements of 19.15.17.11 NMAC   Quality Control/Quality Assurance Construction and Installation Plan   Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC   Freeboard and Overtopping Prevention Plan - based upon the appropriate requirements of 19.15.17.11 NMAC   Nuisance or Hazardous Odors, including H <sub>2</sub> S, Prevention Plan   Emergency Response Plan   Oil Field Waste Stream Characterization   Monitoring and Inspection Plan   Erosion Control Plan   Closure Plan - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC				
Proposed Closure: 19.15.17.13 NMAC				
Instructions: Please complete the applicable boxes, Boxes 14 through 18, in regards to the proposed closure plan.  Type: X Drilling  Workover  Emergency  Cavitation  P&A Permanent Pit  Below-grade Tank  Closed-loop System  Alternative  Proposed Closure Method:  Waste Excavation and Removal  Waste Removal (Closed-loop systems only)  X On-site Closure Method (Only for temporary pits and closed-loop systems)  In-place Burial X On-site Trench Burial  Alternative Closure Method (Exceptions must be submitted to the Santa Fe Environmental Bureau for consideration)				
Waste Excavation and Removal Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the following items must be attached to the closure plan. Please indicate, by a check mark in the box, that the documents are attached.  X Protocols and Procedures - based upon the appropriate requirements of 19.15.17.13 NMAC  X Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of Subsection F of 19.15.17.13 NMAC  X Disposal Facility Name and Permit Number (for liquids, drilling fluids and drill cuttings)  X Soil Backfill and Cover Design Specifications - based upon the appropriate requirements of Subsection H of 19.15.17.13 NMAC  X Re-vegetation Plan - based upon the appropriate requirements of Subsection G of 19.15.17.13 NMAC				

14				
Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Instructions: Please indentify the facility or facilities for the disposal of liquids, facilities are required.				
Disposal Facility Name:	Disposal Facility Permit Number:			
Disposal Facility Name:	Disposal Facility Permit Number:			
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 operation  Soil Backfill and Cover Design Specifications based upon the appropriate Re-vegetation Plan - based upon the appropriate requirements of Subsection Site Reclamation Plan - based upon the appropriate requirements of Subsection	e requirements of Subsection H of 19.15.17.13 NMA0 a I of 19.15.17.13 NMAC	C		
Siting Criteria (regarding on-site closure methods only): 19.15.17.10 NMAC Instructions: Each siting criteria requires a demonstration of compliance in the provided below. Requests regarding changes to certain siting criteria may required considered an exception which must be submitted to the Santa Fe Environmental demonstrations of equivalency are required. Please refer to 19.15.17.10 NMAC	re administrative approval from the appropriate dista al Bureau office for consideration of approval. Justi	rict office or may be		
Ground water is less than 50 feet below the bottom of the buried waste.  - NM Office of the State Engineer - iWATERS database search; USGS; Database search; USG	ta obtained from nearby wells	Yes X No		
Ground water is between 50 and 100 feet below the bottom of the buried waste - NM Office of the State Engineer - iWATERS database search; USGS; Database search;	ta obtained from nearby wells	☐ Yes X No ☐ NA		
Ground water is more than 100 feet below the bottom of the buried waste.  - NM Office of the State Engineer - iWATERS database search; USGS; Database search;	ta obtained from nearby wells	X Yes No		
Within 300 feet of a continuously flowing watercourse, or 200 feet of any other signake (measured from the ordinary high-water mark).  - Topographic map; Visual inspection (certification) of the proposed site	gnificant watercourse or lakebed, sinkhole, or playa	Yes X No		
Within 300 feet from a permanent residence, school, hospital, institution, or church - Visual inspection (certification) of the proposed site; Aerial photo; Satellit		☐ Yes X No		
Within 500 horizontal feet of a private, domestic fresh water well or spring that less than five households use for domestic or stock watering purposes, or within 1000 horizontal feet of any other fresh water well or spring, in existence at the time of initial application.  - NM Office of the State Engineer - iWATERS database; Visual inspection (certification) of the proposed site				
Within incorporated municipal boundaries or within a defined municipal fresh was adopted pursuant to NMSA 1978, Section 3-27-3, as amended.  - Written confirmation or verification from the municipality; Written approx		Yes X No		
Within 500 feet of a wetland.  - US Fish and Wildlife Wetland Identification map; Topographic map; Visu	al inspection (certification) of the proposed site	☐ Yes X No		
Within the area overlying a subsurface mine.  - Written confirmation or verification or map from the NM EMNRD-Mining and Mineral Division				
Within an unstable area.  - Engineering measures incorporated into the design; NM Bureau of Geolog Society; Topographic map	y & Mineral Resources; USGS; NM Geological	Yes X No		
Within a 100-year floodplain FEMA map		Yes X No		
On-Site Closure Plan Checklist: (19.15.17.13 NMAC) Instructions: Each of the by a check mark in the box, that the documents are attached.  X Siting Criteria Compliance Demonstrations - based upon the appropriate requirements of X Proof of Surface Owner Notice - based upon the appropriate requirements of X Construction/Design Plan of Burial Trench (if applicable) based upon the appropriate requirements of 19.1:  X Protocols and Procedures - based upon the appropriate requirements of 19.1:  X Confirmation Sampling Plan (if applicable) - based upon the appropriate requirements of X Disposal Facility Name and Permit Number (for liquids, drilling fluids and X Soil Cover Design - based upon the appropriate requirements of Subsection X Re-vegetation Plan - based upon the appropriate requirements of Subsection X Site Reclamation Plan - based upon the appropriate requirements of Subsection	uirements of 19.15.17.10 NMAC Subsection F of 19.15.17.13 NMAC proportiate requirements of 19.15.17.11 NMAC ad) - based upon the appropriate requirements of 19.15.17.13 NMAC uirements of Subsection F of 19.15.17.13 NMAC Subsection F of 19.15.17.13 NMAC lrill cuttings or in case on-site closure standards cannot H of 19.15.17.13 NMAC I of 19.15.17.13 NMAC	5.17.11 NMAC		

Operator Application Certification:				
I hereby certify that the information submitted with this application is	s true, accurate and complete to the best of my knowledge and belief.			
Name (Print):Billy C. Robbins	Title: Production Forman			
21				
Signature: Surg C. Roucus	Date: 11/23/10			
e-mail address:maximum@valornet.com	Telephone:575-390-4666			
20,				
OCD Approval: Permit Application (including closure plan)	Closure Plan (only) OCD Conditions (see attachment)			
OCD Representative Signature:	Approval Date:			
	01 521 -7			
Title:	OCD Permit Number:			
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:				
22.				
Closure Method:  ☐ Waste Excavation and Removal ☐ On-Site Closure Method ☐ If different from approved plan, please explain.	☐ Alternative Closure Method ☐ Waste Removal (Closed-loop systems only)			
23.				
	op Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: liquids, drilling fluids and drill cuttings were disposed. Use attachment if more than			
Disposal Facility Name:	Disposal Facility Permit Number:			
Disposal Facility Name:				
Were the closed-loop system operations and associated activities performed Yes (If yes, please demonstrate compliance to the items below)	ormed on or in areas that <i>will not</i> be used for future service and operations?  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				
Closure Report Attachment Checklist: Instructions: Each of the following items must be attached to the closure report. Please indicate, by a check mark in the box, that the documents are attached.  Proof of Closure Notice (surface owner and division) Proof of Deed Notice (required for on-site closure) Plot Plan (for on-site closures and temporary pits) Confirmation Sampling Analytical Results (if applicable) Waste Material Sampling Analytical Results (required for on-site closure) Disposal Facility Name and Permit Number Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique Site Reclamation (Photo Documentation) On-site Closure Location: Latitude Longitude NAD: 1927 1983				
25. Operator Closure Certification:				
Operator Closure Certification:  I hereby certify that the information and attachments submitted with the control of the certification.	his closure report is true, accurate and complete to the best of my knowledge and			
	ure requirements and conditions specified in the approved closure plan.			
Name (Print):	Title:			
Signature:	Date:			
e-mail address:	Telephone:			