

## ENTERPRISE PERMIAN

Preparer Code: 135476534  
 Statement Title: Measurement Audit Statement(Differential)  
 MEAS Contact: AMY CARROLL (713)381-6321  
 STMT Contact: MARCUS WARE (713)381-7816

## Accounting/Production Period: 04/2021

Meter ID: 68725-01  
 Meter Name: OCOTILLO 6 CPD  
 BTU Basis: Dry  
 Reporting Basis: MCF @ 14.730

## DEVON ENERGY PRODUCTION COMPANY, L.P.

Recipient Code: 088003756  
 Location Code: NA DRN  
 Report Date/Time: 06/07/2021 13:41  
 Federal Lease:

## CERTIFICATE OF ANALYSIS

Sample Id: 68725  
 Sample Desc: OCOTILLO STATE 6

District: 652 - INDIAN BASIN

Effective Date: 03/01/2021 09:00  
 Sample Date: 02/01/2021 00:00  
 Analyzed Date:  
 Sample Freq: QUARTERLY

Sample Type: SPOT  
 Sampled By:  
 Analyzed By: FSLAB  
 GPA Version: 2145-16

Device: (No spec equip)  
 Chrom ID: N/A

Sample Temp (F): 59.0  
 Sample Press (PSIG): 318.0  
 Press Base: 14.73

| Component     | Mole %   | GPM    | Others            | Mole % | GPM    |
|---------------|----------|--------|-------------------|--------|--------|
| Methane       | 80.8777  | 0.0000 | Carbon Dioxide    | 0.1094 | 0.0000 |
| Ethane        | 10.6060  | 2.8452 | H2S               | 0.0001 | 0.0000 |
| Propane       | 4.3427   | 1.2001 | Nitrogen          | 1.1819 | 0.0000 |
| Iso Butane    | 0.6820   | 0.2239 | * Hydrogen        | 0.0000 | 0.0000 |
| Butane        | 1.3339   | 0.4218 | * Oxygen          | 0.0000 | 0.0000 |
| Iso Pentane   | 0.3140   | 0.1152 | * Helium          | 0.0000 | 0.0000 |
| Pentane       | 0.2911   | 0.1058 | * Argon           | 0.0000 | 0.0000 |
| NeoPentane    | 0.0000   | 0.0000 | * Carbon Monoxide | 0.0000 | 0.0000 |
| Hexane        | 0.2612   | 0.1169 |                   |        |        |
| * Heptane     | 0.0000   | 0.0000 | Sub Total Others  | 1.2914 | 0.0000 |
| * Octane      | 0.0000   | 0.0000 |                   |        |        |
| * Nonane      | 0.0000   | 0.0000 |                   |        |        |
| * Decane      | 0.0000   | 0.0000 |                   |        |        |
| Sub Total GPM | 98.7086  | 5.0289 |                   |        |        |
| Others        | 1.2914   | 0.0000 |                   |        |        |
| Total         | 100.0000 | 5.0289 |                   |        |        |

Gravity: 0.7038  
 Dry BTU: 1224.4  
 Wet BTU: 1203.1

\* Not Tested

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 Wet BTU: 1203.1

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**District I**

1625 N. French Dr., Hobbs, NM 88240  
Phone:(575) 393-6161 Fax:(575) 393-0720

**District II**

811 S. First St., Artesia, NM 88210  
Phone:(575) 748-1283 Fax:(575) 748-9720

**District III**

1000 Rio Brazos Rd., Aztec, NM 87410  
Phone:(505) 334-6178 Fax:(505) 334-6170

**District IV**

1220 S. St Francis Dr., Santa Fe, NM 87505  
Phone:(505) 476-3470 Fax:(505) 476-3462

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

QUESTIONS

Action 39293

**QUESTIONS**

|                                                                                          |                                                        |
|------------------------------------------------------------------------------------------|--------------------------------------------------------|
| Operator:<br>CHISHOLM ENERGY OPERATING, LLC<br>801 Cherry Street<br>Fort Worth, TX 76102 | OGRID:<br>372137                                       |
|                                                                                          | Action Number:<br>39293                                |
|                                                                                          | Action Type:<br>[C-129] Venting and/or Flaring (C-129) |

**QUESTIONS****Determination of Reporting Requirements**

Answer all questions that apply. The Reason(s) statements are calculated based on your answers and may provide additional guidance.

|                                                                                                                                                                                                                                                                                          |                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| Was or is this venting or flaring caused by an emergency or malfunction                                                                                                                                                                                                                  | Yes                                           |
| Did or will this venting or flaring last eight hours or more cumulatively within any 24-hour period from a single event                                                                                                                                                                  | No                                            |
| Is this considered a submission for a notification of a major venting or flaring                                                                                                                                                                                                         | Yes, minor venting or flaring of natural gas. |
| The operator shall file a form C-141 instead of a form C-129 for a release that includes liquid during venting or flaring that is or may be a major or minor release under 19.15.297 NMAC                                                                                                |                                               |
| Was there or will there be at least 50 MCF of natural gas vented or flared during this event                                                                                                                                                                                             | Yes                                           |
| Did this venting or flaring result in the release of ANY liquids (not fully and/or completely flared) that reached (or has a chance of reaching) the ground, a surface, a watercourse, or otherwise, with reasonable probability, endanger public health, the environment or fresh water | No                                            |

**Unregistered Facility Site**

Please provide the facility details, if the venting or flaring occurred or is occurring at a facility that does not have an Facility ID (##) yet.

|                       |                                 |
|-----------------------|---------------------------------|
| Facility or Site Name | OCOTILLO 6-31 STATE COM BATTERY |
| Facility Type         | Tank Battery - (TB)             |

**Equipment Involved**

|                                                           |                |
|-----------------------------------------------------------|----------------|
| Primary Equipment Involved                                | Producing Well |
| Additional details for Equipment Involved. Please specify | Not answered.  |

**Representative Compositional Analysis of Vented or Flared Natural Gas**

Please provide the mole percent for the percentage questions in this group.

|                                                                                                                               |               |
|-------------------------------------------------------------------------------------------------------------------------------|---------------|
| Methane (CH4) percentage                                                                                                      | 81            |
| Nitrogen (N2) percentage, if greater than one percent                                                                         | 0             |
| Hydrogen Sulfide (H2S) PPM, rounded up                                                                                        | 0             |
| Carbon Dioxide (CO2) percentage, if greater than one percent                                                                  | 0             |
| Oxygen (O2) percentage, if greater than one percent                                                                           | 0             |
| If you are venting and/or flaring because of Pipeline Specification, please provide the required specifications for each gas. |               |
| Methane (CH4) percentage quality requirement                                                                                  | Not answered. |
| Nitrogen (N2) percentage quality requirement                                                                                  | Not answered. |
| Hydrogen Sulfide (H2S) PPM quality requirement                                                                                | Not answered. |
| Carbon Dioxide (CO2) percentage quality requirement                                                                           | Not answered. |
| Oxygen (O2) percentage quality requirement                                                                                    | Not answered. |

**Date(s) and Time(s)**

|                                                                                     |            |
|-------------------------------------------------------------------------------------|------------|
| Date venting or flaring was discovered or commenced                                 | 07/12/2021 |
| Time venting or flaring was discovered or commenced                                 | 06:00 AM   |
| Is the venting or flaring event complete                                            | Yes        |
| Date venting or flaring was terminated                                              | 07/14/2021 |
| Time venting or flaring was terminated                                              | 11:00 PM   |
| Total duration of venting or flaring in hours, if venting or flaring has terminated | 7          |
| Longest duration of cumulative hours within any 24-hour period during this event    | 5          |

**Measured or Estimated Volume of Vented or Flared Natural Gas**

|                                                                        |                                                                                                                      |
|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|
| Natural Gas Vented (Mcf) Details                                       | Cause: Equipment Failure   Producing Well   Natural Gas Vented   Spilled: 0 Mcf   Recovered: 0 Mcf   Lost: 0 Mcf     |
| Natural Gas Flared (Mcf) Details                                       | Cause: Equipment Failure   Producing Well   Natural Gas Flared   Spilled: 487 Mcf   Recovered: 0 Mcf   Lost: 487 Mcf |
| Other Released Details                                                 | Not answered.                                                                                                        |
| Additional details for Measured or Estimated Volume(s). Please specify | Not answered.                                                                                                        |
| Is this a gas only submission (i.e. only Mcf values reported)          | Yes, according to supplied volumes this appears to be a "gas only" report.                                           |

**Venting or Flaring Resulting from Downstream Activity**

|                                                                        |               |
|------------------------------------------------------------------------|---------------|
| Was or is this venting or flaring a result of downstream activity      | No            |
| Date notified of downstream activity requiring this venting or flaring | Not answered. |
| Time notified of downstream activity requiring this venting or flaring | Not answered. |

**Steps and Actions to Prevent Waste**

|                                                                                                                                |                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| For this event, the operator could not have reasonably anticipated the current event and it was beyond the operator's control. | True                                                                 |
| Please explain reason for why this event was beyond your operator's control                                                    | COMPRESOR WENT DOWN CAUSING FLARE VOLUMES                            |
| Steps taken to limit the duration and magnitude of venting or flaring                                                          | CALLED COMPRESSION COMPAY TO FIX COMPRESSOR                          |
| Corrective actions taken to eliminate the cause and reoccurrence of venting or flaring                                         | COMPRESSION COMPANY REPAIRED MECHANICAL FAILURE WHICH CEASED FLARING |

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CONDITIONS  
  
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|                                                                                          |                                                        |
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|                                                                                          | Action Number:<br>39293                                |
|                                                                                          | Action Type:<br>[C-129] Venting and/or Flaring (C-129) |

CONDITIONS

| Created By | Condition                                                                                                                                                                            | Condition Date |
|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| system     | If the information provided in this report requires an amendment, submit a [C-129] Request to Amend Venting and/or Flaring Incident, utilizing your incident number from this event. | 8/2/2021       |