API 30-021-20504

WBDGU 1930-191J (pleviously Mitchell 1930-191J) **Operator Application Certification:** I hereby certify that the information submitted with this application is true, accurate and complete to the best of my knowledge and belief. Name (Print): Rita C. Smith Title: Engineer Tech Signature: Rita C. Smith Office of the Control of t 4/19/2010 e-mail address: rsmith@hess.com Telephone: (432)758-6726 OCD Approval: Permit Application (including closure plan) Closure Plan (only) OCD Conditions (see attachment) _____ Approval Date: 4/27/10 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: Closure Method: ☐ Waste Excavation and Removal (X) on-Site Closure Method ☐ Alternative Closure Method ☐ Waste Removal (Closed-loop systems only) ☐ If different from approved plan, please explain. Closure Report Regarding Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Steel Tanks or Haul-off Bins Only: 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 Permit Number: Disposal Facility Name: Disposal Facility Name: Disposal Facility Permit Number: Were the closed-loop system operations and associated activities performed on or in areas that will not 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 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

Per offgiral C-144 Site Reclamation (Photo Documentation) on)
35° 51.6337' N Longitude /03° 47.4680' W NAD: 1927 1983 On-site Closure Location: Latitude **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. Holcomb Title: Facilities Team Lead _____ Date: Signature: dholcomb@hess.com _____ Telephone: 575-673-6700 X 5001 e-mail address:

NMOCD Closure Notice

1930-1915

Holcomb, Danny

From: Martin, Ed, EMNRD [ed.martin@state.nm.us]

Sent: Thursday, May 13, 2010 7:27 AM

To: Holcomb, Danny

Subject: RE: WEST BRAVO DOME

You are allowed to mix the contents of the pit on 1929-221J to dilute the concentration down to below 3000 mg/Kg. Maximum mixing ration is 3:1. This should get it down below acceptable limit.

When you get ready to close these pits, may I have a tentative schedule? I would like to be out there.

Ed Martin

District IV Supervisor New Mexico Oil Conservation Division 1220 S. St. Francis Santa Fe, NM 87505 505-476-3470 phone 505-476-3462 fax 505-690-2365 cell ed.martin@state.nm.us

From: Holcomb, Danny [mailto:dholcomb@hess.com]

Sent: Wednesday, May 12, 2010 6:39 PM

To: Martin, Ed, EMNRD

Subject: FW: WEST BRAVO DOME

Ed.

Here are the temporary pit content composite test results for the first three wells. It appears that two of them are within the limits and one exceeds the limits.

Danny

From: Celey Keene [mailto:celey.keene@cardinallabsnm.com]

Sent: Wednesday, May 12, 2010 4:03 PM

To: Holcomb, Danny

Subject: WEST BRAVO DOME

THANK YOU,

Celey Keene Lab Director Cardinal Laboratories 101 East Marland Hobbs, NM 88240

T: (575) 393-2326 F: (575) 393-2476

e-mail: celey.keene@cardinallabsnm.com

This e-mail and any attachments are for the sole use of the intended recipient(s) and may contain information that is confidential. If you are not the intended recipient(s) and have received this e-mail in error, please immediately notify the sender by return e-mail and delete this e-mail from your computer.

Holcomb, Danny

From:

Holcomb, Danny

Sent:

Tuesday, June 01, 2010 12:49 PM

To:

'Mitchell, Terry'

Subject:

Hess Work Plans This Week

Landowner Closure Notice

Terry,

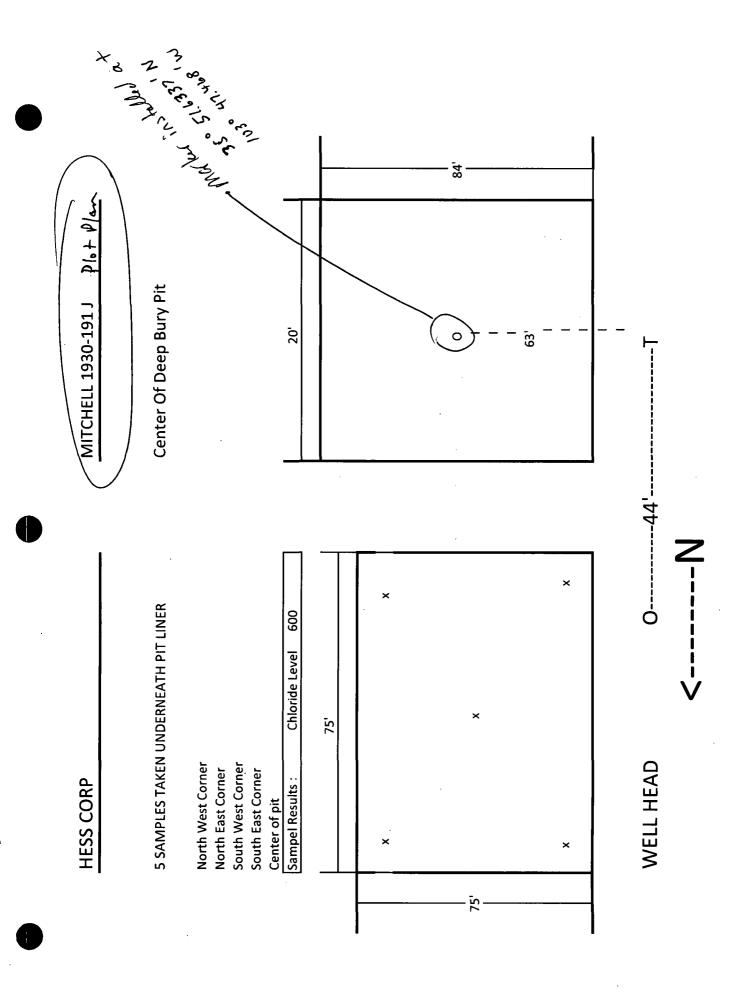
We will have Schlumberger's perforating crew here tomorrow perforating 1830-181B (valley well by David Hill).

Sweatt should start working on recrowning Tequesquite Lane today or tomorrow.....per your request.

Sweatt will also be covering drilling pits on 191J and 221J this week.

The drilling rig should be moving off the well on Mary Byrd Thursday and onto the add-on well of yours at the end of Brown Road.

If you have any questions, please let me know. thanks, Danny





ANALYTICAL RESULTS FOR HESS CORPORATIONS ATTN: DANNY HOLCOMB

HC 72, BOX 30

MOSQUERO, NM 87733 FAX TO: (575) 673-6709

Receiving Date: 05/07/10 Reporting Date: 05/11/10

5/11/10

Project Number: WBD Project Name: WBD

Project Location: WEST BRAVO DOME

Sampling Date: NOT GIVEN

Sample Type: SOIL

Sample Condition: COOL & INTACT @ 5°C

Sample Received By: JH Analyzed By: AB/HM

Analyzed by: AB/HIV

418.1

GRO DRO TOTAL

 (C_6-C_{10}) (> $C_{10}-C_{28}$)

TPH

CI*

LAB NUMBER SAMPLE ID

(mg/kg) (mg/kg)

(mg/kg)

(mg/kg)

ANALYSIS DATE	05/10/10	05/10/10	05/11/10	05/07/10
H19843-1 19 30-18 1E	<10.0	39.0	721	1,900
H19843-2 1930-191J	<10.0	77.0	320	2,520
H19843-3 1929-221J	<10.0	26.5	2,870	6,600
Quality Control	491	476	287	500
True Value QC	500	500	300	500
% Recovery	98.2	95.2	95.7	100
Relative Percent Difference	1.7	1.8	1.5	<0.1

METHODS: TPH GRO & DRO: EPA SW-846 8015 M; EPA 418.1; CI-: Std. Methods 4500-CI-B *Analyses performed on 1:4 w:v aqueous extracts. Reported on wet weight. Not accredited for GRO/DRO, TPH 418.1 and Chloride.

Chemist

Date



ANALYTICAL RESULTS FOR HESS CORPORATION ATTN: DANNY HOLCOMB HC 72, BOX 30

MOSQUERO, NM 87733 FAX TO: (575) 673-6709

Receiving Date: 05/07/10 Reporting Date: 05/11/10 Project Number: WBD

Project Name: WBD

Project Location: WEST BRAVO DOME

Sampling Date: NOT GIVEN

Sample Type: SOIL

Sample Condition: COOL & INTACT @5 °C

Sample Received By: JH

Analyzed By: ZL

LAB NUMBE SAMPLE ID	BENZENE (mg/kg)	TOLUENE (mg/kg)	ETHYL BENZENE (mg/kg)	TOTAL XYLENES (mg/kg)
ANALYSIS DATE	05/10/10	05/10/10	05/10/10	05/10/10
H19843-1 1930-181F	<0.050	<0.050	<0.050	< 0.300
H19843-2 (1930-191J)	<0.050	<0.050	<0.050	<0.300
H19843-3 1936-221J	<0.050	<0.050	<0.050	<0.300
Quality Control	0.020	0.023	0.022	0.064
True Value QC	0.020	0.020	0.020	0.060
% Recovery	100	115	110	107
Relative Percent Difference	7.0	2.0	2.0	3.1

METHOD: EPA SW-846 8021B

TEXAS NELAP CERTIFICATION T104704398-08-TX FOR BENZENE, TOLUENE, ETHYL BENZENE, AND TOTAL XYLENES. Reported on wet weight.

AND TOTAL XTELLINES. A COPORTED ON WELL WEIGHT

Chemist

Date